



**DiPasquale Law Group**  
Attorneys & Counselors at Law

June 2, 2015

Manhattan Community Board 3  
59 East 4<sup>th</sup> Street  
New York, New York 10003

RE:                   **Alterations Application**  
                          SakaMai LLC d/b/a SakaMai  
                          157 Ludlow Street, New York, New York 10002

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Dear Members of Community Board 3,

I am the attorney for SakaMai LLC. Enclosed is my client's Community Board 3 application as it pertains to their proposed renovations. The general purpose of this alteration is to increase seating capacity for diners while removing a large bar area that is under utilized. There are five areas of my client's establishment; those being the front pour bar, the main dining area, the rear bar, the salon, and the mezzanine. The alterations in each area are as follows:

Front Pour Bar: Expand bar by approximately 7 feet. Increase the number of bar stools from 5 to 10. Increase the number of seats from 10 to 12.

Main Dining Area. Reduce the number of tables from 6 to 5. Reduce the number of seats from 20 to 16.

Rear Bar Area. Remove the bar. Increase the number of tables from 3 to 12. Increase the number of seats from 18 to 38.

Salon. Increase the number of tables from 3 to 8. Increase the number of seats from 9 to 12.

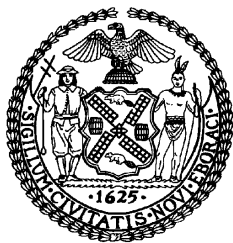
Mezzanine. Extend Mezzanine by approximately 7 feet. Increase the number of seats from 8 to 16 to accommodate larger groups or private gatherings.

Should you have any questions or concerns regarding the foregoing, please do not hesitate to call.

Cordially,  
**DIPASQUALE LAW GROUP**

A handwritten signature in black ink, appearing to read 'James D. DiPasquale'.

James D. DiPasquale  
james@dlgnyc.com



# THE CITY OF NEW YORK MANHATTAN COMMUNITY BOARD 3

59 East 4th Street - New York, NY 10003

Phone: (212) 533-5300 - Fax: (212) 533-3659

www.cb3manhattan.org - info@cb3manhattan.org

Gigi Li, Board Chair

Susan Stetzer, District Manager

## **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 your proposed location. Petition must give proposed hours and method of operation. For example: restaurant, sports bar, combination restaurant/bar. (petition provided)
- ☐ Letter of notice of proposed business to block or tenant association if one exists. E-mail the CB3 office at **info@cb3manhattan.org** for help to find block associations.
- ☐ Photographs of proof of conspicuous posting of meeting with newspaper showing date.
- ☐ If applicant has been or is licensed anywhere in City, letter from applicable community board indicating history of complaints and other comments.

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:** 6/2/15

**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.**

Type of license: Full on-premises Is location currently licensed? ☒ Yes ☐ No

If alteration, describe nature of alteration: See attached.

Previous or current use of the location: Japanese Restaurant

Corporation and trade name of current license: SakaMai LLC d/b/a SakaMai

### **APPLICANT:**

Premise address: 157 Ludlow Street, New York, NY 10002

Cross streets: Stanton and Rivington

Name of applicant and all principals: Tanner Fahl and Natalie Graham

Trade name (DBA): SakaMai

**PREMISE:**

Type of building and number of floors: Mixed Use (operating on first floor and basement)

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 certificate  
of occupancy for back or side yard intended for commercial use? ☒ Yes ☐ No

Indoor Certificate of Occupancy 113 Outdoor Certificate of Occupancy \_\_\_\_\_  
(fill in maximum NUMBER of people permitted)

Do you plan to apply for Public Assembly permit? ☐ Yes ☒ No \*\* A Public Assembly already exists.

Zoning designation (check zoning using map: <http://gis.nyc.gov/doitt/nycitymap/> - please give  
specific zoning designation, such as R8 or C2):

C4-4A

Is this premise wheel chair accessible? ☐ Yes ☒ No

**PROPOSED METHOD OF OPERATION:**

What type of establishment will this be (i.e.: restaurant, bar, performance space, club, hotel)?

