

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

Alysha Lewis-Coleman, Board Chair

Susan Stetzer, District Manager

Dear Applicants, Lawyers, Architects, and others who represent liquor license applicants,

Community Board 3 has received your notification of an application for a new or alteration liquor license. Your request has been placed on the agenda of the next meeting of the SLA (State Liquor Authority) & DCA (Department of Consumer Affairs) Licensing Committee of Community Board 3. This committee will meet on

[date and time field]  
[meeting location field]  
[meeting address field]

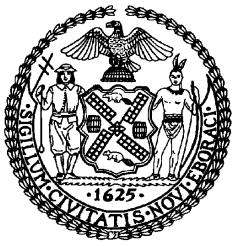
Please see text of email invite for due date and directions on how to submit the questionnaire.

- Submit completed questionnaires (**with requested diagrams**) to the Community Board office **by the due date listed in the email invite. 6 copies (double sided)** plus additional requested information should be brought to the meeting, including copies of petitions circulated and proof of conspicuous posting of Community Board 3 notices at the site for **7 days** prior to the meeting (please include newspaper with date in photo or a timestamped photo). Please read questionnaire instructions carefully.
- Please inform the office of withdrawals by Friday noon before the Committee meeting. Notice must be in writing, by e-mail, stating that applicant will not file with the SLA until they appear before the Community Board. Applicant must submit a new notice to the Community Board to be included on agenda for a meeting at later date.
- Note that withdrawn applications **will not be rolled over** to next month as stated in previous paragraph.
- Applications without completed information - **including** petitions and proof of posting - will not be heard at the committee meeting.
- Please note that the applicant must be present.

Thank you for your help and cooperation. If there are any questions, please call the office.

Sincerely,

Susan Stetzer  
District Manager



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## Community Board 3 Liquor License Application Questionnaire

Please bring the following items to the meeting:

**NOTE: ALL ITEMS MUST BE SUBMITTED FOR APPLICATION TO BE CONSIDERED.**

- Photographs of the inside and outside of the premise.
- Schematics, floor plans or architectural drawings of the inside of the premise.
- A proposed food and or drink menu.
- 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:  
[http://www.nyc.gov/html/mancb3/html/communitygroups/community\\_group\\_listings.shtml](http://www.nyc.gov/html/mancb3/html/communitygroups/community_group_listings.shtml)
- 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: \_\_\_\_\_

**If applying for sale of assets, you must bring letter from current owner confirming that you are buying business or have the seller come with you to the meeting.**

Is location currently licensed?  Yes  No    Type of license: \_\_\_\_\_

If alteration, describe nature of alteration: \_\_\_\_\_

Previous or current use of the location: \_\_\_\_\_

Corporation and trade name of current license: \_\_\_\_\_

**APPLICANT:**

Premise address: \_\_\_\_\_

Cross streets: \_\_\_\_\_

Name of applicant and all principals: \_\_\_\_\_

Trade name (DBA): \_\_\_\_\_

**PREMISE:**

Type of building and number of floors: \_\_\_\_\_

Will any outside area or sidewalk cafe be used for the sale or consumption of alcoholic beverages?

(includes roof & yard)  Yes  No If Yes, describe and show on diagram: \_\_\_\_\_

\_\_\_\_\_

Does premise have a valid Certificate of Occupancy and all appropriate permits, including for any back or side yard use?  Yes  No What is maximum NUMBER of people permitted? \_\_\_\_\_

Do you plan to apply for Public Assembly permit?  Yes  No

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): \_\_\_\_\_

\_\_\_\_\_

**PROPOSED METHOD OF OPERATION:**

Will any other business besides food or alcohol service be conducted at premise?  Yes  No

If yes, please describe what type: \_\_\_\_\_

\_\_\_\_\_

What are the proposed days/hours of operation? (Specify days and hours each day and hours of outdoor space) \_\_\_\_\_

\_\_\_\_\_

Number of tables? \_\_\_\_\_ Total number of seats? \_\_\_\_\_

How many stand-up bars/ bar seats are located on the premise? \_\_\_\_\_

(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)

Describe all bars (length, shape and location): \_\_\_\_\_

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

\_\_\_\_\_

What are the hours kitchen will be open? \_\_\_\_\_

Will a manager or principal always be on site?  Yes  No If yes, which? \_\_\_\_\_

How many employees will there be? \_\_\_\_\_

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  DJ  Juke box  Tapes/CDs/iPod

If other type, please describe \_\_\_\_\_

What will be the music volume?  Background (quiet)  Entertainment level

Please describe your sound system: \_\_\_\_\_

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? \_\_\_\_\_

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.")

Will there be security personnel?  Yes  No (If Yes, how many and when) \_\_\_\_\_

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

Do you have sound proofing installed?  Yes  No

If not, do you plan to install sound-proofing?  Yes  No

**APPLICANT HISTORY:**

Has this corporation or any principal been licensed previously?  Yes  No

If yes, please indicate name of establishment: \_\_\_\_\_

Address: \_\_\_\_\_ Community Board # \_\_\_\_\_

Dates of operation: \_\_\_\_\_

Has any principal had work experience similar to the proposed business?  Yes  No If Yes, please attach explanation of experience or resume.

