

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:

- ☐ 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: 9/28/2022

Is location currently licensed? ☒ Yes ☐ No Type of license: beer and wine

If alteration, describe nature of alteration: We want a full OP and stay open until 2:00 am

Previous or current use of the location: Restaurant/Bar

Corporation and trade name of current license: Mama's Cooking II, LLC

APPLICANT:

Premise address: 171 Avenue A

Cross streets: 10th and 11th

Name of applicant and all principals: Lai Peng Yong, Jonathan Holtzman, Soon Long Lim

Trade name (DBA): Fishmarket II

PREMISE:

Type of building and number of floors: 6

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 72

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): R7A, C2-5

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) Sunday -Saturday 12pm to 2am

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? 8 Total number of indoor seats? 72

How many stand-up bars/bar seats are located on the premise (number, length, and location) 1, right side of restaurant
35 feet.

(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 malaysian fusion

What are the hours the kitchen will be open? 12-1

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

How many employees will there be? 5

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

Will there be TVs/monitors? ☒ Yes ☐ No (If Yes, how many?) 3

Will premise have music? ☒ Yes ☐ No

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

If other type, please describe Juke Box

What will be the music volume? ☒ Background (conversational) ☐ Entertainment (live music venue level) Please describe your sound system: Jukebox

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

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

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.") Hostess and if necessary reservations.

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. A manager will be onsite.

Is sound proofing installed? ☒ Yes ☐ No

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

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: Fishmarket II

Address: 171 Avenue A Community Board # 3

Dates of operation: It opened in January 2022

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.

Does any principal have other businesses in this area? ☐ Yes ☒ No If Yes, please give trade name, address and describe the business The principals have worked at Fishmarket I which operates downtown.

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? 5

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)
Malaysian Fusion 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 12am-2pm; Tue 12am - 2pm; Wed 12am - 2pm;
Thu 12am-2pm; Fri 12am -2pm; Sat 12am -2pm;
Sun 12am-2pm. (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

5. ☐ I will employ a doorman/security personnel: NA hostess/manager
6. ☐ I will install soundproofing, NA it is soundproofed

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: Lai Peng Yong

Phone Number: 917-363-8101

ATTENTION RESIDENTS & NEIGHBORS

Company/DBA Name and Contact Number for Questions

Plans to open a

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

at the following location

Building Number and Street Name (Address)

This establishment is seeking a license to serve

Beer & Wine or Beer/Wine & Liquor

There will be an opportunity for public comment on

Monday, October 17, 2022 at 6:30pm

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

see www.cb3manhattan.org for zoom meeting details

Date/Time/Location

Applicant Contact Information

At COMMUNITY BOARD 3

SLA & DCA Licensing Committee Meeting

mn03@cb.nyc.gov - www.cb3manhattan.org

ATTENTION RESIDENTS & NEIGHBORS

第 3 社區居民 請注意

公司名字(Company) and/和 聯繫人的資料 (Contact Info)

Plans to open a (以上的店主想要在第 3 社區申請生意相關牌照擴展生意)

(請選擇/please choose) 酒吧(Bar)/餐館 (Restaurant)
戶外咖啡 (Sidewalk Café) or 或者
後院花園咖啡(Backyard Use)

Address/生意地址

seeking a license to serve(以上的店主想要請以下相關酒牌照)

(請選擇/please choose) 啤酒和酒牌照(Beer & Wine) or/或者
啤酒牌照 (Beer) or/或者
酒和烈酒牌照 (Wine & Liquor)

Public meeting for comments

第 3 社區的居民有權利提出自己的意見和建議.

