

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 item's to the meeting:

NOT	E: 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		
Lid	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).		
	k which you are applying for:		
™ ne	w liquor license		
	k if either of these apply:		
□ sa	le of assets upgrade (change of class) of an existing liquor license		
Toda	y's Date: April 28, 2021		
1000	y s Date.		
If ap	olying for sale of assets, you must bring letter from current owner confirming that you are buying		
	ness or have the seller come with you to the meeting.		
Is location currently licensed? ☐ Yes ☐ No Type of license:			
	eration, describe nature of alteration: h/a		
	ous or current use of the location:		
6	ous of current use of the location.		
Corp	oration and trade name of current license: $\frac{\eta}{q}$		
APPL	ICANT:		
Prem	ise address: 50 Avenue A. New York N.T. 10009		
	streets: 312 & 4th Streets		
	31 - 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
ivam	e of applicant and all principals: That Tompkins In c principal - Lasiya Tittanuch		
Trade	Trade name (DBA): Hub Thai		
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PREMISE:
Type of building and number of floors: Drick - > 1/0003
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:
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: $\frac{\text{http://gis.nyc.gov/doitt/nycitymap/}}{R}$ - 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: No
What are the proposed days/hours of operation? (Specify days and hours each day and hours of outdoor space) Sunday - Thursday /2 PM - // PM Friday Saturday /2 PM - // 30 PM
Number of tables? Total number of seats? 40
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 heverage)
Describe all bars (length, shape and location): $97'' \times 16 + rectangle$, it side middle
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 I No If yes, describe type of food and submit a menu
What are the hours kitchen will be open?
Will a manager or principal always be on site? ▼es □ No If yes, which?
How many employees will there be?
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?
	If Yes, what type of music? ☐ Live musician ☐ DJ ☐ Juke box ☐ Tapes/CDs/iPod
	If other type, please describe $\frac{\eta}{\varsigma}$
	What will be the music volume? Background (quiet) Entertainment level
	Please describe your sound system:
	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?
slavent with	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.") We are a snall neighborhous traffic, our clinth will be many local. We will have an employ Will there be security personnel? Yes No (If Yes, how many and when) Congregate on the statewal
the aly	How do you plan to manage noise inside and outside your business so neighbors will not be affected? Please attach plans. There will be article space so noise should not be an autside issues. Inside music is light from an I-lad so noise should not be an issue. Do you have sound proofing installed? I Yes \(\mathbb{\text{No}}\) No If not, do you plan to install sound-proofing? I Yes \(\mathbb{\text{No}}\)
	APPLICANT HISTORY:
	Has this corporation or any principal been licensed previously? Yes No If yes, please indicate name of establishment: More That - Win / heer / Icense
	Address: 6 Cinto St., N7, N7 /0002 Community Board # 3
	Dates of operation: Applicant he losser involved in this hospes).
	Has any principal had work experience similar to the proposed business? Wes I No If Yes, please attach explanation of experience or resume. Restaurant experience from was tress to manage.
	Does any principal have other businesses in this area? • Yes Two If Yes, please give trade name and describe type of business Yes in NYC but other restorent is not in this CB area
	Has any principal had SLA reports or action within the past 3 years? Yes Yo 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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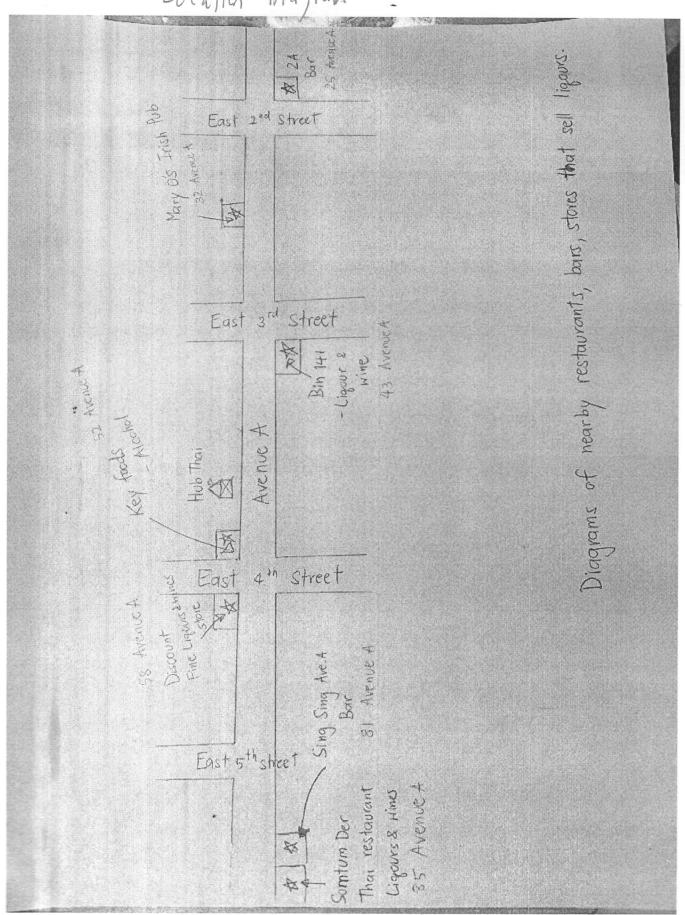
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LO	CATION:
Hov	v many licensed establishments are within 1 block?
Hov	v many On-Premise (OP) liquor licenses are within 500 feet?
Is p	remise within 200 feet of any school or place of worship? I Yes To lossibly, did not do detailed easurement yet but the school and the church are not on the same block as the premises.
	MMUNITY OUTREACH:
imr con	ase see the Community Board website to find block associations or tenant associations in the nediate vicinity of your location for community outreach. Applicants are encouraged to reach out to number and the provided petitions, which clearly state the name, address, license for which are applying, and the hours and method of operation of your establishment at the top of each page. Each additional sheets of paper as necessary).
fas	are including the following questions to be able to prepare stipulations and have the meeting be ter and more efficient. Please answer per your business plan; do not plan to negotiate at the eting.
1.	My license type is: □ beer & cider □ wine, beer & cider ਾਂ liquor, wine, beer & cider
2.	will operate a full-service restaurant, specifically a (type of restaurant)
	restaurant, or
	□ I will operate a
	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 121n - // PM ; Tue 12 Ph - // PM ; Wed 12 Ph - // PM ;
	Mon 121n - 1/1 Tue 12 N - 1/1 ; Wed 12 N - 1/1 ; Thu 12 M - 1/1 30 M ; Sat 12 M - 1/1 30 M ;
	Sun /2 fh - // f M . (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 ☐ I will have a closed fixed façade with no
	and windows at 10:00 P.M. every night or open doors or windows except my entrance
	when amplified sound is playing, including but door will close by 10:00 P.M. or when
	not limited to DJs, live music and live amplified sound is playing, including but not
	nonmusical performances, or during limited to DJs, live music and live nonmusical
	unamplified live performances or televised performances, or during unamplified live

