

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

Paul Rangel, Board Chair

Susan Stetzer, District Manager

Community Board 3 Liquor License Application Questionnaire

NOTE: ALL ITEMS MUST BE SUBMITTED FOR APPLICATION TO BE CONSIDERED.

The following items and questionnaire package are due by date listed in email invite:

- ☐ 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.

The following items are due by noon Friday before the meeting:

- ☐ 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:
<https://www1.nyc.gov/site/manhattancb3/resources/community-groups.page>
(this is not required but strongly suggested if a relevant group exists)
- ☐ 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: April 29, 2022

Is location currently licensed? ☐ Yes ☒ No Type of license: _____

If alteration, describe nature of alteration: N.A.

Previous or current use of the location: Tavern

Corporation and trade name of current license: N.A.

APPLICANT:

Premise address: 145 Avenue C

Cross streets: 9th & 10th Streets (Corner 9th Street)

Name of applicant and all principals: BD Shea Grand LLC; Robert Gonzales sole principal

Trade name (DBA): Bobby's Night Out

PREMISE:

Type of building and number of floors: 6 Stories Apartments Over Store

Does premise have a valid Certificate of Occupancy, including for any back/side yard or roof use?

☐ Yes ☒ No What is maximum NUMBER of people permitted 74; Letter of no objection to be filed

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:

What are the proposed days/hours of operation? (Specify days and hours each day and hours of outdoor space, if applicable) 10am to 4am Daily Inc. Sunday

Will any other business besides food or alcohol service be conducted at premise, i.e., retail? ☐ Yes ☒ No

If yes, please describe what type: _____

Number of indoor tables? 20 Total number of indoor seats? 40

How many stand-up bars/bar seats are located on the premise (number, length, and location) One
Near entrance

(A **stand-up bar** is any bar or counter -with seating or not- where you can order, pay for, and receive alcohol)

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 _____

State of New Mexico Food (see menu)

What are the hours the kitchen will be open? 10am to 2am (May vary depending on demand)

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

How many employees will there be? 5

Do you have or plan to install ☐ French doors ☐ accordion doors or ☐ windows? No new doors or windows

Will there be TVs/monitors? ☒ Yes ☐ No (If Yes, how many?) 1 TV behind bar; occasional projectors

Will premise have music? ☒ Yes ☐ No

If Yes, what type of music? ☐ Live musician ☐ DJs ☒ Streaming services/playlists

If other type, please describe Occasional live (acoustic)

What will be the music volume? ☒ Background (conversational) ☐ Entertainment (live music venue

level) Please describe your sound system: Receiver with speakers (occasional entertainment volume)

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? None

If promoted events, please explain the nature in which you plan to promote? Social media / online ads / outside promoters? N.A.

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.") Manager to observe outside traffic and respond accordingly

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. Manager will respond accordingly to unanticipated high volume of noise

Is sound proofing installed? ☒ Yes ☐ No

If not, do you plan to install sound proofing? ☐ Yes ☐ No N.A.

Are there current plans to use the Open Restaurants program for the sale or consumption of alcoholic beverages outdoors? (includes roof & yard) ☐ Yes ☒ No If Yes, describe and show on diagram:

APPLICANT HISTORY:

Has this corporation or any principal been licensed for sale of alcohol previously? ☒ Yes ☐ No

If yes, please indicate name of establishment: BD Shea Grand LLC

Address: 384 Grand Street, NY, NY Community Board # 3

Dates of operation: 2010 to 2020

Has any principal had work experience similar to the proposed business? ☒ Yes ☐ No If Yes, please attach explanation of experience or resume. Note: failure to disclose previous experience or information hampers the ability to evaluate this application. Robert Gonzales (see above)

Does any principal have other businesses in this area? ☐ Yes ☒ No If Yes, please give trade name, address and describe the business _____

Has any principal had SLA reports or action within the past 5 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? 4

How many On-Premise (OP) liquor licenses are within 500 feet? 10

Is the premise within 200 feet on the same street 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, but it is not required. 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 Tavern,

☐ 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 Close at 4am daily; Tue inc. Sunday; Wed _____;

Thu _____; Fri _____; Sat _____;

Sun _____. (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 (including Open Restaurants) OR

☒ My sidewalk café hours or other outside hours (including Open Restaurants) will be
Close no later than 11:00 pm

5. ☐ I will employ a doorman/security personnel: _____

6. ☒ I will install soundproofing, (Sound proofing previously installed)

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 performances or televised sports. ☒ I will have a closed fixed façade with no open doors or windows except my entrance door, which 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 performances or televised sports.
8. I will not have ☐ DJs, ☐ live music, ☐ third-party promoted events, ☐ any event at which a cover fee is charged, ☐ scheduled performances, ☐ more than _____ DJs per _____, ☐ more than _____ private parties per _____.
9. ☐ I will play ambient recorded background music only.
10. ☒ I will not participate in pub crawls or have party buses come to my establishment.
11. ☐ I will not have unlimited drink specials, including boozy brunches, with food.
12. ☐ 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 _____.
13. ☐ I will not have wait lines outside. ☒ I will have a staff person responsible for ensuring no loitering, noise or crowds outside.
14. ☒ I will conspicuously post this stipulation form beside my liquor license inside of my business.
15. ☒ 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: Manager

