

## THE CITY OF NEW YORK MANHATTAN COMMUNITY BOARD 3

59 East 4th Street - New York, NY 10003 Phone (212) 533-5300 www.cb3manhattan.org - mn03@cb.nyc.gov

Al	ysha	Lewis-C	Coleman, I	Board Chair		Susan Stetzer, District Manager		
			Cor	mmunity Board 3 Liquor License St	ipulations for Ad	Iministrative Approval		
Ļ_	1	IAL	Liu	, as a qualified repres	entative of	92 Rivington Street Inc		
loc	ated	at	92	Rivington Street	, New York,	NY agree to the following stipulations:		
1.				rvice restaurant, specifically a (type ring food every night during all hour				
2.	Mo	MZLIn	peration will TO LLP	H: TUE 12PH TO LIPE	(; Wed 12 P	M TO 11 PH O 11 PM; Sun 12 PH TO 11 PH		
(I u	inder	stand oper	ning is no late	er than specified opening hour & all	patrons are to b	be cleared from business at specified closing hour)		
3.	X	I will not	use outdoor	space for commercial use.				
4.		I will oper	ate my sidev	walk café no later than				
5.		I will emp	loy a doorma	an/security personnel on the follow	ing days:			
6.		I will insta	ill soundprod	ofing,				
7.	at 1 play	0:00 P.M. ring, includ	every night o	r rear façade doors and windows or when amplified sound is imited to DJs, live music and live	windows e or when a	have a closed fixed façade with no open doors or except my entrance door will close by 10:00 P.M. implified sound is playing, including but not limited imusic and live nonmusical performances.		
8.	I will not have 🖾 DJs, 🖾 live music, 🖾 promoted events, 🖾 any event at which a cover fee is charged, 🖾 scheduled performances, 🗆 more than DJs/ promoted events per, 🗆 more than private parties per							
9.	X	I will play	ambient rec	orded background music only.				
10.		I will not apply for an alteration to the method of operation or for any physical alterations of any nature without first coming before CB 3.						
11.	$\times$	I will not seek a change in class to a full on-premises liquor license without first obtaining approval from CB 3.						
12.	$\boxtimes$	I will not p	oarticipate in	pub crawls or have party buses cor	me to my establi	shment.		
13.	X	I will not h	nave unlimite	ed drink specials, including boozy b	runches, with foo	nd. /		
14.	□ I will not have a happy hour or drink specials with or without time limitations OR II will have happy hour and it will end by ¬ PI Please indicate one of the above -							
15.	$\boxtimes$	I will not h	nave wait line	es outside. 🗆 I will have a staff pers	on responsible f	or ensuring no loitering, noise or crowds outside.		
16.	X	I will cons	picuously po	st this stipulation form beside my li	quor license insi	de of my business.		
	revi	sit the abo	ve-stated me		rder to minimize	mplaints will be addressed immediately. I will my establishment's impact on my neighbors.		
Na	me:_	MAY	Liu		Phone N	umber:917-388-3684		
18.		will:		ale de la constant de				
	-							
X	reby	certify the	at the inform	nation provided above is truthful a	nd accurate base	ed upon my personal belief.		
_		this 🔎	3 day	of <u>OC</u>		Notary Public  JOSE ROJAS  Notary Public. State of New York  No. 01R0s113154  Qualified in New York County		
					/	Commission Expires July 19, 20		



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Alysha Lewis-Coleman, Board Chair

