



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

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
- 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: November 19, 2019

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: OP

If alteration, describe nature of alteration: _____

Previous or current use of the location: Restaurant

Corporation and trade name of current license: GONG HEY FAT CHOY LLC

APPLICANT:

Premise address: 245 Bowery, New York, New York 10002

Cross streets: Stanton Street & Prince Street

Name of applicant and all principals: Highlife Entertainment Corp.

Principals: Thibaut Castet & Brice Loiacono

Trade name (DBA): TBD

PREMISE:

Type of building and number of floors: Commercial & Office Building- 2 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? Pending

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):
C6-1

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) Sunday: 11am-1am; Monday-Wednesday: 5pm-1am; Thursday-Friday: 5pm-2am
Saturday: 11am-2am

Number of tables? 20 tables Total number of seats? 54 seats at tables, 10 bar stools

How many stand-up bars/ bar seats are located on the premise? 1

(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): Rectangle shape, ground floor, 34' with a small grill that is fully

Does premise have a full kitchen Yes No? vented

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? All hours of open operation

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

How many employees will there be? 8-10

Do you have or plan to install French doors accordion doors or windows? Will close by 8pm

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 DJ will be Wed-Saturday for dinner & weekend brunches

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

Please describe your sound system: Basic stereo and receiver with small speakers throughout the premises

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? No.

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? See attached SLA Proximity Report
How many On-Premise (OP) liquor licenses are within 500 feet? See attached SLA Proximity Report
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. I will operate a full-service restaurant, specifically a (type of restaurant) French cuisine _____, with a kitchen open and serving food during all hours of operation OR I have less than full-service kitchen but will serve food all hours of operation.
2. 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.
3. I will not have DJs, live music, promoted events, any event at which a cover fee is charged, scheduled performances, more than ___ DJs / promoted events per ___, more than ___ private parties per _____.
4. I will play ambient recorded background music only.
5. 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.
6. I will not seek a change in class to a full on-premise liquor license without first obtaining approval from CB 3.
7. I will not participate in pub crawls or have party buses come to my establishment.
8. 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 _____.
9. I will not have wait lines outside. I will have a staff person responsible for ensuring no loitering, noise or crowds outside.
10. 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.

Applicant Relevant Experience (last 5 years)

Thibaut Castet

- Applicant has a Bachelors Degree in International Hotel Management, Institut Vatel Lyon France 2004

Dates: 04/2014- Present

Name: Bagatelle

Address: 1 Little West 12th Street, New York, NY 10014

Title: Manager

Dates: 09/2013-03/2014

Name: Tom Beach

Address: D209 Saint Jean, 97133, Saint Barthélemy French West Indies

Title: General Manager

Dates: 03/2012- 09/2013

Name: Pearl Beach

Address: Quartier de la bouillabaisse 83990 Saint Tropez France

Title: Manager

Dates: 09/2011-08/2011

Name: le Tremplin

Address: centre croisette 1850 73120 Courchevel, France

Title: Manager

Dates: 01/2008-08/2011

Name: Café Marguerite

Address: 1 Cours de la Liberté 69003 Lyon France

Title: Manager

Dates: 10/2006-01/2008

Name: Restaurant L' Avant Première

Address: 19 Rue Thomassin 69002 Lyon France

Title: Waiter

Dates: 03/2005-10/2006

Name: Relais Château de Puy Robert

Address: 24290 Montignac France

Title: Waiter

Brice Loiacono (last 5 years, additional info will be provided at the meeting)

Dates: 09/2014- Present

Name: Bagatelle

Address: 1 Little West 12th Street, New York, NY 10014

Title: Manager

OFFICE USE ONLY		
<input type="radio"/> Original	<input type="radio"/> Amended	Date _____

ESTABLISHMENT QUESTIONNAIRE

In this section you must describe the premises to be licensed. Answer ALL questions completely. Please do not answer "see attached" to any question. Any incomplete answer may delay or prevent the processing of the application.

Helpful Hint: Drawing your diagram and reviewing your photographs may assist you in completing this section. See sample diagrams at the end of this application.

1. Zoning

1a. State what the area is zoned for:
(e.g., Residential, Business, Mixed etc.)

1b. Does the premises have a **VALID CERTIFICATE OF OCCUPANCY** and **ALL** appropriate permits?

 Yes No Pending

2. Premises

2a. Describe the type of building in which the premises will be located.

2b. Is or has the building/proposed premises been known by any other address?

 Yes No

If YES, please specify:

If the address was changed due to a 911 update or other government action, please include documentation for the change.

2c. Is there currently an active license or has there ever been a license to traffic in alcoholic beverages at this location?

