



THE CITY OF NEW YORK
MANHATTAN COMMUNITY BOARD 3
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Alysha Lewis-Coleman, Board Chair

Susan Stetzer, District Manager

Supplemental Questionnaire for Hotel Applications

Consistent with our expectations for all hotel liquor license applications, please complete this form before the committee meeting.

1. Number of floors in total _____ Number of floors used for lodging _____
2. Number of public spaces _____ Indoor waiting areas for public spaces _____
3. Where deliveries will occur _____
4. Where will the main entrance be located _____
 - a. What other entrances or exits exist and their uses _____

5. What the exterior lighting consists of or if it will change (this includes proposed lighting for the rooftop and lighting for any outdoor area) _____

6. For each public space, please include the following information (please provide attached sheets if there are multiple public spaces):
 - a. Method of operation (lounge, waiting area, lobby, restaurant, event space, etc.) _____ Hours of operation _____
Square footage _____ Capacity _____ Licensed _____
 - b. Seating and what seating is comprised of (tables, chairs, couches, etc.)

 - c. Number of bars and type (service or stand up) _____
 - d. Bar length _____ Number of stools at bars _____
 - e. Food service yes ____ no ____
 - f. Food service from central kitchen or elsewhere _____
 - g. Hours of food service _____ Proposed menu _____
 - h. Music type (live, recorded, etc.) and level (background or entertainment)

7. If any public space is being proposed as a performance and/or dance venue, please provide the following additional information:

- a. Types of programs or shows proposed _____
- b. Frequency of shows (when will they be scheduled) _____
- c. Capacity of dance areas _____
- d. Soundproofing _____

8. If any part of the façade will open, please provide the following information:

- a. Where it is located in the building _____
- b. What it overlooks _____
- c. When it is proposed to be closed _____

9. If there are any proposed outdoor spaces, please provide the following information:

- a. Method of operation _____
- b. Hours of operation _____
- c. Seating and what it consists of _____
- d. Whether music is proposed _____ Type _____
- e. Proximity to adjacent residential windows _____
- f. Licensed? _____

- Please submit any vehicle and pedestrian traffic study in advance of the meeting for review. Hotel applicants should meet with the local precinct regarding its traffic and other potential impacts.
- Applicant should also meet with the community to address concerns.
- Please also submit applicant work history.