Susan Stetzer, District Manager

	Community Board 3 Liquor License Application Questionnaire					
	Today's Date: OCTOPER 21, 2019					
	APPLICANT					
1.	Name of applicant and principle(s): 92 RIVINGTON STREET, INC.					
	Premise address: 92 RIVINGTON STREET NY. NY. 10002					
	Cross streets: LUDON AND ORCHARD					
	Trade name (DBA): NOODLE SHOP					
	Check which you are applying to: New liquor licence Alteration of an existing license					
6.	If alteration, describe nature of alteration:					
7.	Is location currently licensed? Yes No					
8.	Type of license: BEER + WINE					
9,	Previous orcurrent use of the location: RESTAURANT					
10.	Corporation and trade name of current location: 92 RIVINGTON STREET, INC. D/B/A M  Type of building and number of floors:  NORDE SHOP USE. 5 STORIES					
11.	Type of building and number of floors: NOODLE SHOP LIKE USE, 5 STOPLES					
12.	Does premise have a valid Certificate of Occupancy and all appropriate permits, including for any back or side yard use? Yes No 12a. What is the permitted occupancy indoors and outdoors?					
13,	Do you plan to apply for Public Assembly permit? Yes No					
14.	What is the zoning designation (check zoning usingmap: http://gis.nvc.gov/doitt/nvcitymap/-please give specific zoning					
	designation, such as R8 or C2): CA - AA					
15.	How many licensed establishments are within 1 block?					
16.	How many On-Premise (OP) liquor licenses are within 500 feet?					
17.	Is premise within 200 feet of any school or place of worship? Yes No					
	PROPOSED METHOD OF OPERATION					
18.	Describe your method of operation: Full SERVICE RESTAURANT					
19.	Will any other business besides foodor alcohol service beconducted at premise? Yes No					
20.	If yes, please describe what type: N/A					
	What are the proposed days/hours of operation (specify days/hours each day and hours of outdoor space if applicable:					
	12PU TO 11 PM DAI/ U 22 Total number of table: 12 23. Total number of seats: 36					

24.	How many stand-up bars/ bar seats are located on the premise?(A stand up bar is any bar
	or counter, whether with scating or not, over which a patron can order, pay for, and receive an alcholic beverage.)
25,	Describe all bars (length, shape, and location): RECTANYULAR, 48 INCHES WIDE, 23 INCHES DE
26,	Does premise have a full kitchen? Yes No 42 NOHES HIGH
27.	What are the hours kitchen will be open? 12 PM TO 11 PM DAILY
28.	What type of food is available for sale? NOODE, RICE PLATTERS + APPETIZERS
29.	Will a manager or principal always be on site? Yes No If yes, which?
30.	How many employees will there be?
31.	Do you have or plan to install French doors accordion doors or windows?
32.	Will there be TVs/monitors? Yes No (If Yes, how many?) 1/A
33, W	/ill premise have music? Yes No 33a. If Yes, what type of music? Live Music Juke box
34.	If other type, please describe: N/A
35.	What will be the music volume? Background (quiet) Entertainment level
36.	Please describe your sound system: 50005
37.	Will you host any promoted events, scheduled performances or any event at which a cover fee is charged? Yes
38.	If Yes, what type of events or performances are proposed and how often?  N/A
39	How do you plan to manage vehicular traffic and crowds on the sidewalk caused by your establishment? TAKE.
	THEIR PHONE NUMBER AND ASK THEM TO WAIT ELSE NHERE.
40.	Will there be security personnel? Yes No 40a, If Yes, how many and when? No
41.	How do you plan to manage noise inside and outside your business so neighbors will not be affected? SOUND YROOF
42. D	to you have sound proofing installed? Yes No 43. If not, do you plan to install sound-proofing? Yes No
	APPLICANT HISTORY  Has this corporation or any principal been licensed previously? Wes No I/yes, please indicate name of
44.	Has this corporation or any principal been licensed previously? MYes No I/yes, please indicate name of establishment(s): HARVEST OF THE SEA, U.C. DIBIA CHARUSCA
45.	Address: 92 RIVINGTON STREET, NY. NY. 1000 2 47. Community Board # 3
46.	Dates of operation: 154/19 To 6/15/19
47.	Has any principal had work experience similar to the proposed business?   Yes No If yes, explanation of experience or resume.   MAY LIU THE DINNER HAS RESTAURANT WANACEHED.
48.	Does any principal have other businesses in this area? Yes No If yes, give trade name and describe type of
	business: W/A
49.	Has any principal had SLA reports or action within the past 3 years? Yes No If yes, attach list of
	violations and dates of violations and outcomes.
COMMU	NITY OUTREACH
Please see th	ne Community Board website to find block associations or tenant associations in the immediate vicinity of your location for
community	outreach. Applicants are encouraged to reach out to community groups.