(CB3 SLA & DCA Committee Meeting)

曼哈頓第 3 社區委員會

酒牌和紐約市消費局有關小商業牌照委員會

Monday, October 17, 2022 at 6:30pm

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

see www.cb3manhattan.org for zoom meeting details

時間 (Time) 和地點 (Location)

mn03@cb.nyc.gov - www.cb3manhattan.org

NEIGHBORING RESIDENTS VECINOS DE LA COMUNIDAD

Company Name/ Contact Info

Nombre de la Compañía/el teléfono de contacto

Plans to open a:

Planifique abrir un/una:

(Please choose) Bar/Restaurant
sidewalk café/backyard use

(Favor de escoger) una Barra/un Restaurante
un café de acera o un patio de atrás

address

dirección

Seeking a license to serve

**En búsqueda de una
licencia para servir:**

Beer & Wine or Beer/Wine & Liquor

Cerveza y vino o cerveza/vino y bebidas alcohólicas

**Public meeting
for comments**

**Reunión público
para comentarios**

Monday, October 17, 2022 at 6:30pm

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

see www.cb3manhattan.org for zoom meeting details

**At COMMUNITY BOARD 3
SLA & DCA Licensing
Committee Meeting**

**En la JUNTA COMUNITARIA 3
La reunión del Comité
de Licencias del SLA y del DCA**

mn03@cb.nyc.gov - www.cb3manhattan.org

Petition to Support Proposed Liquor License

Date: _____

The following undersigned residents of the area support the following liquor license (indicate the type of license such as full-liquor or beer-wine) _____

to the following applicant/establishment (company and/or trade name) _____

Address of premises: _____

This business will be a: (circle) Bar Restaurant Other: _____

The hours of operation will be: _____

PLEASE NOTE: Signatures should be from residents of building, adjoining buildings, and within 2-blocks on the same street.

Other information regarding the license:

Name	Signature	Address and Apt # (required)

Date: 9/27/2022

The following undersigned residents of the area support the issuance of the following liquor license (indicate the type of license such as full-liquor or beer-wine)

to the following applicant/establishment (company and/or trade name)

Address of premises:

This business will be a: (circle)

Bar

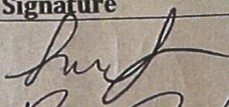
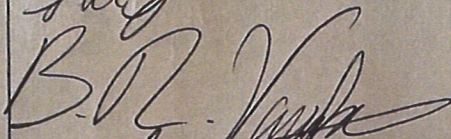


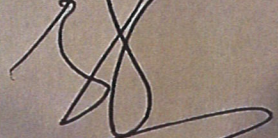

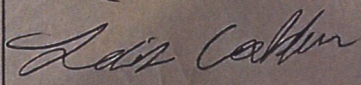
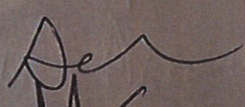
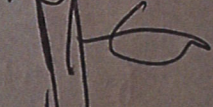
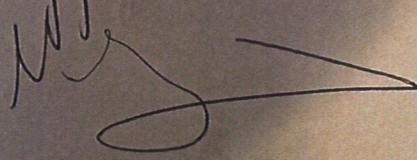
Restaurant

Other:

The hours of operation will be:

PLEASE NOTE: Signatures should be from residents of building, adjoining buildings, and within 2-block area.

Other information regarding the license:

Name	Signature	Address
Sam Grasso		225 E 14th St #3B
Brian Vaughan		172 E 7th St apt 10
Peter Castaneda		172 E 7th St
Nicalas Smith		535 E 14th St
James Swinges		194 E 2nd
Mikell Goldman		711 FDR Drive
Luis Caldera		6 Peter Cooper Rd
Adam Dressner		240 E 10th St 100
Jesse Edgerly		240 E 10th St 1
Nora Granville		

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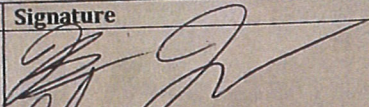



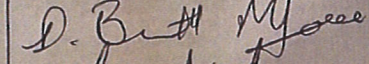

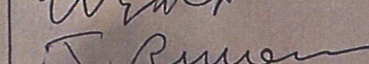
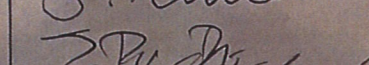

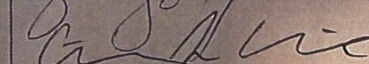
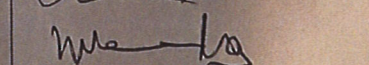
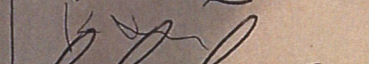


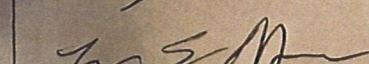
Address of premises: _____

This business will be a: (circle) Bar Restaurant Other: _____

The hours of operation will be: _____

PLEASE NOTE: Signatures should be from residents of building, adjoining buildings, and within 2-block area.