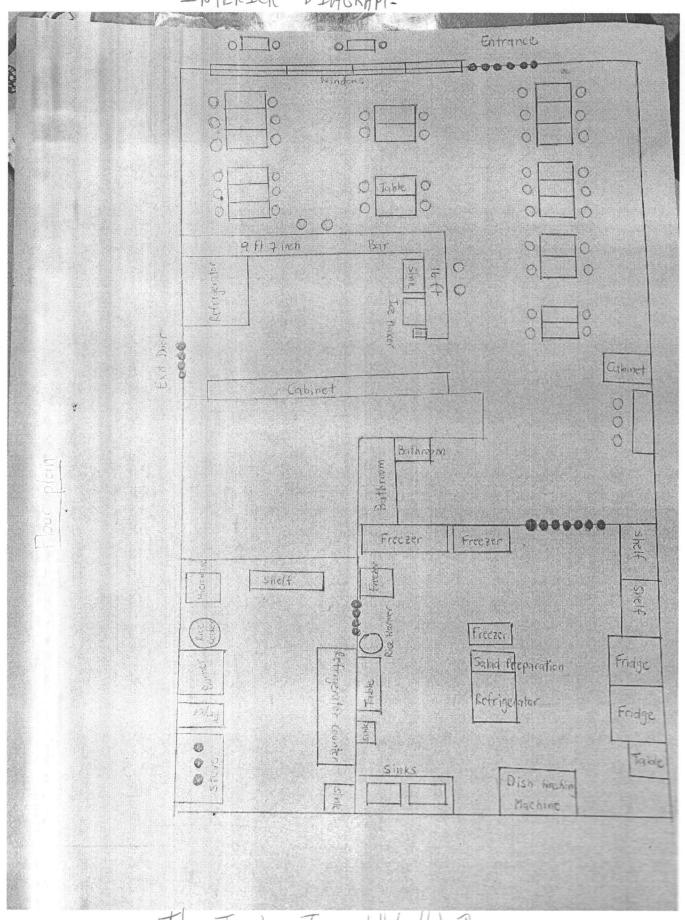
sports.

performances or televised sports.

8.		ill not have 🗹 DJs, 📭 live music, 🖪 promoted events, 🗹 any event at which a cover fee is
	cha	rged, 🗖 scheduled performances, 🖪 more than DJs per, 🗗 more than
		vate parties per, number of TVs.
9.		I will play ambient recorded background music only.
10.	\times	I will not apply for an alteration to the method of operation or for any physical alterations of an
	nat	ure 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
	арр	proval from CB 3.
12.	Q	I will not participate in pub crawls or have party buses come to my establishment.
13.	À	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 \blacksquare I will have
	hap	ppy hour and it will end by
15.		I will not have wait lines outside. 🗖 I will have a staff person responsible for ensuring no
	loit	ering, noise or crowds outside.
16.	X	I will conspicuously post this stipulation form beside my liquor license inside of my business.
17.	X	Residents may contact the manager/owner at the number below. Any complaints will be
	ado	ressed immediately. I will revisit the above-stated method of operation if necessary in order to
	mir	nimize my establishment's impact on my neighbors.
	Nai	me: kasiya Jittanuch
	Pho	one Number: (347) 755-6177



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Thai Tompkins, Inc of 16/4 Hub Thai 50 Avenue A) M7, N7 10009



That Tompkins Inc Albla Hub That
50 Avenue A, NY, NY 10009



Thai Temptins Inc. d/b/a Hub Thai
50 Avenue A, NY, NY 10009





That Tempkins Inc. 50 Avenue A NJ, NY 10009

Re: community board

From: Pornnapat Boonprasert (hubthai50@gmail.com)

To: bfentonlaw@yahoo.com

Date: Friday, April 30, 2021, 12:36 AM EDT

Interior



Thai Tompkins, Inc d/b/n Hub Thai
50. Avenue A, NY, NY 10009





That Tompkins Inc d/b/n Hub That 50 Anne A, NY, NY 10009



That Tompkins Inc. d/b/n Hub That
To Avenue A, NY, NY 10009

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