

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

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 Wednesday 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: June 2025

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

If alteration, describe nature of alteration: _____

Previous or current use of the location: Illegal Pot Pizza Joint

Corporation and trade name of current license: _____

APPLICANT:

Premise address: 302 Broome Street

Cross streets: Between Ludlow & Essex Street

Name of applicant and all principals: TCBLES LLC / Justin Pasha

Trade name (DBA): The Cup Bearer

PREMISE:

Type of building and number of floors: 4 story mixed use

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 150 (LNO)

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): C4-4A

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) Wednesday-Saturday 6:00pm-4:00am

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? 30 Total number of indoor seats? 109

How many stand-up bars/bar seats are located on the premise (number, length, and location) Two / 26

1. Approximately 20' X 6', cellar middle 2. Approximately 22' X 10', first floor rear

(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 _____

Tapas and small plates

What are the hours the kitchen will be open? 6:00pm-1:00am

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

How many employees will there be? 25-30

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? ☒ Yes ☐ No

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

If other type, please describe _____

What will be the music volume? ☒ Background (conversational) ☐ Entertainment (live music venue level) Please describe your sound system: Ground floor- Ipad generated small speakers/ Basement- DJ Sound board with ceiling mounted speakers

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

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

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.") My security company will ensure that the sidewalk of these premises do not become crowded with pedestrians and that Ubers and taxis will drop off and pick up quickly and quietly so as not to disturb our neighbors

Will there be security personnel? ☒ Yes ☐ No (If Yes, how many and when) _____
2-3, 10:00pm-close

How do you plan to manage noise inside and outside your business so neighbors will not be affected? Management will ensure that the interior of the premises will not become noisy, and security will be responsible for the exterior of the premises

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: The Cup Bearer LLC

Address: 109 Hamilton Avenue, Stamford, Connecticut Community Board # N/A

Dates of operation: 4/2021 - Present

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. 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. N/A

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? Please see attached

How many On-Premise (OP) liquor licenses are within 500 feet? Please see attached

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.

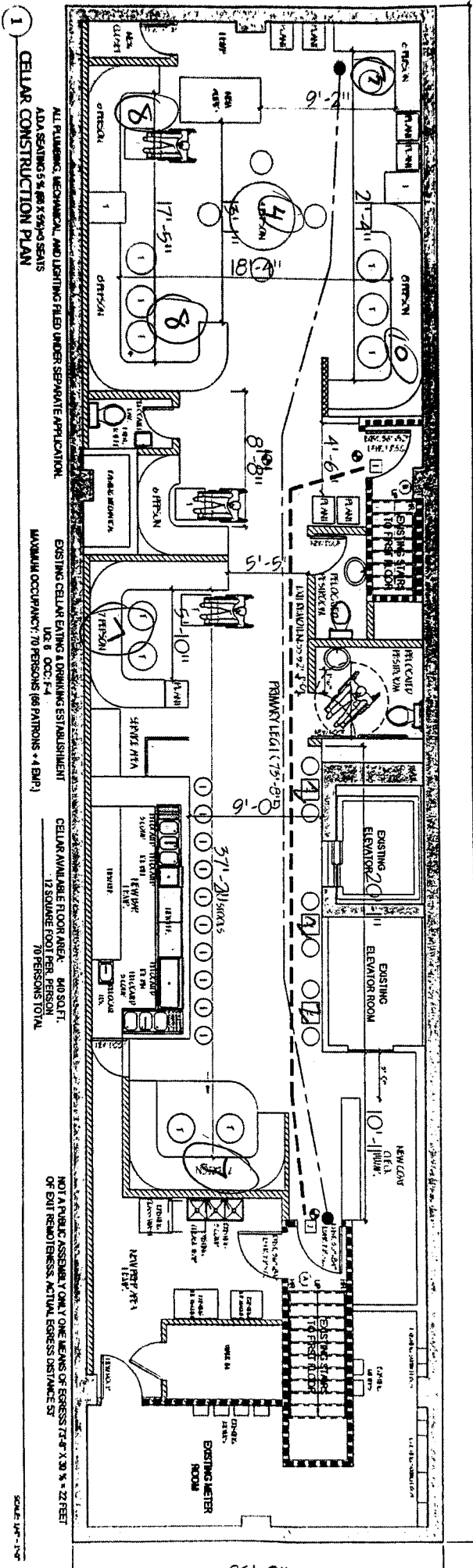
1. My license type is: ☐ beer & cider ☐ wine, beer & cider ☒ liquor, wine, beer & cider
2. ☒ I will operate a full-service restaurant, specifically a (type of restaurant)
Tapas restaurant, or
☐ I will operate a _____,
☐ with a kitchen open and serving food during all hours of operation OR ☐ with less than a full-service kitchen but serving food during all hours of operation OR ☐ Other

3. My hours of operation will be:
Mon Closed; Tue Closed; Wed 6:00pm-4:00am;
Thu 6:00pm-4:00am; Fri 6:00pm-4:00am; Sat 6:00pm-4:00am;
Sun 6:00pm-4:00am. (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
☐ I will close all outdoor dining allowed under the temporary Open Restaurants program and any other subsequent uses by 10:00 P.M. all days and not have any speakers or TV monitors outdoors
5. ☒ I will employ a doorman/security personnel: _____
6. ☐ I will install soundproofing, _____

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 apply for an alteration to the method of operation or for any physical alterations of any nature 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 approval from CB 3.
12. ☒ I will not participate in pub crawls or have party buses come to my establishment.
13. ☒ 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 ☐ I will have happy hour and it will end by _____.
15. ☒ I will not have wait lines outside. ☒ I will have a staff person responsible for ensuring no loitering, noise or crowds outside.
16. ☒ I will conspicuously post this stipulation form beside my liquor license inside of my business.
17. ☒ 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: Justin Pasha

Phone Number: (203) 581-0232



14 Tables
 55 Seats
 10 Barstools

The Cup Bearer
Bergamot Oil Cured Olives

Crispy Shiso + Blue Cheese
\$16

Island Creek Oysters

6-vegetable mignonette
Half a dozen \$18

Sashimi Selection

King Salmon, Yellowfin Tuna, Hamachi + Yuzu Kosho
\$35

Double Cheddar + Truffle Fries

Sanso Pepper Aioli
\$18

Grilled Cheese Parisienne

Burgundy Ketchup
\$17

Big Spring Roll Energy

Chili Crunch Condiment + Herb Salad
\$22

Wagyu Steak Tartare

Parmesan "Croffle"
\$39

Popcorn Chicken

Cacio e Pepe
\$25

Wagyu French Dip

Shio-Koji Au Jus
\$42

CB Burgers

Greenmarket Pickles, Pull Apart Bread
\$29

Maple Sugar Funnel Cake

Cherry Blossom + Sweet Crème Fraiche
\$29

Bourbon Caramel Popcorn

Smoked Sea Salt
\$15