



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.**

- 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](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     alteration of an existing 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: January 15, 2021

**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: 252 OP

If alteration, describe nature of alteration: N/A

Previous or current use of the location: Ongoing restaurant

Corporation and trade name of current license: Trapizzino LES, LLC

**APPLICANT:**

Premise address: 144 Orchard Street, New York, NY 10002

Cross streets: Rivinton & Stanton

Name of applicant and all principals: Trapizzino LES, LLC Luca Vincenzini, Nicholas Hatsaturis

Trade name (DBA): Trapizzino

**PREMISE:**

Type of building and number of floors: Mixed Use - Ground Commercial/Residential above - 6 Floors

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: \_\_\_\_\_

Only as per open table program in place at the time.

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): C4-4A

**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) Sunday- Wednesday 11am - 12 am, Thursday-Saturday 11am-1am

Number of tables? 14 Total number of seats? 50

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)

Describe all bars (length, shape and location): N/A

Does premise have a full kitchen  Yes  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

What are the hours kitchen will be open? All open hours

Will a manager or principal always be on site?  Yes  No If yes, which? Manager

How many employees will there be? 12

Do you have or plan to install  French doors  accordion doors or  windows?

Will there be TVs/monitors?  Yes  No (If Yes, how many?) \_\_\_\_\_

Will premise have music?  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: Basic stereo connected to ipod.

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.")

Will there be security personnel?  Yes  No (If Yes, how many and when) \_\_\_\_\_

How do you plan to manage noise inside and outside your business so neighbors will not be affected? Please attach plans.

Do you have sound proofing installed?  Yes  No

If not, do you plan to install sound-proofing?  Yes  No

**APPLICANT HISTORY:**

Has this corporation or any principal been licensed previously?  Yes  No

If yes, please indicate name of establishment: Current - Trapizzino LES, LLC

Address: 144 Orchard Street, New York, NY 10002 Community Board # 3

Dates of operation: All

Has any principal had work experience similar to the proposed business?  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 \_\_\_\_\_

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.



**LOCATION:**

How many licensed establishments are within 1 block? 16

How many On-Premise (OP) liquor licenses are within 500 feet? 38

Is premise within 200 feet of any school or place of worship?  Yes  No

**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. ~~Also use provided petitions, which clearly state the name, address, license for which you are applying, and the hours and method of operation of your establishment at the top of each page. (Attach additional sheets of paper as necessary).~~

***We are including the following questions to be able to prepare stipulations and have the meeting be faster and more efficient. Please answer per your business plan; do not plan to negotiate at the meeting.***

1. My license type is:  beer & cider  wine, beer & cider  liquor, wine, beer & cider
2.  I will operate a full-service restaurant, specifically a (type of restaurant) \_\_\_\_\_ restaurant, or  
 I will operate a n upscale "pizza-like" premises,  
 with a kitchen open and serving food during all hours of operation OR  with less than a full-service kitchen but serving food during all hours of operation OR  Other \_\_\_\_\_
3. My hours of operation will be:  
Mon 11am - 12am; Tue 11am - 12am; Wed 11am - 12am;  
Thu 11am - 1am; Fri 11am - 1am; Sat 11am - 1am;  
Sun 11am - 12am. (I understand opening is "no later than" specified opening hour, and all patrons are to be cleared from business at specified closing hour.)
4.  I will not use outdoor space for commercial use OR  
 My sidewalk café hours will be \_\_\_\_\_
5.  I will employ a doorman/security personnel: \_\_\_\_\_
6.  I will install soundproofing, \_\_\_\_\_
7.  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, or during unamplified live performances or televised sports.  
 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, or during unamplified live performances or televised sports.

8. I will not have  DJs,  live music,  promoted events,  any event at which a cover fee is charged,  scheduled performances,  more than \_\_\_\_\_ DJs per 0,  more than 0 private parties per ever.
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 restrictions OR  I will have happy hour and it will end by \_\_\_\_\_.
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.

(646) 491-1233

# ATTENTION RESIDENTS & NEIGHBORS

Trapizzino LES, LLC

Company/DBA Name and Contact Number for Questions

Plans to open a

Tavern/RESTAURANT

(Please choose) Bar/Restaurant/Club and indicate if there will be a Sidewalk Café or Backyard Garden

at the following location

144 Orchard Street, New York, NY 10002

Building Number and Street Name (Address)

This establishment is seeking a license to serve

Beer Wine & LIQUOR

Beer & Wine or Beer/Wine & Liquor

There will be an opportunity for public comment on

Monday, February 8 at 6:30pm

Online: <https://zoom.us/j/92199317942>

see [www.cb3manhattan.org](http://www.cb3manhattan.org) for zoom meeting details

Date/Time/Location

(646) 491-1233

Applicant Contact Information

At COMMUNITY BOARD 3

SLA & DCA Licensing Committee Meeting  
[mn03@cb.nyc.gov](mailto:mn03@cb.nyc.gov) - [www.cb3manhattan.org](http://www.cb3manhattan.org)

