

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 Stipulations for Administrative Approval							
I, _	ated	Nuntaporn Thong Way qualified representat 78 East 1st Street	entative of , New York,	Krua Thai NYC Corp NY agree to the following stipulations:			
The state of	group.						
	Kitchen open and serving food every night during all hours of operation.						
2.	My hours of operation will be: pm Mon M: 13 am fo 15:00 fm fo 11:00 am fo 10:00 pm Thu 11:00 am to 10:00 fm Fri 11:30 am to 10:30 pm Thu 11:00 am to 10:00 fm Fri 11:30 am to 10:30 pm The 11:30 am to 10:00 fm Fri 11:30 am to 10:30 pm						
(I U	nde	erstand opening is no later than specified opening hour & all	patrons are to b	e cleared from business at specified closing hour)			
3.	I may apply for sidewalk and/or roadbed dining as allowed by the temporary Open Restaurants program but will close all outdoor dining by 10:00 p.m. all days and not have any music, speakers or tv monitors. I will not have commercial use of backyard, sideyard, or rooftop. Any approved outdoor space will close no later than 10:00 p.m.						
4.	at	I will close any front or rear façade doors and windows 10:00 p.m. every night or when amplified sound is aying, including but not limited to DJs, live music and live	windows e: or when an	ave a closed fixed façade with no open doors or ccept my entrance door will close by 10:00 p.m. aplified sound is playing, including but not limited			
	no	nmusical performances.	to DJs, live	music and live nonmusical performances.			
5.	I will not have ☑ DJs, ☑ live music, ☑ promoted events, ☑ any event at which a cover fee is charged, ☑ scheduled performances, ☐ more than private parties per						
6.		I will play ambient recorded background music only.	_ number of TVs.				
7.	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.						
8.	I will not seek a change in class to a full on-premises liquor license without first obtaining approval from CB 3.						
9.	I will not apply for an upgrade to a full on-premises liquor license for at least one year after my operations begin.						
10.	Service Control of the Control of th						
11.							
12.	1. U 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						
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.						
Nar	ne:	Nuntapour Thongwan	Phone Nu	imber: 646 - 207 - 8989			
16.	5. DI will:						
l he	reb	y certify that the information provided above is truthful ar	selle troubligath Budlike (de David Arigh Con	G. Sentel, Sand Sentel, Sentel, Sentel Sentel Sentel Matter the Matter than f			
Signed Notary Public, State of New York							
-		to this 1 day of October 2022	\ \ Nd0	LA6291676 n Queens County 11			



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Paul Rangel, Board Chair

Susan Stetzer, District Manager

Community Board 3 Liquor License Application Questionnaire for Administrative Approval

To	day's Date: October 1 2022				
AP	PLICANT				
1.	Name of applicant and principle(s): Krua Thai NYC Corp				
2.	Premise address: 78 East 1st Street New York NY 10009				
3.	Cross streets: 2nd Avenue				
4.	Trade name (DBA): Chomp Chomp				
5.					
6.					
7.					
8.					
9.	Previous or current use of the location: Restaurant				
10.	0. Corporation and trade name of current location: Tai Thai Thailand Home Kitchen				
11.	1. Type of building and number of floors: Mixed 5 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?				
13.	Do you plan to apply for Public Assembly permit? ☐ Yes ☒ No				
14.	4. 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, R8A				
15.	How many licensed establishments are within 1 block? ²				
	6. How many On-Premise (OP) liquor licenses are within 500 feet? 18				
	. Is premise within 200 feet of any school or place of worship? Yes No				
PR(DPOSED 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.	D. 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: MONDAY THRU SUNDAY FROM 11:30 AM THROUGH 10:00 PM				
22.	Total number of table: 10 23. Total number of seats: 20				
	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 \				

Revised: December 2019



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Susan Stetzer, District Manager

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ICAN)	
Name of applicant and principle(s): Krua Thai NY	C Corp
Premise address: 78 East 1st Street New York	NY 10009
ross streets: 2nd Avenue	
Trade name (DBA): Chomp Chomp	
Check which you are applying to: New liquor lice	nse 🗆 Alteration of an existing license 🗆 Sale of asset
falteration, describe nature of alteration:	
s location currently licensed? Yes No	
Type of license:	
Previous or current use of the location: Restaurar	
Corporation and trade name of current location: T_{ϵ}	ai Thai Thailand Home Kitchen
Type of building and number of floors: Mixed 5 flo	OOTS
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 perr	nitted occupancy indoors and outdoors?
Do you plan to apply for Public Assembly permit?	⊇Yes ⊠ No
What is the zoning designation (check zoning using specific zoning designation, such as R8 or C2): R7A	map: http://gis.nyc.gov/doitt/nycitymap/ - please give
How many licensed establishments are within 1 blo	
How many On-Premise (OP) liquor licenses are with	
s premise within 200 feet of any school or place of	
TOTAL STREET, OF OPERATION	
POSED METHOD OF OPERATION restaurant	
Describe your method of operation: restaurant	dee he conducted at promise? ☐ Vos Ø No
Will any other business besides food or alcohol serv	Ace be conducted at premiser. Li les & No
If yes, please describe what type:	
What are the proposed days / hours of operation (s	specify days / hours each day and hours of outdoor space
applicable: MONDAY THRU SUNDAY FRO	
Total number of table: 10	23. Total number of seats: 20
How many stand-up bars / bar seats are located on	
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 b	ears (length, shape, and location):					
26. Does premise	e have a full kitchen? ⊠ Yes □ No					
27. What are the	What are the hours kitchen will be open? 10:30 AM THRU 9:30 PM					
28. What type of	food is available for sale? THAI	HINDER PROPERTY OF THE PROPERTY OF THE STATE				
	er or principal always be on site? 🛮 Yes 🗆 No 🛮 If yes, which	?				
	nployees will there be? 5					
31. Do you have o	. Do you have or plan to install? French doors accordion doors windows					
32. Will there be	Will there be TVs / monitors? ☐ Yes ☑ No If Yes, how many?					
33. Will premise h	have music? X Yes No 33a. If Yes, what type of music?	☐ Live Music ☐ Jukebox				
		□ DJ 图 Tapes / CDs / iPod				
34. If other type,	please describe:					
35. What will be t	5. What will be the music volume? 🗷 Background (quiet) 🗆 Entertainment level					
36. Please describ	. Please describe your sound system: iPod					
37. Will you host	7. Will you host any promoted events, scheduled performances or any event at which a cover fee is charged?					
☐ Yes 🛛 No	☐ Yes ☑ No					
38. If Yes, what ty	. If Yes, what type of events or performances are proposed and how often?					
39. How do you p	9. How do you plan to manage vehicular traffic and crowds on the sidewalk caused by your establishment?					
40. Will there be	. Will there be security personnel? ☐ Yes ☒ No 40a. If Yes, how many and when?					
	 How do you plan to manage noise inside and outside your business so neighbors will not be affected? close the window and door 					
42. Do you have s	sound proofing installed? ☑ Yes ☐ No					
43. If not, do you	plan to install sound-proofing? ☐ Yes ☐ No					
APPLICANT HISTO	DRY					
44. Has this corpo	Has this corporation or any principal been licensed previously? 🗆 Yes 🗷 No 🔝 If yes, please indicate name					
	of establishment(s):					
	Address: 45a. Community Board					
	Dates of operation:					
	I Yes □ No If yes, explanation					
of experience	or resume.					
48. Does any princ	Does any principal have other business in the area? ☐ Yes ☐ No If yes, give trade name and describe type					
of business:	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.					
COMMUNITY OUT	TREACH					

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.