

THECITY OF NEW YORK MANHATTAN COMMUNITY BOARD 3

59 Ea st 4 th St re et - New York, NY 10003 Phone (212) 533-5300

ww w. cb3 m an hattan.org - mn03@cb.nyc.gov

Andrea Gordillo, Board Chair

Susan Stetzer, District Manager

May 13, 2025

New York State Liquor Authority 80 South Swan Street, Suite 900 Albany, New York 12210-8002

Re: Sunday to Sunday Inc d/b/a Sunday to Sunday Application for alteration to add municipal space with stipulations: Sidewalk & Roadway Cafe 253-257 Broome Street

Dear New York State Liquor Authority,

Community Board 3, Manhattan has no objection to the alteration of Sunday to Sunday Inc d/b/a Sunday to Sunday at 253-257 Broome Street, for adding municipal space as long as the agreed upon attached stipulations are added to the license.

- 1. Will close all outdoor seating by 10 pm.
- 2. All outdoor dining patrons will be seated at tables.
- 3. Will not have music, amplified sound, or TVs outdoors as per Open Dining Guidelines, and will remove all outdoor speakers.
- 4. For sidewalk seating, business will comply with DOT guidelines. Will have 7 tables and 14 chairs.
- 5. For roadbed seating, will comply with DOT guidelines. Will have 7 tables and 14 chairs.
- 6. Will have a staff person responsible for ensuring no loitering, noise or crowds outside.
- 7. Will conspicuously post this stipulation form beside liquor license inside of business.
- 8. Residents may contact the manager/owner at the number below. Any complaints will be addressed immediately. Will revisit the above-stated method of operation if necessary in order to minimize establishment's impact on neighbors.

Sincerely,

Andrea Gordillo, Chair

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Clint Smeltzer, Chair

Cc: Max Bookman, applicant's representative



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

Andrea Gordillo, Board Chair

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Application for Sidewalk Café Application for Curbside Dining 1. I will close all outdoor seating by 10 pm. 2. All outdoor dining patrons will be seated at tables. 3. I will not have music, amplified sound, or TVs outdoors as per Open Dining Guidelines, and I will remove all outdoor speakers. 4. For sidewalk seating, I will comply with DOT guidelines. I will have 7 tables and 14 chairs. 5. For roadbed seating, I will comply with DOT guidelines. I will have 7 tables and 14 chairs. 6. I will have a staff person responsible for ensuring no loitering, noise or crowds outside. 7. I will conspicuously post this stipulation form beside my liquor license inside of my business. 8. Residents may contact the manager/owner at the number below. Any complaints will be addressed immediately. I	Community	Board 3 Open Dining Stipulations for Administrative Approval
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Signed 1) Deted 1		
Signed 1) Deted 1		
- 11	I hereby certify that the informati	on provided above is truthful and accurate based upon my personal belief.
- 11	Congony/	4/7-125
Sworn to this day of _ April 2015 Jahr June	_	
	Sworn to this day of	Pril 2005
/ Notary Public		/ Notary Public

ZOHAIR FAWAD

Notary Public - State of New York

NO. 01FA0026107

Qualified in Suffolk County

My Commission Expires Jun 24, 2028



Standardized NOTICE FORM for Providing Notice to a Local Municipality for Adding or Removing Contiguous and/or Non-Contiguous Municipal Space

1. Date Notice Was Sent	: 05/09/2025		1a. Delivered by:	Fed	leral Express	Mail Services	
2. This form must be sub	mitted to the clerk	or Local Mu	unicipality when fil	ng to alter co	ontiguous and/o	or non-contiguou	ıs municipal space
т	his Notice is Being	Provided	to the Clerk of the	following L	ocal Municipal	ity	
3. Name of Municipality:	: Manhattan Com	munity Bo	ard No. 3				
		ï	Licensee Inform	ation			
4. License ID Number:	0340-24-133667	7					
6. License name:	Sunday to Sund	lay Cafe Ir	nc	25 May 25 M 164			
7. Trade Name (if any):	Sunday to Sund	lay					
8. Street Address of Esta	blishment: 253-2	257 Broom	e Street				
9. City, Town or Village:	New York				,NY zi	p Code : 10002	
10. Business Telephone	Number of Applicar	nt/Licensee	917-675-6096				
11. Business E-mail of Ap	oplicant/Licensee:	gurpreet	@sundaytosund	aynyc.com			
12. Describe municipal s	pace to be added:	Roadway	y Cafe and Sidev	valk Cafe			
12a. What date did you a	pply for a municipa	l permit?					
Rej	presentative or Att	torney rep	resenting the lice	isee			
13. Representative/Attor	rney's Full Name:	Max Boo	kman, Esq Pe	setsky and	Bookman, P.0	Σ.	
14. Street Address: 325	Broadway, Suite	501					
15. City, Town or Village:	: New York			State: Nev	w York Zip	Code : 10007	
16. Business Telephone i	Number of Represe	ntative/Atto	orney: 212-513-	1988			
17. Business Email Addre	ess: max@pb.la	w; melissa					
I am the licensee that is answers therein; that th to make the statements	e same are true to r	ny knowled s application	lge; that I have bee	n authorized licensee with	, by order of the the same force	Board of Directo	ors of said licensee
	gnature, l affirm - u	nder Penal	ty of Perjury - that	the represer	ntations made ir	n this form are tru	ie.
18. Printed Name: Gurp	preet Singh			Title	CEO		
Signature: X	<i>(</i>						
The above cap	ptioned on-premis	ses licensed	is applying for a	alteration	to their existin	g license with th	e State
Elquoi Autho	rity to sell alcoholi	c neverage	ss on municipal sp	ace.			

Please forward any concerns regarding the issuance of the alteration to the attention of The New York State Liquor Authority by e-mail community@sla.ny.gov