Restaurant

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) 5pm to 4am (Sunday through Saturday)

Number of tables? 15 Number of seats at tables? 60

1 bar with 9 bar seats

How many stand-up bars/ bar seats are located on the premise? 1 'pour bar' (service bar) w/ 5 seats

(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) (1) 18' Long - Main Dining Room

(2) 10' Long - Front Pour Bar  
Describe all bars (length, shape and location): \_\_\_\_\_

Any food counters? ☒ Yes ☐ No If Yes, describe: Pour Bar is essentially a food counter in that customers  
can eat at the bar, but must order drinks from a server.

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

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

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

How many employees will there be? 12

Do you have or plan to install ☐ French doors ☐ accordion doors or ☐ windows?

Will you agree to close any doors and windows at 10:00 P.M. every night? ☒ Yes ☐ No

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: iPod with simple speakers

Will you host promoted events, scheduled performances or any event at which a cover fee is charged? If Yes, what type of events or performances are proposed? No

How do you plan to manage vehicular traffic and crowds on the sidewalk caused by your establishment? Please attach plans.

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. N/A

Do you ☐ have or ☐ plan to install sound-proofing? N/A

#### **APPLICANT HISTORY:**

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

If yes, please indicate name of establishment: Existing Establishment has been licensed since 2012

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

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

**If you answered "Yes" to the above question, please provide a letter from the community board indicating history of complaints or other comments.**

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. (1) violation for holding a "soft-opening" for friends and family 1 day prior to license being issued in 2012. \$1,000 fine.

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? 7

How many licensed establishments are within 500 feet? 49 including beer and wine license

Is premise within a 500 foot radius of 3 or more establishments with OP licenses? ☒ Yes ☐ No

How many On-Premise (OP) liquor licenses are within 500 feet? 49

Is premise within 200 feet of any school or place of worship? ☐ Yes ☒ No

If there is a school or place of worship within 200 feet of your premise on the same block, submit a block plot diagram or area map showing its location in proximity to your premise and indicate the distance and name and address of the school or house of worship.

### COMMUNITY OUTREACH:

If there are block 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 with sufficient time for them to respond to your notice.** You may contact the Community Board at [info@cb3manhattan.org](mailto:info@cb3manhattan.org) for any contact information.

**Please 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).

**CONTACT INFORMATION:**

Applicant's telephone number: 646-383-4607 Email: james@dlgnyc.com

Contact Name: James@dlgnyc.com

☒ Attorney ☐ Representative ☐ Other \_\_\_\_\_

Telephone number: \_\_\_\_\_ Email: \_\_\_\_\_

Please provide contact information for residents and the Community Board and confirm that if complaints are made, you will act immediately to resolve any problems.

Contact person: Jaime Graves Phone: 646-590-0684

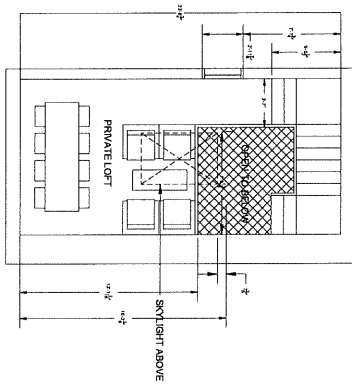
Address: 157 Ludlow Street, New York, NY 10002

Email: jaime@sakamai.com

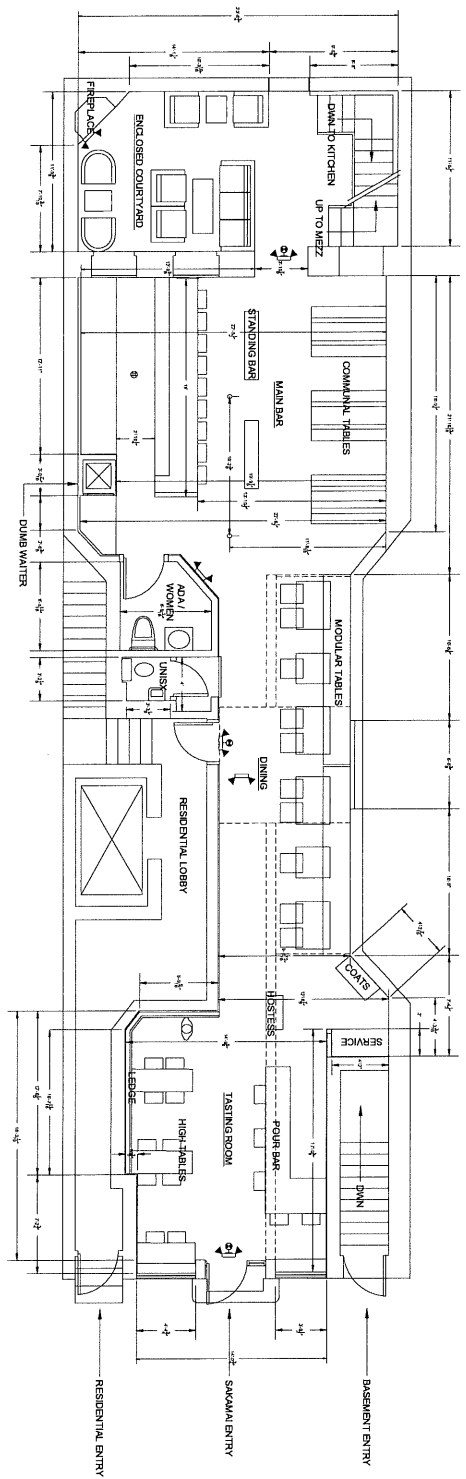
**I hereby certify that the information provided above is truthful and accurate based upon my personal belief.**

