

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

Alysha Lewis-Coleman, Board Chair

Susan Stetzer, District Manager

Community Board 3 Liquor License Application Questionnaire

Please bring the following items to the meeting:

| NOTE: ALL ITEMS MUST BE SUBMITTED FOR APPLICATION TO BE CONSIDERED. |
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| Photographs of the inside and outside of the premise. Schematics, floor plans or architectural drawings of the inside of the premise. |
| ☐ A proposed food and or drink menu. |
| Petition in support of proposed business or change in business with signatures from residential tenants at location and in buildings adjacent to, across the street from and behind proposed location. Petition must give proposed hours and method of operation. For example: restaurant, sports bar, combination restaurant/bar. (petition provided) |
| Notice of proposed business to block or tenant association if one exists. You can find community groups and contact information on the CB 3 website: |
| http://www.nyc.gov/html/mancb3/html/communitygroups/community group listings.shtml Proof of conspicuous posting of notices at the site for 7 days prior to the meeting (please include newspaper with date in photo or a timestamped photo). |
| Check which you are applying for: ☐ new liquor license ☐ corporate change |
| Check if either of these apply: sale of assets upgrade (change of class) of an existing liquor license |
| Today's Date: |
| If applying for sale of assets, you must bring letter from current owner confirming that you are buying business or have the seller come with you to the meeting. Is location currently licensed? Yes No Type of license: Wine well seller. |
| If alteration, describe nature of alteration: VP GRADE |
| Previous or current use of the location: SCAFOOD RESTAURANT |
| Corporation and trade name of current license: ESSEX PEARL BY AQUAREST LLC |
| APPLICANT: |
| Premise address: 115 DELANCEY ST. NY NY 10002 |
| Premise address: |
| Name of applicant and all principals: ESSEX PEARL BY AQUABEST LICE PREEMAN WONG STEVEN WONG LINA WONG |
| Trade name (DBA): ESSEY PEARL |

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| Type of building and number of floors: MIXED USE |
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| Will any outside area or sidewalk cafe be used for the sale or consumption of alcoholic beverages? (includes roof & yard) Yes No If Yes, describe and show on diagram: NA |
| Does premise have a valid Certificate of Occupancy and all appropriate permits, including for any back or side yard use? Yes No What is maximum NUMBER of people permitted? |
| Do you plan to apply for Public Assembly permit? Yes No What is the zoning designation (check zoning using map: http://gis.nyc.gov/doitt/nycitymap/ - please give specific zoning designation, such as R8 or C2): |
| PROPOSED METHOD OF OPERATION: Will any other business besides food or alcohol service be conducted at premise? Yes No If yes, please describe what type: |
| What are the proposed days/hours of operation? (Specify days and hours each day and hours of outdoor space)SEVEN BAYS PER WEEK UNTIL ZAM. |
| Number of tables? Total number of seats? 49 |
| How many stand-up bars/ bar seats are located on the premise? |
| (A stand up bar is any bar or counter (whether with seating or not) over which a patron can order, pay for and receive an alcoholic beverage) Describe all bars (length, shape and location): 35 FEET 5-SHAPED CURVE TO CHEF COUNTER. Does premise have a full kitchen Yes I No? |
| Does premise have a full kitchen Yes D No? |
| Does it have a food preparation area? Yes No (If any, show on diagram) |
| Is food available for sale? Yes \(\) No If yes, describe type of food and submit a menu SEE ATACHED What are the hours kitchen will be open? \(\) OPEN DURING ALL HOURS OF OPENATION. Will a manager or principal always be on site? Yes \(\) No If yes, which? \(\) FROMAN WONG, \(\) BUN CHEAM (CAE) How many employees will there be? \(\) \(\) Nicole WALKO (G. R) Do you have or plan to install \(\) French doors \(\) accordion doors or \(\) windows? |
| What are the hours kitchen will be open? OPEN DURING ALL HOURS OF OPERATION. |
| Will a manager or principal always be on site? Yes I No If yes, which? FROMAN WONG, BUN CHOAM (CHE |
| How many employees will there be? |
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| Will there be TVs/monitors? Yes No (If Yes, how many?) |
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| Will premise have music2 Yes □ No |
| If Yes, what type of music? □ Live musician □ DJ □ Juke box □ Tapes/CDs/iPod |
| If other type, please describe |
| What will be the music volume? ■ Background (quiet) ■ Entertainment level |
| Please describe your sound system: WIRELESS BLUETOOTH SPEAKORS CONNECTED TO 1700- |
| Will you host any promoted events, scheduled performances or any event at which a cover fee is |
| charged? If Yes, what type of events or performances are proposed and how often? NO. |
| How do you plan to manage vehicular traffic and crowds on the sidewalk caused by your establishment? Please attach plans. (Please do not answer "we do not anticipate congestion.") PESTAURANT 15 1 BASEMENT LEVEL. PARPONS WAITING WILL BE INSIDE BUILDING. Will there be security personnel? Sees I No (If Yes, how many and when) MARKET LINE (ESSEX) CAUSSING SECURITY. |
| How do you plan to manage noise inside and outside your business so neighbors will not be affected? Please attach plans. PESTAMAN IS A BASMON LEVEL. NEIGHBORS WILL NOT BE AFFECTED. MUSIC IS FOR BACKGROUND. Do you have sound proofing installed? Tes ENO If not, do you plan to install sound-proofing? Yes ENO |
| APPLICANT HISTORY: |
| Has this corporation or any principal been licensed previously Yes □ No |
| If yes, please indicate name of establishment: ESEX PERRI 34 ROUBBEST LLC |
| Address: 115 Dellancey St. Ny Ny 10002 Community Board # 3 |
| Dates of operation: NOV. 22, 2019 |
| Has any principal had work experience similar to the proposed business Y Yes No If Yes, please |
| attach explanation of experience or resume. |
| Does any principal have other businesses in this area? Yes No If Yes, please give trade name and describe type of business AQUAT QUST INC. SERPOOD RETAILER. |
| |
| 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, if any. |
| Attach a separate diagram that indicates the location (name and address) and total number of establishments selling/serving beer, wine (B/W) or liquor (OP) for 2 blocks in each direction. Please indicate whether establishments have On-Premise (OP) licenses. Please label streets and avenues and identify your location. Use letters to indicate Bar, Restaurant, etc. The diagram must be submitted with the questionnaire to the Community Board before the meeting. |