 Currently Licensed Previously Licensed Never Licensed Do Not Know

Name of Licensee:

License Serial Number:

Current licensee is in the process of surrendering their license

2d. Are there any disciplinary actions pending against the applicant, current licensee or prior licensee?

 Yes No Do Not Know

Any pending disciplinary action may delay a determination on this application or result in the disapproval.

2e. If the proposed premises has never been licensed, what was the prior use?

2f. Is any other floor or area of the building currently licensed?

 Yes No

Name of Licensee:

License Serial Number:

OFFICE USE ONLY
<input type="radio"/> Original <input type="radio"/> Amended Date _____

3. Premises (interior):

3a. List the total number of floors of the business establishment to be licensed, including the basement:

3b. List the floor(s) where the proposed premises will be located:
(e.g., basement, ground floor, 2nd & 3rd floor, etc.)

3c. Where is the alcohol stored?

3d. Is there interior access to any other floor(s) or area(s) that will not be part of the premises to be licensed?
If yes, show the means of access on the interior diagram(s). Yes No

3e. Are the premises to be licensed divided in any way, by a public or private passageway, over which the applicant does not have exclusive possession and control?
(e.g., hallway, stairwells, common areas, etc.) Yes No

If YES, describe:

3f. How many public restrooms? If less than two (2) public restrooms, you must request a waiver of the two (2) restroom rule in writing. Please show restrooms on diagram.
*2 bathrooms, 4 stalls

3g. List the maximum occupancy of the premises: 3h. Number of tables?

3i. Number of seats at tables? 3j. Number of seats at bar or counter?

4. Bars:

4a. How many customer bars are located on the premises?
(a customer bar is where patrons may order, purchase or receive alcoholic beverages)

4b. How many service bars? *(a service bar is for wait staff use exclusively)*

4c. Describe each bar in the fields below:

Bar 1	Bar 2	Bar 3
Bar Type: <input style="width: 90%;" type="text" value="Customer Bar"/>	Bar Type: <input style="width: 90%;" type="text"/>	Bar Type: <input style="width: 90%;" type="text"/>
Length: <input style="width: 90%;" type="text" value="34' x 3'"/>	Length: <input style="width: 90%;" type="text"/>	Length: <input style="width: 90%;" type="text"/>
Shape: <input style="width: 90%;" type="text" value="Square/Rectangular"/>	Shape: <input style="width: 90%;" type="text"/>	Shape: <input style="width: 90%;" type="text"/>
Location: <input style="width: 90%;" type="text" value="1st Floor/Ground"/>	Location: <input style="width: 90%;" type="text"/>	Location: <input style="width: 90%;" type="text"/>

Attach additional sheets if there are more than 3 bars.

OFFICE USE ONLY		
<input type="radio"/> Original	<input type="radio"/> Amended	Date _____

5. Kitchen:

5a. Does the premises have a full kitchen? Yes No

If NO, does the premises have a food preparation area? Yes No

Show Kitchen or Food Prep Area on the Interior Diagram

NOTE: FOOD MUST BE AVAILABLE FOR SALE DURING ALL HOURS OF OPERATION; SUBMIT A MENU

5b. Is a chef/cook employed at the premises? Yes No

If YES, please list hours of day chef/cook will devote to the premises:

All hours of open operation

6. Hotel or Bed & Breakfast:

6a. How many floors?

6b. How many guest rooms?

6c. For Hotels Only: Is there a public restaurant on the hotel premises? Yes No

7. Outdoor Areas:

7a. Are there any outside areas used for the sale or consumption of alcohol? Yes No

7b. If YES, what is the outside occupancy?

7c. Check all types that apply:
(there must be direct access from the interior of the premises to any outdoor area(s) that you wish to license. Show access on diagram)

- Sidewalk Cafe Deck Patio Porch Gazebo
- Rooftop Yard Balcony Pavilion Tent
- Other (describe):

7d. Is the outdoor area(s) divided by any public or private passageway or area that the applicant does not have exclusive control? Yes No

If YES, how is it divided?

7e. How is the outdoor area(s) contained? Check all that apply and show enclosure on diagram.

- Fencing Wall Shrubbery Roping Stanchions
- Other (describe):

7f. Is a permit required by the locality for outside area(s)? Yes No

If yes, submit a copy of the permit.

OFFICE USE ONLY		
<input type="radio"/> Original	<input type="radio"/> Amended	Date

PROPOSED METHOD OF OPERATION

This form satisfies Section 110 of the ABC Law requiring that a statement be submitted indicating the type of establishment operated at the premises.

The information in this section will be the method of operation you are approved for and will be binding. Should you wish to deviate from this method of operation in any way, you must first apply for and receive permission from the Authority.

1. Will any other business of any kind be conducted in said premises? Yes No
(If YES, please provide details on a separate sheet)

1a. If the premises *is not* a catering establishment, will the premises periodically close to host private events? Yes No

If YES, how frequently?

