

THE CITY OF NEW YORK MANHATTAN COMMUNITY BOARD 3

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

Al	ysh	a Lewis-	Coleman, Board	Chair				Susan St	etzer, District M	anagei
	^	1 1		y Board 3 Liquor Licer	nse Stipula	tions for A	Administra	tive Approva	al .	
L.	Ho	hert	Ceraso	as a qualified r	enresentat	ive of F	Entity to I	he formed	by Robert Cerase	n
loc	ated	at		t Marks Place		New Yor	k, NY agree	to the follow	ving stipulations:	
1.	X	l will ope	erate a full-service res	taurant, specifically a	(type of re	staurant)	AM	ERIC.	AN	
		Kitchen	open and serving food	every night during al	ll hours of c	peration.	•			
2.	My Mo Thu	hours of on 2 fm	operation will be: - /2 A M ; To - /2 A M ; Fri	ue 2PM - 12A	<u>///;</u>	ed 21	PM -12	AM; M; Sun_	Noor - 12A	m.
(I understand opening is no later than specified opening hour & all patrons are to be cleared from business at specified closing hour)										
3.	X	I will no	t use outdoor space fo	or commercial use.						
4.		I will ope	erate my sidewalk cafe	é no later than					W	
5.		I will em	ploy a doorman/secu	rity personnel on the f	following d	ays:				
6.		I will inst	tall soundproofing,	***						
7.	at :	10:00 P.M. ying, inclu	se any front or rear fa . every night or when Iding but not limited t performances.	amplified sound is		windows or when	s except my amplified s	entrance do ound is playi	ade with no open do for will close by 10:00 ng, including but not usical performances.	0 P.M. t limited
8.	l w	ill not have formance	e 🗷 DJs, 🖾 live music es, 🗆 more than	c, 🗷 promoted events _ DJs/ promoted even	s, 🛛 any ev ts per	/ent at wl _, □ mor	hich a cove e than	r fee is charg private p	ed, 🔀 scheduled arties per	
9.	X	I will play	y ambient recorded b	ackground music only	L o					
10.		I will not ning befor	apply for an alteratione CB 3.	n to the method of op	peration or	for any p	hysical alte	rations of an	y nature without firs	t
11.	X	I will not	seek a change in clas	s to a full on-premises	s liquor lice	nse witho	ut first obt	aining appro	val from CB 3.	
12.	X	I will not	participate in pub cra	wls or have party bus	ses come to	my estab	olishment.			
13.	X	I will not	have unlimited drink	specials, including bo	ozy brunch	es, with f	ood.			
14.	□ end	I will not	have a happy hour or Please indic	drink specials with or ate one of the above -	r without ti	me limita	tions <u>OR</u> 🗅	will have h	appy hour and it will	Ĺ
15.	X	I will not	have wait lines outsid	de. 🛘 I will have a staf	ff person re	sponsible	for ensuri	ng no loiterin	g, noise or crowds o	utside.
16.	X	I will con	spicuously post this s	tipulation form beside	my liquor	license in	side of my	business.		
17. Nar	rev	Resident isit the ab	ts may contact the ma ove-stated method of BEAT (1	nager/owner at the notes on the necessare TASO	ry in order t	o minimi:	ze mv estal	olishment's ir	ssed immediately. I v mpact on my neighbo 232 - 843 3	ors.
	_	will:				r none	ivalliber	111_		
10.		WIII								

I hereby certify that the information provided above is truthful and accurate based upon my personal belief.										
Sigwled Dated Dated										
Sworn to this day of										
								,		

MAX BOOKMAN

NOTARY PUBLIC-STATE OF NEW YORK

NO. 02B06334211

QUALIFIED IN NEW YORK COUNTY

MY COMMISSION EXPIRES 12-14-2019



THE CITY OF NEW YORK

MANHATTAN COMMUNITY BOARD 3

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Alysha Lewis-Coleman, Board Chair