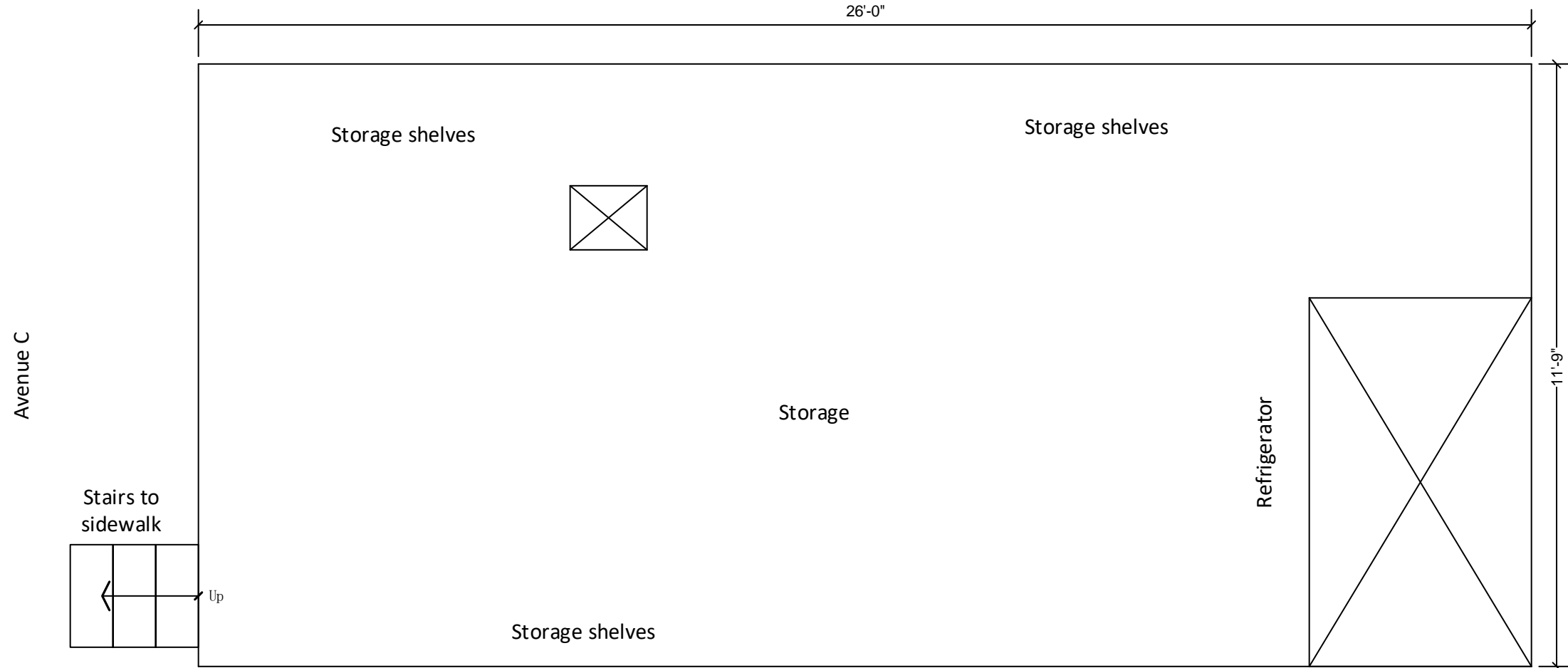
Phone Number: To be provided



BD Shea Grand LLC
145 Avenue C
New York, NY 10003
Exterior Photo 3/7/22



BD Shea Grand LLC
145 Avenue C
New York, NY 10003
Interior Photo 3/7/22



INTERIOR DIAGRAM - Basement
145 Avenue C
New York, NY
March 7, 2022

NOT TO SCALE

chips & salsa (*v, gf*) 4 (extra chips 1)

queso (*v, gf*) 5

quesadilla x (*v*) 6

calamari (*gf*) 12 fried

fries 5

disco fries (*v, gf*) 9

queso, melted cheese, onion, tomato, cilantro &
spicy aioli

wings 8

seven chicken wings tossed in buffalo
each additional wing +1

mexican shrimp cocktail 10

shrimp, avocado, pico de gallo & spicy clamato sauce

nachos x (*v, gf*) 10

beans, queso, cheese, lettuce, tomato, onion, sour
cream

add-on

green chile, tomato & onion **2**

ground beef, veggie chk (not *gf*) **2**

steak or grilled chicken **5**

pick 4 sampler 20

choose any four from disco fries, wings, nachos,
calamari, or quesadilla

tacos

beef, or vegetarian chicken 9

two hard or soft shell with cheese, lettuce, tomato &
onion

steak (*gf*), chorizo or grilled chicken 11
two soft tacos with onion, cilantro & avocado

shrimp (*gf*) 11
two soft tacos with lettuce, tomato, onion, avocado &
tarter sauce

BD Shea Grand LLC
Proposed Drinks Menu

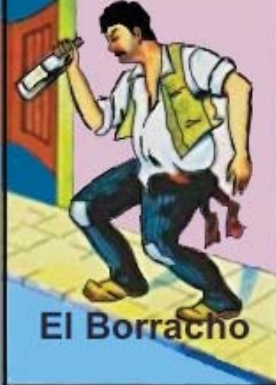


9.



Old Havana

10.



El Borracho

11.



Rosé Spritzer

12.



Spiked Horchata

13.



Bourbon Sour

14.



French '57

15.



La Paloma

16.



Caribbean
Queen