2. Will the premises have music? Yes No

2a. If YES, check all that apply: Recorded DJ Juke Box Karaoke

Live Music (give details: e.g., rock bands, acoustic, jazz, etc.):

2b. Will the premises use the services of an Event Promoter? Yes No

3. Will the premises permit dancing? Yes No

3a. If dancing is permitted, who will be permitted to dance? Patrons Employees for Entertainment Both

3b. If dancing is permitted, will there be exotic dancing including, but not limited to, topless entertainment, pole dancing and/or lap dancing? Yes No

4. Will there be topless entertainment? Yes No

5. Will the business employ a manager? Yes No

5a. If NO, will principal(s) manage? Yes No

6. How many employees? (excluding principals and security personnel)

6a. If answer is "0" please provide an explanation:

OFFICE USE ONLY
<input type="radio"/> Original <input type="radio"/> Amended Date

7. NYS Law requires businesses to carry workers' compensation and disability insurance (see instructions). If applied for and pending, please indicate.

Workers' Compensation Carrier Name and Policy Number: To be submitted.

Disability Insurance Carrier Name and Policy Number: To be submitted.

If you are exempt from Workers' Compensation and/or Disability Benefits Insurance coverage, submit an approved Certificate of Attestation of Exemption from NYS Workers' Compensation and/or Disability Benefits Insurance Coverage from the NYS Workers' Compensation Board. The application is available on their website: <http://www.wcb.ny.gov> or you may contact them by phone at: (877) 632-4996

8. Will security personnel be used at the premises? Yes No

9a. If YES, how many?

9b. If YES, provide your **Proprietary Security Guard Employer Unique Identification Number** assigned to the business by the NYS Department of State Division of Licensing Services or the name of the security company through which the security personnel will be hired:

The licensee is responsible for assuring that hired security personnel are registered in accordance with NYS Security Guard Registration Guidelines. Please contact the NYS Department of State to obtain information.

9. Provide a detailed plan of supervision for the premises to be licensed. Clearly describe how you will maintain control and order over the licensed premises. How will you monitor alcohol sales and prevent sales to minors and sales to intoxicated persons? How will you handle unruly patrons, altercations, etc., to prevent the premises from becoming disorderly? Include additional sheets if necessary.

The Applicant is operating a casual sit-down restaurant and it is not anticipated that security issues will arise. Notwithstanding, the owners, or a well-trained supervisor, will be on-site at all times. All employees will be TIPS trained and ask for proper identification prior to serving alcohol to patrons. Visibly intoxicated patrons will be denied the service of alcohol. Unruly patrons and those engaging in altercations will be asked to leave and the police will be notified in all necessary and appropriate times. Staff will also be trained to recognize potentially disorderly situations and will be instructed to report all instances to management so that any problems can be addressed, in advance, and so that the police may be called if warranted.

10. Are all responses provided in this application consistent with the information provided to the municipality or Community Board within the Standardized Notice Form for Providing 30-Day Advance Notice?

Yes No

10a. If NO, please explain:

ALCOHOLIC BEVERAGES MAY ONLY BE CONSUMED, SOLD OR GIVEN AWAY DURING THE HOURS APPROVED BY THE COUNTY WHERE THE PREMISES IS LOCATED UNLESS FURTHER RESTRICTED BY THE AUTHORITY

A list of county closing hours is available at the following link:
<http://sla.ny.gov/provisions-for-county-closing-hours>

Highlife Entertainment Corp.

245 Bowery, New York, New York 10002

LES ENTREES/STARTERS

Carpaccio de daurade aux agrumes

Dorado carpaccio with citrus

Poulpe grille, pommes de terre tièdes, sauce Provençale

Grilled octopus, potatoes, Provençale sauce

Tartare de saumon

Salmon Tartare with shallots, dill, olive oil, lemon

Salade Lyonnaise

Frisee Lettuce, bacon, croutons, poached egg, seeded mustard vinaigrette

Salade Cesar

Kale salad, Parmesan crisps, lemon zest, croutons

Feuillette de Brie

Baked Brie in puff pastry, honey and balsamic reduction

LES CLASSIQUES

Le Burger

With camembert, red onions, lettuce and tomatoes

Steak Frites

NY Strip with peppercorn sauce served with fries

Fromage & Charcuterie

Choice of 2 / Choice of 3

Cheese Selection: *Ossau-Iraty(FR), Camembert (FR),*

FourmeD'Ambert(FR)

Meat Selection: *Paté de Campagne (FR), Chorizo*

(SP), Jambon de Bayonne (FR), Saucisson Sec (FR)