Susan Stetzer, District Manager

	Community Board 3 Liquor License Application Questionnaire					
	Today's Date:					
	<u>APPLICANT</u>					
1.	Name of applicant and principle(s): An Entity to be formed by Robert Ceraso					
2.	Premise address: 121 123 St Marks Place New York, NY 10009					
3.	Cross streets: Avenue A and 1st Avenue					
4.	Trade name (DBA): _TBD					
5.	Check which you are applying to: New liquor licence Alteration of an existing license Sale of assets					
	If alteration, describe nature of alteration:					
7.	Is location currently licensed? Yes No					
8.	Type of license:					
9.	Previous or current use of the location: Bar					
10.	Corporation and trade name of current location: NA					
11.	Type of building and number of floors: Mixed Use: 6 floors					
12.	Does premise have a valid Certificate of Occupancy and all appropriate permits, including for any back or side yard use? Yes No 12a. What is the permitted occupancy indoors and outdoors?					
13.	Do you plan to apply for Public Assembly permit? Yes No					
14.	What is the zoning designation (check zoning usingmap: http://gis.nyc.gov/doitt/nycitymap/ -please give specific zoning					
	designation, such as R8 or C2): R7A					
15.	How many licensed establishmentsare within 1 block? See attached SLA Proximit					
16.	How many On-Premise (OP) liquor licenses are within 500 feet? Same as above					
	Is premise within 200 feet of any school or place of worship? Yes No					
	PROPOSED METHOD OF OPERATION					
18.	Describe your method of operation: Restaurant (full kithcen and menu					
19.	Will any other business besidesfoodor alcohol service beconducted at premise? Yes No					
20.	If yes, please describe what type:					
21.	What are the proposed days/hours of operation (specify days/hours each day and hours of outdoor space if applicable:					
	22. Total number of table: 20 23. Total number of seats: 50					

24.	How many stand-up bars/ bar seats are located on the premise? 1 bar/8 bar stools (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 alcholic beverage.)								
	Describe all bars (length, shape, and location): 9 feet long by 7 feet wide - Western Wall								
26.	Does premise have a full kitchen? Yes No								
27.	What are the hours kitchen will be open? all operating hours								
28.	What type of food is available for sale? Grill & Steakhouse								
29.	29. Will a manager or principal always be on site? Yes No If yes, which? TBD								
30.	O. How many employees will there be? 20-24								
	Do you have or plan to install								
33. W	ill premise have music? Yes No 33a. If Yes, what type of music? Live Music DJ Tapes/CDs/iPoc								
34.	If other type, please describe:								
35.	What will be the music volume? A Background (quiet) Entertainment level								
36.	Please describe your sound system: 8 small speakers between 2 dining areas								
37.	Will you host any promoted events, scheduled performances or any event at which a cover fee is charged? Yes No								
	8. If Yes, what type of events or performances are proposed and how often?9. How do you plan to manage vehicular traffic and crowds on the sidewalk caused by your establishment?								
40.	Will there be security personnel? Yes No 40a. If Yes, how many and when?								
41.	How do you plan to manage noise inside and outside your business so neighbors will not be affected?								
42. Do	by you have sound proofing installed? Yes No 43. If not, do you plan to install sound-proofing? Yes No								
	APPLICANT HISTORY								
44.									
45.	Address: 70 E 9th S t/134 1st Ave / 171 173 Ave C 47. Community Board # 3								
46.	Dates of operation: 10/2011-Present / 04/2015-Present / 06/2017-Present								
47.	Has any principal had work experience similar to the proposed business? Yes No <i>If yes</i> , explanation of experience or resume.								
48.	Does any principal have other businesses in this area? Yes No <i>If yes</i> , give trade name and describe type of business: See # 44-46								
49.	Has any principal had SLA reports or action within the past 3 years? Yes No <i>If yes</i> , attach list of violations and dates of violations and outcomes.								
MMIN	IITY 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.

ATTENTION RESIDENTS & NEIGHBORS

An Entity to be formed by Robert Ceraso Contact# 917-332-8432

Company/DBA Name and Contact Number for Questions

plans to open a

Restaurant

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

at the following location

121-123 St Marks Place

Building Number and Street Name (Address)

This establishment is seeking a license to serve

Beer and Wine

Beer & Wine or Beer

917-332-8432

Applicant Contact Information

Contact the Applicant or COMMUNITY BOARD 3
With any questions or concerns.
info@cb3manhattan.org - www.cb3manhattan.org

ATTENTION RESIDENTS & NEIGHBORS

第3社區居民 請注意

An Entity to be formed by Robert Ceraso Contact# 917-332-8432

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)

Restaurant

(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)

121-123 St Marks Place

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)

Beer and Wine

(請選擇/please choose)

啤酒和酒牌照 (Beer & Wine) 啤酒牌照 (Beer)

or/或者 or/或者

酒和烈酒牌照 (Wine & Liquor)

如有任何疑問或關注, 請聯繫申請者或第三社區委員會 info@cb3manhattan.org - www.cb3manhattan.org

NEIGHBORING RESIDENTS VECINOS DE LA COMUNIDAD

An Entity to be formed by Robert Ceraso Contact # 917-332-8432

Company Name/ Contact Info

Nombre de la Compañía/el teléfono de contacto

Plans to open a:

Planifique abrir un/una:

Restaurant

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

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

121 123 St Marks Place

address dirección

Seeking a license to serve

En buscada de una licencia para servir:

Beer and Wine

Beer & Wine or Beer/Wine & Liquor

Cerveza y vino o cerveza/vino y bebidas alcohólicas

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

Si hay preguntas o inquietudes, favor de comuníquese con el solicitante o la Junta Comunitaria 3. info@cb3manhattan.org - www.cb3manhattan.org