

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 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: December 2025

Is location currently licensed? ☒ Yes ☐ No Type of license: On premises liquor

If alteration, describe nature of alteration: _____

Previous or current use of the location: Tavern

Corporation and trade name of current license: Owlings Inc d/b/a Kind Regards

APPLICANT:

Premise address: 152 Ludlow Street

Cross streets: Stanton and Rivington

Name of applicant and all principals: Small Town Creative LLC

Michael Bray

Trade name (DBA): Kind Regards

PREMISE:

Type of building and number of floors: 7 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 74

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) 7 days a week

5:00pm-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? 38 Total number of indoor seats? 96

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

Two/15 stools - First floor: approximately 20'X4' / Cellar: approximately 22'X6'

(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 _____

New American

What are the hours the kitchen will be open? All hours of operation

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

How many employees will there be? 20-23

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: Ipod generated small 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? _____

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.") Security will ensure that traffic and crowds are not an issue for our neighbors

Will there be security personnel? ☒ Yes ☐ No (If Yes, how many and when) 4-5, Thursday-Saturday

How do you plan to manage noise inside and outside your business so neighbors will not be affected?

Please attach plans. Security will control these premises, as it has for the entire operation of these premises

Is sound proofing installed? ☒ Yes ☐ No and management and security will monitor the interior of the premises, so as not to disturb my neighbors

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: Owlings Inc 0340-22-103830/116 Ave C Rest 0340-22-104089/ Gale Dinners LLC 0340-24-115330

Address: 152 Ludlow Street/116 Avenue C/85 Orchard Street Community Board # 3

Dates of operation: 2005-present/2021-Present/2023-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.

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? See attached

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

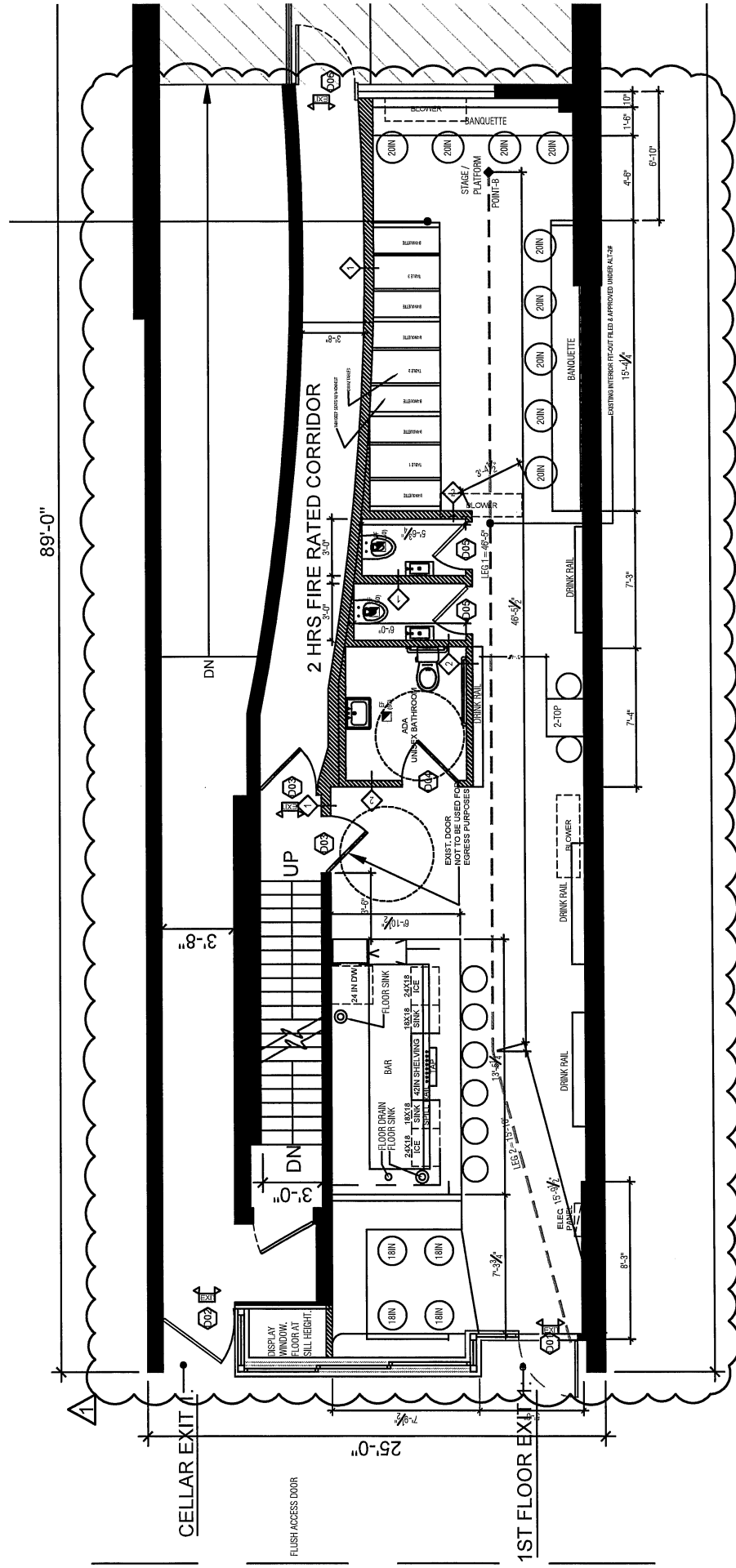
We are including the following questions to be able to prepare stipulations and have the meeting be faster and more efficient. Please answer per your business plan; do not plan to negotiate at the meeting.