Other information regarding the license: _____

Name	Signature	Address
Brett Jones		219 E. 10th St., NY, NY, 10003
Chris Walker		611 E. 11th St. NY, NY
Juliet Kadlecak		448 E. 20th St. NY, 10009
Aaron Poochigay		320 E 11th St, 10003
Bennett Moore		99 Saint Marks Pl, 10009
ELLA KINGSTON		518 E. 5th St. (#11) 1000
JOSE Rivera		204 E 7th St 10009
Peter Diller		515 E 14th St 10009
Genaro Fabarano		515 E 14th St 10009
CORINA CHIO		227 Cherry St NY 10002
William Ng		227 Cherry St NY 10002
Kenny Lam		12 Monroe St NY 10002
Up Fei Tang		34 Monroe St #121 MC
Henry Chan		77 Fulton St #6J 100
Louis Newman		176 Suffolk St, 100

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Address of premises: _____

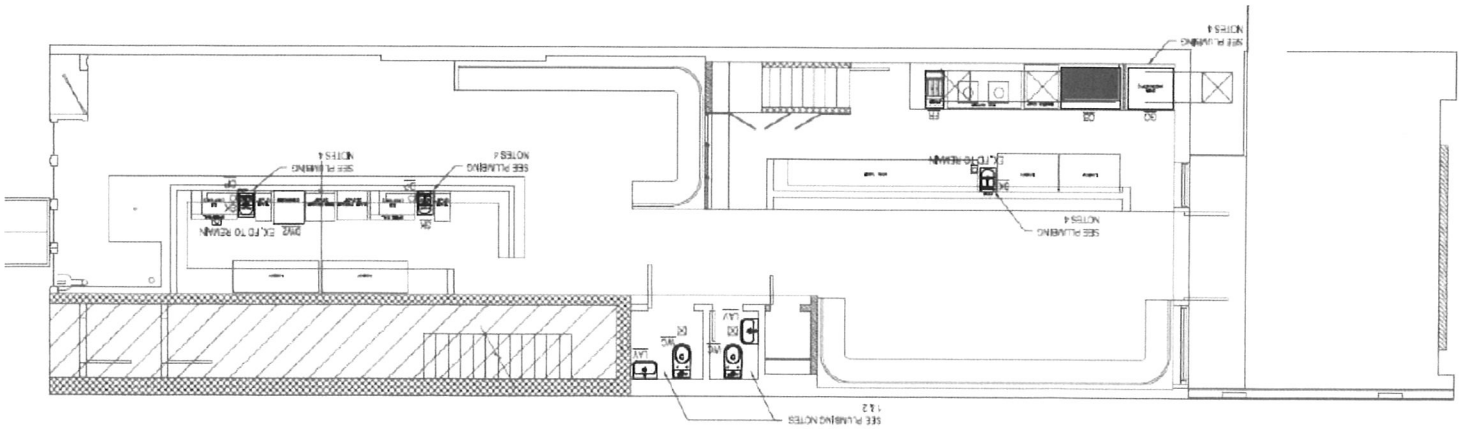
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The hours of operation will be: _____

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Other information regarding the license: _____

Name	Signature	Address
Jediah Vetr	[Signature]	634 E 14th St
Anna Tan	[Signature]	92 St Marks NY 10009
Alexandra Dundon	Alexandra Dundon	92 St Marks NY 10009
Soha Rahimi	[Signature]	2 Gold St. NY 10038
Nick Ferris	[Signature]	201 E. 8th NY 10016
Colleen Ward	Colleen Ward	155 E. 4th St NY 10009
Gabby Miller	Gabby Miller	110 Washington St. 4th 10009
Rishab Hegde	[Signature]	628 e 14th st, Apt 5
JUSTIN MICHAEL	[Signature]	122 ST MARKS APT 3
Elise Burkhardt	Elise Burkhardt	615 14th Street 1H
ROSEMARY ADAMS	Rosemary Adams	394 E 8TH STREET
Rachel Burkhardt	[Signature]	122 St Marks #8
Ray Holmes	Ray Holmes	182 Ave A #8
Laureen Krawse	[Signature]	510 East 12th Apt 2
Christina Mallorzi	[Signature]	355 E. 4th Street