Name: James D. DiPasquale

Signature:  Date: 6/2/15



EATING & DRINKING  
ESTABLISHMENT  
USE GROUP 6  
OCCUPANTS = 105 PERSONS



EXISTING

	<p>PROJECT: 157 LUDLOW STREET 1st &amp; CELLAR FLOORS NEW YORK, NY 10002</p> <p>DATE: 6/13/2012 SCALE: 1/4"=1'-0"</p> <p>DWG: FF</p> <p>PAGE:</p>	<p>SAKAMAI LLC (T) 808-385-0995 (E) NATALIE@SAKAMAI.COM</p>	<p>PROJECT: 157 LUDLOW STREET 1st &amp; CELLAR FLOORS NEW YORK, NY 10002</p> <p>DATE: 6/13/2012 SCALE: 1/4"=1'-0"</p> <p>DWG: FF</p> <p>PAGE:</p>
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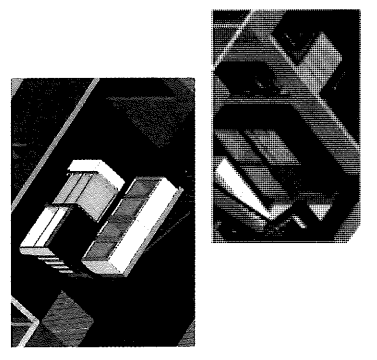
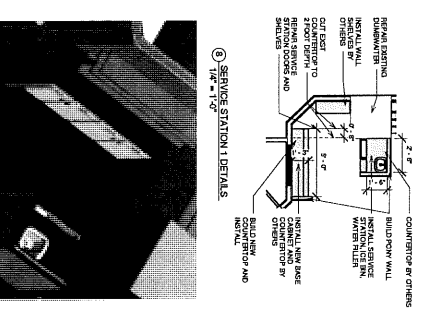
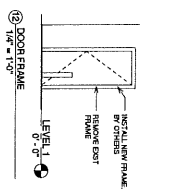
WALL WASHERS CITY 4