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) _____ 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 5:00pm-4:00am; Tue 5:00pm-4:00am; Wed 5:00pm-4:00am;
Thu 5:00pm-4:00am; Fri 5:00pm-4:00am; Sat 5:00pm-4:00am;
Sun 5:00pm-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 7:00pm.
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: Michael Bray

Phone Number: (646) 379-6244



1 PROPOSED FIRST FLOOR PLAN

SCALE: 1/8" = 1'-0"

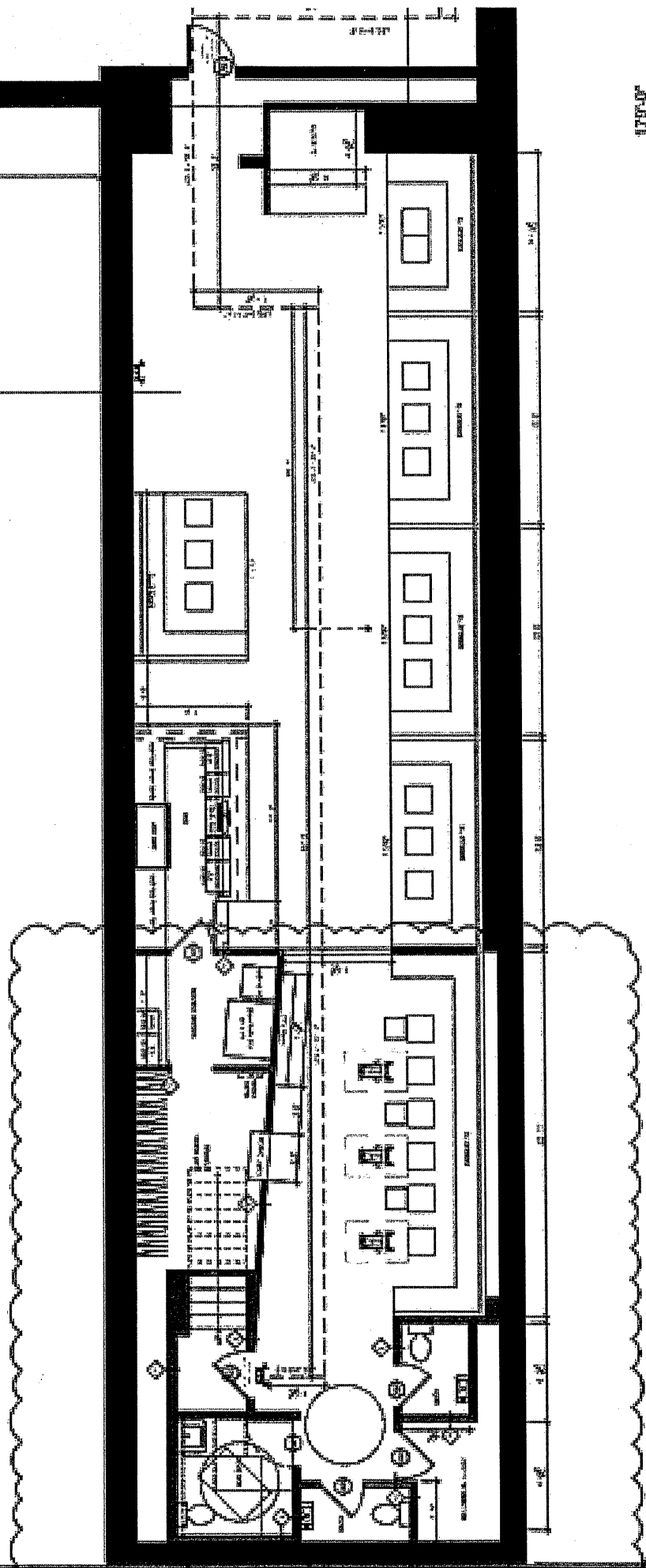
18 tables

46 seats

6 bar stools

Small Town Creative LLC
152 Ludlow Street
New York, NY 10002

PROPOSED EATING AND DRINKING
 ESTABLISHMENT USE: USE GROUP 6
 OCCUPANCY GROUP F-4 (1989 CODE)
 CELLAR TOTAL:
 NET AREA = 1,350 S.F.
 OCCUPANCY = 138 OCCUPANTS

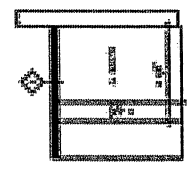


17'9"0"

1
 0-101

PROPOSED CELLAR FLOOR PLAN
 SCALE: 1/8" = 1'-0"

20 Tables
 50 seats
 9 Bar stools



Menu

Pinxcho

2 pieces per order 12

- Sardine, preserved tomato, black garlic
- Pickled crab, crème fraîche, dill
- Mussels, fennel

Pressed Francesinha 14

Roasted pork, cheese, potato

Valentina Roll 14

Mortadella, provolone hot roasted peppers

House Caesar 17

Vegan miso, croissant breadcrumb

Vandouvan Curry \$19

Chickpeas, seasonal veg, quinoa

Crab Fettucine \$21

Crab, Breadcrumbs, Dried Nduja

Slow and Low Beef Loin \$32

Baby potatoes, Broccolini

Roasted Carrots 14

Black Olive tapenade, raddichio, toasts

Marcona almonds

Olives

Bread and butter

All \$7