

Revised: June 2010

## THE CITY OF NEW YORK MANHATTAN COMMUNITY BOARD NO. 3

59 East 4th Street - New York, NY 10003 Phone: (212) 533-5300 - Fax: (212) 533-3659 www.cb3manhattan.org - info@cb3manhattan.org

Dominic Pisciotta, Board Chair

Susan Stetzer, District Manager

## **Community Board 3 Liquor License Application Questionnaire**

Please complete and return (with requested diagram) to the Community Board office by fax or mail to arrive at least 10 business days before the Committee meeting. In addition, bring 6 copies (double sided) plus supporting material requested to the meeting. Failure to complete and return this form on time will result in your item being placed at the end of the agenda. Application must be complete to be heard, including petitions and all items on check list below. Use N/A for answer if appropriate.

Conspicuously display the enclosed posters on the outside of your establishment for 7 days prior to the meeting. Bring a photo with a newspaper showing date as proof of the posting. Check which you are applying for: new liquor license upgrade of an existing liquor license □ alteration of an existing liquor license □ transfer of an existing liquor license Type of license: RESTONANT WINE & BEER ! If alteration, describe nature of alteration: NAPrevious or current use of the location: 244 EAST 13th STREET STOKE? Is any license under the ABC Law now in effect for this location? \(\sigma\) Yes No No Corporation and trade name of current/previous license: ASHTON THAI PLACE Will any other business besides food or alcohol service be conducted at said premises? No No If yes, details: NA 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 your establishment; ☐ Schematics/floor plans of the inside of your establishment; ☐ If a restaurant, please include a proposed menu (including drink menu); ☐ Petition in support of proposed business or change in business with signatures from residential tenants at location and in surrounding buildings and also letter from block association if one exists. E-mail the CB office at info@cb3manhattan.org for help to find block associations. Petition must give proposed hours and method of operations. For example: restaurant, sports bar, combination restaurant/bar. Petitions are required and application will not be heard without petitions. ☐ Photographs of proof of conspicuous posting with newspaper showing date. APPLICANT: Name of applicant and all principals: ANGEL GARCIA PLACE Trade name (DBA): ASHTON THAI INC.

Will the business employ a manager	? [	Yes	No							
How many employees?										
Will there be security personnel?	☐ Yes	7 No	(If Ye	es, how many	(?) NA					
Do you □ have or □ plan to install □ French doors, □ accordion doors, or □ windows? ☒ none of these										
Will there be Hookah pipes? ☐ Yes ☒No Will there be TV's? ☐ Yes ☒No (If Yes, how many?)										
Will premises have music? Yes	□ No		\ \							
If Yes, what type of music? Explain in detail: hecorded Music										
Type of music/entertainment:  Volume level:  □ Live musician □ Live DJ □ Juke box □ Tapes/CDs □ Background (quiet)□ Entertainment level										
Do you □ have or □ plan to install sound-proofing? Please describe your sound system:										
Will you host □ promoted events, □ scheduled performances or □ any event at which a cover fee is charged?										
Do you have plans to manage or address vehicular traffic and crowd control on the sidewalk caused by your establishment?   Yes No If "Yes" please attach plans.										
Is this establishment wheel chair acc	essible?		☐ Ye	es 🔼	No					
Has this corporation or any principal	been lice	ensed previous	sly? □ Ye	es 🔟	No					
If yes, please indicate name of establ	lishment:	MA								
Address: NA			Co	ommunity Bo	oard # N A.					
Dates: NA										
If you answered "Yes" to the above question, please provide a letter of record indicating history of complaints or other comments from the community board in which your establishment is/was located if located in NYC.										
Using the diagram below as an example, attach a separate similar 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-Premises (OP) licenses by circling the letter on diagram. Please label streets and avenues and identify your location near the middle of the diagram and indicate it with a [*]. Use the letters to indicate <u>B</u> ar, <u>R</u> estaurant, etc. The diagram must be submitted with the questionnaire to the Community Board <u>10 business days</u> before the meeting.										
Bar (B) Grocery (G) OP <u>H</u> B/W <u>D</u> B/W	I	Restaurant (R) OPB/W_	Cabai	ret (C) B/W	Sidewalk Café (S) OPB/W					
Example:										
B G B SR G B R B		G B B B R								
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How r	nany licensed establishments are within 1 block?	3 9 4					
If there are block associations, merchant associations, or tenant associations in the immediate vicinity of your location, you must contact them. Please attach proof (copies of letters and poster) that you have advised these groups of your application. Petitions should 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). You may contact the Community Board office for any contact information that is on file.							
INFORMATION REGARDING NEARBY LOCATIONS:							
Premises is not within a 500 foot radius of three or more establishments selling liquor for on-premises consumption.  Premises is within a 500 foot radius of three or more establishments selling liquor for on-premises consumption.							
Are yo	our premises within 200 feet of any school, church or place	of worship?	☐ Yes	<b>⋈</b> No			
If there is a school, church or place of worship within 200 feet of your premises or on the same block, submit a block plot diagram or area map showing its location in proximity to your applicant premises (8 1/2" x 11").							
Indicat	te the distance in feet from the proposed premises. Attach	additional sheet	s if necessary.				
Name	of church/school: NONE		and the second section of the second				
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Name	of church/school: NONE	i					
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Name	of church/school: NONE						
Addres	SS: NONE		Distan	ze:			
Please provide contact information for residents/Community Board and confirm that if complaints are made, you will act immediately to resolve any problems.							
Contac	t person: argel GARCIA.	Phone: 3	47-743-6	1986			
	S: 244 EAST 13TH STREET S						
E-mail			1	J :			
I herel belief. Name: Signatu	oy certify that the information provided above is truthed	ul and accurat	e based upon	my personal			

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3rd Avenue

## Google maps 244 east 13th street store # 2 near New York 10003



- A. Zabb City
   244 East 13th Street, New York, NY (212) 529-8770
   76 reviews
  - B. Thai Place Inc 244 East 13th Street, New York, NY -(212) 529-8770
- C. Baroness the Apt SW, 530 East 13th Street, New York, NY -(212) 529-5964
- D. STUDIO MO'HAIR
   243 E 13th St, New York (212) 353-1300
   5 reviews
- E. **East** Village 88 3rd Avenue, New York, NY - (646) 386-2158 87 reviews
- F. Forbidden Planet 840 Broadway, New York, NY - (212) 473-1576 123 reviews
- G. Strand Book Store 828 Broadway, New York, NY - (212) 473-1452 447 reviews
- H. Hertz Rent-A-Car 12 East 13th St(E)
   12 East 13th St, New York, NY (212) 486-5915
   1 review
- The Bushwick Starr 207 Starr Street, NY - (212) 868-4444 91 reviews
- J. Bar 13 35 East 13th Street, New York, NY -(212) 979-6677 137 reviews