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| LC | OCATION: |
|-----------------------------------|---|
| Ho | w many licensed establishments are within 1 block? |
| Ho | ow many On-Premise (OP) liquor licenses are within 500 feet? |
| İs | premise within 200 feet of any school or place of worship? Yes No |
| Ple im ou lic | OMMUNITY OUTREACH: ease see the Community Board website to find block associations or tenant associations in the mediate vicinity of your location for community outreach. Applicants are encouraged to reach to community groups. Also use provided petitions, which clearly state the name, address, ense for which you are applying, and the hours and method of operation of your establishment at top of each page. (Attach additional sheets of paper as necessary). |
| m | e are including the following questions to be able to prepare stipulations and have the eeting be faster and more efficient. Please answer per your business plan; do not plan to gotiate at the meeting. |
| 1. | will operate a full-service restaurant, specifically a (type of restaurant) SCAPORO RESTAURANT With a kitchen open and serving food during all hours of |
| | operation $OR \square$ I have less than full-service kitchen but will serve food all hours of operation. |
| 2. | I will close any front or rear façade doors and windows at 10:00 P.M. every night or when amplified sound is playing, including but not limited to DJs, live music and live nonmusical performances. |
| 3. | 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 |
| 4. | ₩I will play ambient recorded background music only. |
| 5. | ☑ 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. |
| 6. | will not seek a change in class to a full on-premise liquor license without first obtaining approval from CB 3. |
| 7. | will not participate in pub crawls or have party buses come to my establishment. |
| | I will not have a happy hour or drink specials with or without time restrictions <u>OR</u> I will have happy hour and it will end by |
| 9. | l will not have wait lines outside. I will have a staff person responsible for ensuring no loitering, noise or crowds outside. |
| 10 | . 🖾 Residents may contact the manager/owner at the number below. Any complaints will be addressed immediately. I will revisit the above-stated method of operation if necessary in order to minimize my establishment's impact on my neighbors. |