No.	Description	Date
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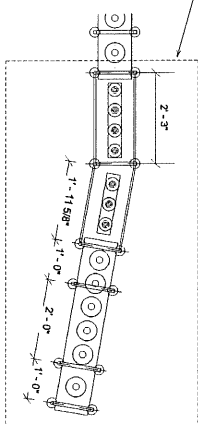
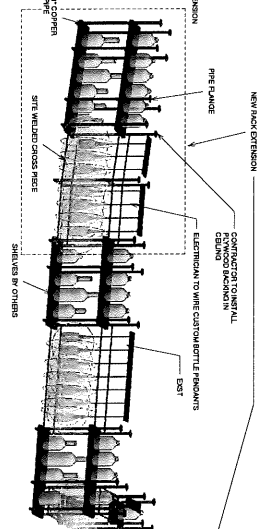
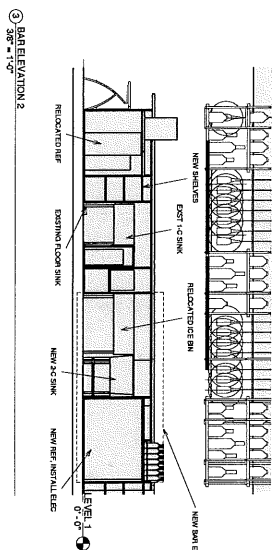
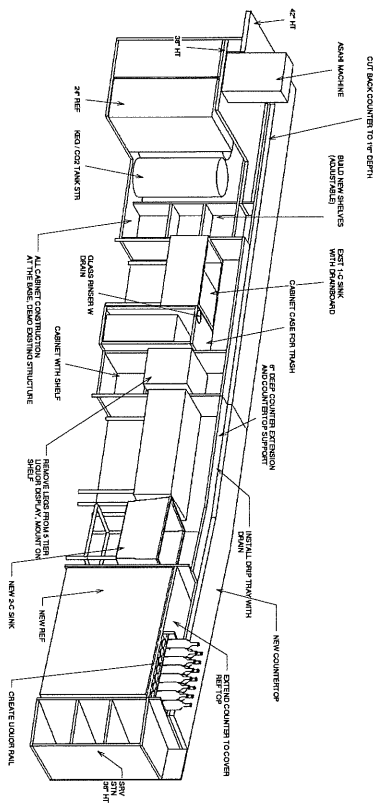
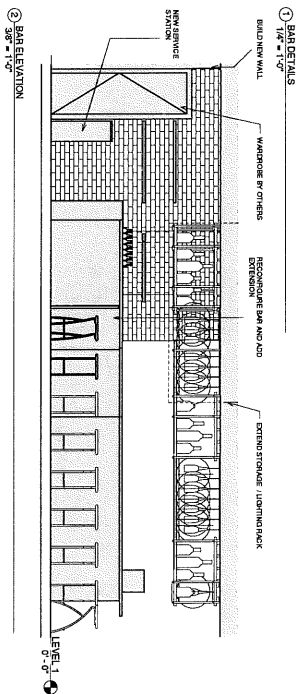
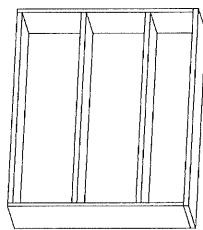
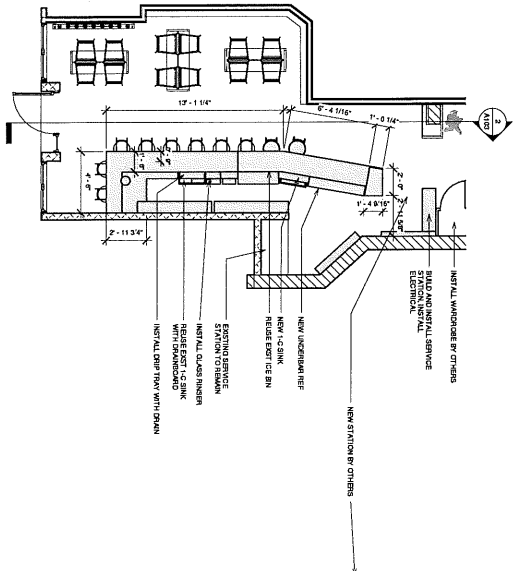
Sakamai LLC  
2015 RENOVATIONS  
CONSTRUCTION  
PLAN

Date	3.4.14
Drawn by	Author
Checked by	Checker
A102	
Scale	As indicated



Proposen



[illegible]



**Buildings**

# PLACE OF ASSEMBLY CERTIFICATE OF OPERATION

**Certificate Number:** 121361481

**Premises Address:** 157 LUDLOW STREET

**Issued On:** 12/15/2014

**Borough:** MANHATTAN

**Block/Lot:** 411 / 7502

**BIN:** 1005353

**Related NB/A1 Job No:** 103075459

**Name of Establishment:** SAKAMI LLC

**Floors:** 001, MEZ

**Occupancy Classification and Description:**

**Number of Persons**

A-3 EATING OR DRINKING ESTABLISHMENT Not a cabaret

113

This certificate authorizes occupancy of the premises as a place of assembly for one year after its issuance, and thereafter, only for periods of time during which there is in effect a New York City Fire Department place of assembly permit, unless suspended, revoked, or superseded. This certificate is subject to the strict observance of the laws, rules and regulations enacted for the protection of the public in such places of assembly. Approved seating plans must be kept on premises at all times.

**Borough Commissioner:**

**Commissioner:**

**MUST BE POSTED CONSPICUOUSLY AT ALL TIMES**





















