



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 Stipulations for Administrative Approval

I, Yuanyuan Zhang, as a qualified representative of Dian Kitchen LLC
located at 435 East 9th Street, New York, NY agree to the following stipulations:

- ☐ I will operate a full-service restaurant, specifically a (type of restaurant) _____
☒ Kitchen open and serving food every night during all hours of operation.

2. My hours of operation will be:
Mon Closed; Tue 12pm to 10pm; Wed 12pm to 10pm;
Thu 12pm to 10pm; Fri 12pm to 10pm; Sat 12pm to 10pm; Sun 12pm to 10pm.

(I understand opening is no later than specified opening hour & all patrons are to be cleared from business at specified closing hour)

- ☒ I will not use outdoor space for commercial use.
- ☐ I will operate my sidewalk café no later than _____
- ☐ I will employ a doorman/security personnel on the following days: _____
- ☐ I will install soundproofing, _____
- ☒ 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.
- ☐ I will have a closed fixed façade with no open doors or windows except my entrance door will close by 10:00 P.M. or when amplified sound is playing, including but not limited to DJs, live music 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. ☒ I will play ambient recorded 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. ☒ I will not seek a change in class to a full on-premises liquor license without first obtaining approval from CB 3.

12. ☒ I will not participate in pub crawls or have party buses come to my establishment.

13. ☒ I will not have unlimited drink specials, including boozy brunches, with food.

14. ☒ I will not have a happy hour or drink specials with or without time limitations OR ☐ I will have happy hour and it will end by _____. - Please indicate one of the above -

15. ☒ I will not have wait lines outside. ☐ I will have a staff person responsible for ensuring no loitering, noise or crowds outside.

16. ☒ I will conspicuously post this stipulation form beside my liquor license inside of my business.

17. ☒ 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.

Name: Yuanyuan Zhang Phone Number: 646-590-9898

18. ☒ I will: _____

I hereby certify that the information provided above is truthful and accurate based upon my personal belief.

Signed _____

Dated 9/17/2020

Sworn to this 17th day of September 2020

Rosemary A McKenna
Notary Public

ROSEMARY A MCKENNA
Notary Public, State of New York
No. 01MC6385474
Qualified in Bronx County
Commission Expires January 7, 2023



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

Today's Date: September 17, 2020

APPLICANT

1. Name of applicant and principle(s): Dian Kitchen LLC Ernest Bu#
Yuanyuan Zhang
2. Premise address: 435 E 9th St
3. Cross streets: Avenue A + 1st
4. Trade name (DBA): Dian Kitchen
5. Check which you are applying to: ☒ New liquor license ☐ Alteration of an existing license ☐ Sale of assets
6. If alteration, describe nature of alteration: _____
7. Is location currently licensed? ☐ Yes ☒ No
8. Type of license: Applying for a Beer license
9. Previous or current use of the location: Restaurant
10. Corporation and trade name of current location: Dian Kitchen LLC
11. Type of building and number of floors: Mixed Use 4 Floors
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? 74
13. Do you plan to apply for Public Assembly permit? ☐ Yes ☒ No
14. 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): R8B
15. How many licensed establishments are within 1 block? 18
16. How many On-Premise (OP) liquor licenses are within 500 feet? 16
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: Restaurant
19. Will any other business besides food or alcohol service be conducted at premise? ☐ Yes ☒ No
20. If yes, please describe what type: _____
21. What are the proposed days / hours of operation (specify days / hours each day and hours of outdoor space if applicable): Sunday - Saturday 11AM - 12AM
22. Total number of table: 7 23. Total number of seats: 17
24. How many stand-up bars / bar seats are located on the premise? 0
(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.)

25. Describe all bars (length, shape, and location): Rectangle service bar 4'4" in length
26. Does premise have a full kitchen? ☒ Yes ☐ No
27. What are the hours kitchen will be open? All open hours
28. What type of food is available for sale? Chinese Food
29. Will a manager or principal always be on site? ☒ Yes ☐ No If yes, which? Principal
30. How many employees will there be? 3
31. Do you have or plan to install? ☐ French doors ☐ accordion doors ☐ windows
32. Will there be TVs / monitors? ☐ Yes ☒ No If Yes, how many? _____
33. Will premise have music? ☒ Yes ☐ No 33a. If Yes, what type of music? ☐ Live Music ☐ Jukebox
☐ DJ ☒ Tapes / CDs / iPod
34. If other type, please describe: _____
35. What will be the music volume? ☒ Background (quiet) ☐ Entertainment level
36. Please describe your sound system: iPod with small speaker
37. Will you host any promoted events, scheduled performances or any event at which a cover fee is charged?
☐ Yes ☒ No
38. If Yes, what type of events or performances are proposed and how often? _____
39. How do you plan to manage vehicular traffic and crowds on the sidewalk caused by your establishment?
We are a small restaurant and don't anticipate any lines or crowds
40. Will there be security personnel? ☐ Yes ☒ No 40a. If Yes, how many and when? _____
41. How do you plan to manage noise inside and outside your business so neighbors will not be affected?
The owner will manage sound level of iPod at all times
42. Do you have sound proofing installed? ☐ Yes ☒ No
43. If not, do you plan to install sound-proofing? ☐ Yes ☒ No

APPLICANT HISTORY

44. Has this corporation or any principal been licensed previously? ☐ Yes ☒ No If yes, please indicate name of establishment(s): _____
45. Address: _____ 45a. Community Board _____
46. Dates of operation: _____
47. Has any principal had work experience similar to the proposed business? ☒ Yes ☐ No If yes, explanation of experience or resume. Restaurant has been open and operating since 5/2018
48. Does any principal have other business in the area? ☐ Yes ☒ No If yes, give trade name and describe type of business: _____
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.

COMMUNITY OUTREACH

Please see the 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.