

## THE CITY OF NEW YORK MANHATTAN COMMUNITY BOARD 3

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Gigi Li, Board Chair

Susan Stetzer, District Manager

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

Please bring the following items to the meeting:

|            | TE: 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                                   |  |
| ш          | 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  |  |
|            | 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.  |  |
|            |   |  |
|            | eck which you are applying for:   |  |
| <b>⊔</b> n | new liquor license  |  |
| Che        | eck if either of these apply:   |  |
|            | rale of assets upgrade (change of class) of an existing liquor license  |  |
|            |   |  |
| Tod        | day's Date:   |  |
| Ifa        | nulving for calc of agests way must being letter from gurrent owner confirming that you   |  |
|            | pplying for sale of assets, you must bring letter from current owner confirming that you buying business or have the seller come with you to the meeting. |  |
|            | ocation currently licensed? ■ Yes ■ No Type of license: Restaurant Wine   |  |
| If al      | Iteration, describe nature of alteration: Change Hours for Serving Liquor   |  |
|            | vious or current use of the location: Restaurant  |  |
|            |   |  |
| Cor        | poration and trade name of current license: Vintage B Inc.  |  |
|            |   |  |
| API        | PLICANT:  |  |
| Pre        | mise address: 56-58 Ave B aka 235-237 e. 4th Street   |  |
| Cro        | ss streets: Ave B and 4th Street  |  |
| Nar        | ne of applicant and all principals: Ki Young Lee  |  |
|            |   |  |
|            |   |  |

Revised: March 2015 Page 1 of 4

| PREMISE:  |
|---|
| Type of building and number of floors: Multi Family 5 Stories   |
| Will any outside area or sidewalk cafe be used for the sale or consumption of alcoholic beverages? <i>(includes roof &amp; yard)</i> ■ 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? 72                              |
| Do you plan to apply for Public Assembly permit? ■ Yes ■ No   |
| What is the zoning designation (check zoning using map: <a href="http://gis.nyc.gov/doitt/nycitymap/">http://gis.nyc.gov/doitt/nycitymap/</a> please give specific zoning designation, such as R8 or C2):  C1-2 |
| 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) MONDAY TO SUNDAY 5PM - 1AM  |
| Number of tables? 12 Total number of seats? 70  |
| How many stand-up bars/ bar seats are located on the premise? 1   |
| (A <b>stand up bar</b> 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): L SHAPED  |
| 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  FRIED CHICKEN                               |
| What are the hours kitchen will be open? EVERYDAY UNTIL 1AM   |
| Will a manager or principal always be on site? ■ Yes ■ No If yes, which? PRINCIPAL  |
| How many employees will there be? 5   |
| Do you have or plan to install $\square$ French doors $\square$ accordion doors or $\square$ windows?   |
| Will there be TVs/monitors? □ Yes □ No (If Yes, how many?)  |
| Will premise have music? ■ Yes ■ No   |

Revised: March 2015 Page 2 of 4

| 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? $lacktriangle$ Background (quiet) $lacktriangle$ Entertainment level   |
| Please describe your sound system: VINTAGE AUDIO  |
|   |
| 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: TURN TABLE CHICKEN   |
| Address: 314 5TH AVE Community Board # 5  |
| Dates of operation: 5 YEARS   |
| 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.   |
|   |

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 **B**ar, **R**estaurant, etc. The diagram must be submitted with the questionnaire to the Community Board before the meeting.

Revised: March 2015 Page 3 of 4

| LOCATION:  |
|--|
| How many licensed establishments are within 1 block? 3   |
| How many On-Premise (OP) liquor licenses are within 500 feet? 3                                    |
| 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.

| neg | negotiate at the meeting.  |  |  |
|-----|--|--|--|
| 1.  | ☑ I will close any front or rear facade doors and windows at 10:00 P.M. every night or during any amplified performances, including but not limited to DJs, live music and live nonmusical performances.   |  |  |
| 2.  | $\blacksquare$ I will not have $\blacksquare$ DJs, $\blacksquare$ live music, $\blacksquare$ promoted events, $\blacksquare$ any event at which a cover fee is charged, $\blacksquare$ scheduled performances, $\blacksquare$ more than DJs/ promoted events per, $\blacksquare$ more than private parties per |  |  |
| 3.  | ☑ I will play ambient recorded background music only.  |  |  |
| 4.  | ■ I will not apply for an alteration to the method of operation agreed to by this stipulation without first coming before CB 3.  |  |  |
| 5.  | ■ I will not seek a change in class to a full on-premise liquor license without first obtaining approval from CB 3.  |  |  |
| 6.  | ■ I will not participate in pub crawls or have party buses come to my establishment.   |  |  |
| 7.  | ☑ I will not have a happy hour. ☐ I will have happy hour and it will end by  |  |  |
| 8.  | $\blacksquare$ I will not have wait lines outside. $\blacksquare$ There will be a staff person outside to monitor sidewalk crowds and ensure no loitering.   |  |  |
| 9.  | ☑ Residents may contact the manager/owner at the following phone number. Any complaints will be addressed immediately and I will revisit the above-stated method of operation if   |  |  |

necessary in order to minimize my establishment's impact on my neighbors.

Revised: March 2015 Page 4 of 4