Does any principal have other businesses in this area?  Yes  No If Yes, please give trade name and describe type 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, 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? \_\_\_\_\_

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

Is premise within 200 feet 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. 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 \_\_\_\_\_,

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 \_\_\_\_\_ ; Tue \_\_\_\_\_ ; Wed \_\_\_\_\_ ;

Thu \_\_\_\_\_ ; Fri \_\_\_\_\_ ; Sat \_\_\_\_\_ ;

Sun \_\_\_\_\_. (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 OR

My sidewalk café hours will be \_\_\_\_\_

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 live performances or televised sports.

I will have a closed fixed façade with no open doors or windows except my entrance door 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 live performances or televised sports.

8. I will not have  DJs,  live music,  promoted events,  any event at which a cover fee is charged,  scheduled performances,  more than \_\_\_\_\_ DJs per \_\_\_\_\_,  more than \_\_\_\_\_ private parties per \_\_\_\_\_, \_\_\_\_\_ number of TVs.
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: \_\_\_\_\_

Phone Number: \_\_\_\_\_

# **ATTENTION RESIDENTS & NEIGHBORS**

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**Company/DBA Name and Contact Number for Questions**

**Plans to open a**

---

**(Please choose) Bar/Restaurant/Club and indicate if there will be a Sidewalk Café or Backyard Garden**

**at the following location**

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**Building Number and Street Name (Address)**

**This establishment is seeking a license to serve**

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**Beer & Wine or Beer/Wine & Liquor**

**There will be an opportunity for public comment on**

---

**Date/Time/Location**

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**Applicant Contact Information**

**At COMMUNITY BOARD 3  
SLA & DCA Licensing Committee Meeting  
mn03@cb.nyc.gov - www.cb3manhattan.org**

# ATTENTION RESIDENTS & NEIGHBORS

## 第 3 社區居民 請注意

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公司名字(Company) and/和 聯繫人的資料 (Contact Info)

**Plans to open a** (以上的店主想要在第 3 社區申請生意相關牌照擴展生意)

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(請選擇/please choose) 酒吧(Bar)/餐館 (Restaurant)  
戶外咖啡 (Sidewalk Café) or 或者  
後院花園咖啡(Backyard Use)

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Address/生意地址

**seeking a license to serve**(以上的店主想要請以下相關酒牌照)

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(請選擇/please choose) 啤酒和酒牌照(Beer & Wine) or/或者  
啤酒牌照 (Beer) or/或者  
酒和烈酒牌照 (Wine & Liquor)

### **Public meeting for comments**

第 3 社區的居民有權利提出自己的意見和建議。

### **(CB3 SLA & DCA Committee Meeting)**

曼哈頓第 3 社區委員會

酒牌和紐約市消費局有關小商業牌照委員會

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時間 (Time) 和地點 (Location)

**mn03@cb.nyc.gov - www.cb3manhattan.org**



# NEIGHBORING RESIDENTS VECINOS DE LA COMUNIDAD

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Company Name/ Contact Info

Nombre de la Compañía/el teléfono de contacto

**Plans to open a:**

**Planifique abrir un/una:**

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(Please choose) Bar/Restaurant  
sidewalk café/backyard use

(Favor de escoger) una Barra/un Restaurante  
un café de acera o un patio de atrás

---

address

dirección

**Seeking a license to serve**

**En búsqueda de una  
licencia para servir:**

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Beer & Wine or Beer/Wine & Liquor

Cerveza y vino o cerveza/vino y bebidas alcohólicas

**Public meeting  
for comments**

**Reunión público  
para comentarios**

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**At COMMUNITY BOARD 3  
SLA & DCA Licensing  
Committee Meeting**

**En la JUNTA COMUNITARIA 3  
La reunión del Comité  
de Licencias del SLA y del DCA**

[mn03@cb.nyc.gov](mailto:mn03@cb.nyc.gov) - [www.cb3manhattan.org](http://www.cb3manhattan.org)

## Petition to Support Proposed Liquor License

Date: \_\_\_\_\_

The following undersigned residents of the area support the issuance of the following liquor license (indicate the type of license such as full-liquor or beer-wine) \_\_\_\_\_

\_\_\_\_\_

to the following applicant/establishment (company and/or trade name) \_\_\_\_\_

\_\_\_\_\_

Address of premises: \_\_\_\_\_

This business will be a: (circle)      Bar      Restaurant      Other: \_\_\_\_\_

The hours of operation will be: \_\_\_\_\_

\_\_\_\_\_

**PLEASE NOTE: Signatures should be from residents of building, adjoining buildings, and within 2-block area.**

Other information regarding the license:

| Name | Signature | Address and Apt # (required) |
|------|-----------|------------------------------|
|      |           |                              |