**FISH MARKET
MAMA'S MENU**

Appetizers

Shrimp Puffs	14
Ginger Wings	15
Scallion Pancake	9
Yummy Noodles	9
Dumplings (Shrimp or Pork)	10
Stuffed Eggplant	14

Soups

Drunken Fish Soup	14
Spicy Prawn Soup	22

MAMA'S Entrees

Ginger Shrimp	22
Sea Bass Steak (Bone In)	M.P.
Fish Tacos	15
Spicy Shrimp Noodle Soup	15
Spicy Shrimp with Green Beans	17
Chicken with Spicy String Beans	15
Pork Belly Pot	17
Pork Belly Sandwich	14
<u>MAMA'S Curried Chicken</u>	15
Stir Fried Chicken with Green beans	15
Crispy Chicken	15
Sauteed Bok Choy	S6/L12
Crispy Fried Rice (Chicken, Shrimp or Sausage)	15

Appetizers

Wings: Buffalo, Teriyaki or BBQ: Served with Celery & Blue Cheese (10 pcs)	14.00
Fried Mac and Cheese: Served with Ranch dressing	13.00
Chicken Fingers: Served with Honey Mustard	13.00
Fish Fingers: Egg battered filet of Cod served with Tartar sauce.	14.00
Calamari: Served with marinara sauce	12.00
Popcorn Shrimp: Served with Honey Mustard dressing	13.00
Shrimp Cocktail: A classic served with cocktail sauce	14.00
Combo Platter: Buffalo Wings, Fried Mac & Cheese, and Chicken Fingers	27.00
Seafood Platter: Calamari, Popcorn Shrimp & Fish Fingers	30.00

Sandwiches

Burger: 8oz. Ground sirloin grilled to taste served on a toasted Brio Bun	14.00
Chicken: (Fried) Breaded chicken cutlet with Honey Mustard on toasted Focaccia	14.00
(Grilled) Marinated chicken breast with Chipotle mayo on toasted Focaccia	
Fish: Egg Battered Cod with Tartar sauce on toasted Focaccia	16.00
Shrimp: (4 Tiger shrimp Grill or breaded with lettuce, tomato & cusabi sauce on Focaccia	16.00
Lobster Roll: on toasted Butter Brio Bread ,topped with lettuce & Tomato	17.00

Entrees

Fish & Chips: Egg battered filet of cod served with tartar sauce	
17.00	
& French fries	
Shrimp & Chips: Fried Breaded shrimp served Honey Mustard dressing & French fries	18.00
Chicken & Shrimp Scampi: Egg Battered chicken breast w/jumbo shrimp served in a white wine, lemon, butter and garlic sauce.	22.00
Braised Guinness Barbeque Ribs: Served with one choice of side	22.00
Penne Pasta: With choice of marinara or oil & garlic	12.00

Certificate of Occupancy

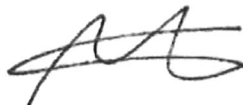
CO Number:

101673903F

Permissible Use and Occupancy

All Building Code occupancy group designations are 1988 designations, except RES, COM, or PUB which are 1938 Building Code occupancy group designations.

Floor From To	Maximum persons permitted	Live load lbs per sq. ft.	Building Code occupancy group	Dwelling or Rooming Units	Zoning use group	Description of use
CEL		OG	J-2		2	ACCESSORY USE, LAUNDRY ROOM
CEL	2	OG	F-4		6	FOOD PREPERATION
001	72	75	F-4		6	EATING & DRINKING ESTABLISHMENT.
002		40	J-2	4	2	FOUR (4) DWELLING UNITS
003		40	J-2	4	2	FOUR (4) DWELLING UNITS
004		40	J-2	4	2	FOUR (4) DWELLINGS UNITS
005		40	J-2	4	2	FOUR (4) DWELLING UNITS
006		40	J-2	2	2	TWO (2) DWELLING UNITS
END OF SECTION						



Borough Commissioner



Commissioner