A PARTAGER/TO SHARE

Boulettes Provençales

Beef meatballs, ratatouille, tomato sauce, parmesan

Moules Marinières

Mussels, cream, chives, shallots, Provençal white wine

Crevettes à l'Aïoli

Grilled shrimp, Provence herbs, sundried tomatoes, tarragon aioli

Tartelette aux Courgettes

Thin zucchini tart, thyme flower, tomato coulis, sea salt

Fougasse Forestière

Mushroom flatbread, parmesan, truffle oil, arugula

Jarret d'Agneau

Lamb shank, mashed potatoes, Portobello sauce

Côte de Boeuf

Ribeye steak, Bordeaux wine sauce, French fries, French beans, green peas

LES PLATS/MAIN COURSES

Daube Provençale

Braised Black Angus beef stew in a red wine sauce, black olives

Loup de Mer

Grilled branzino, ratatouille, fresh herbs oil

Pavé de Saumon Grillé

Atlantic salmon filet, green lentil, olive oil sauce

Truffle Mac N Cheese

Elbow pasta, old English cheddar, truffle oil, arugula

Poulet Sauté Chasseur

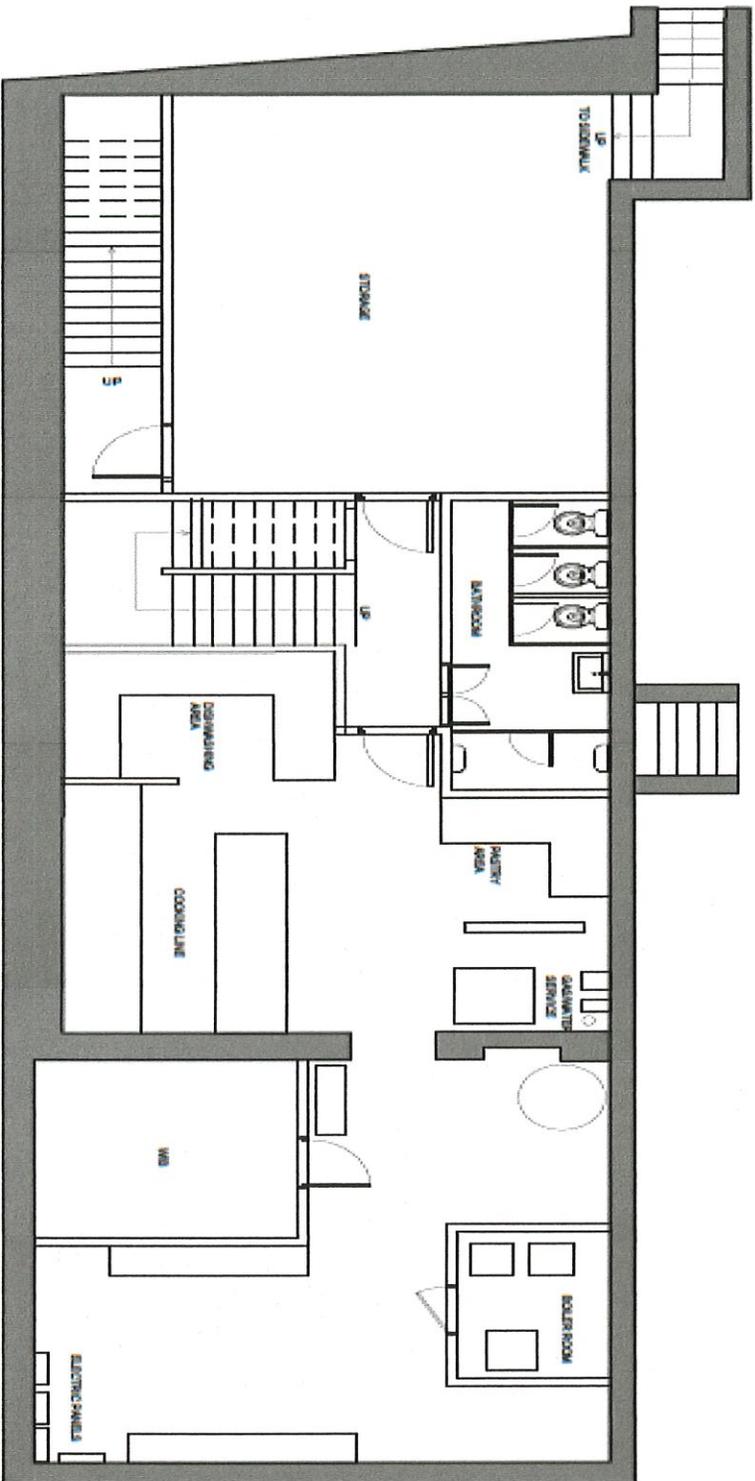
Roasted farm chicken breast, mashed potatoes, French beans, green peas, wild mushroom creamy sauce

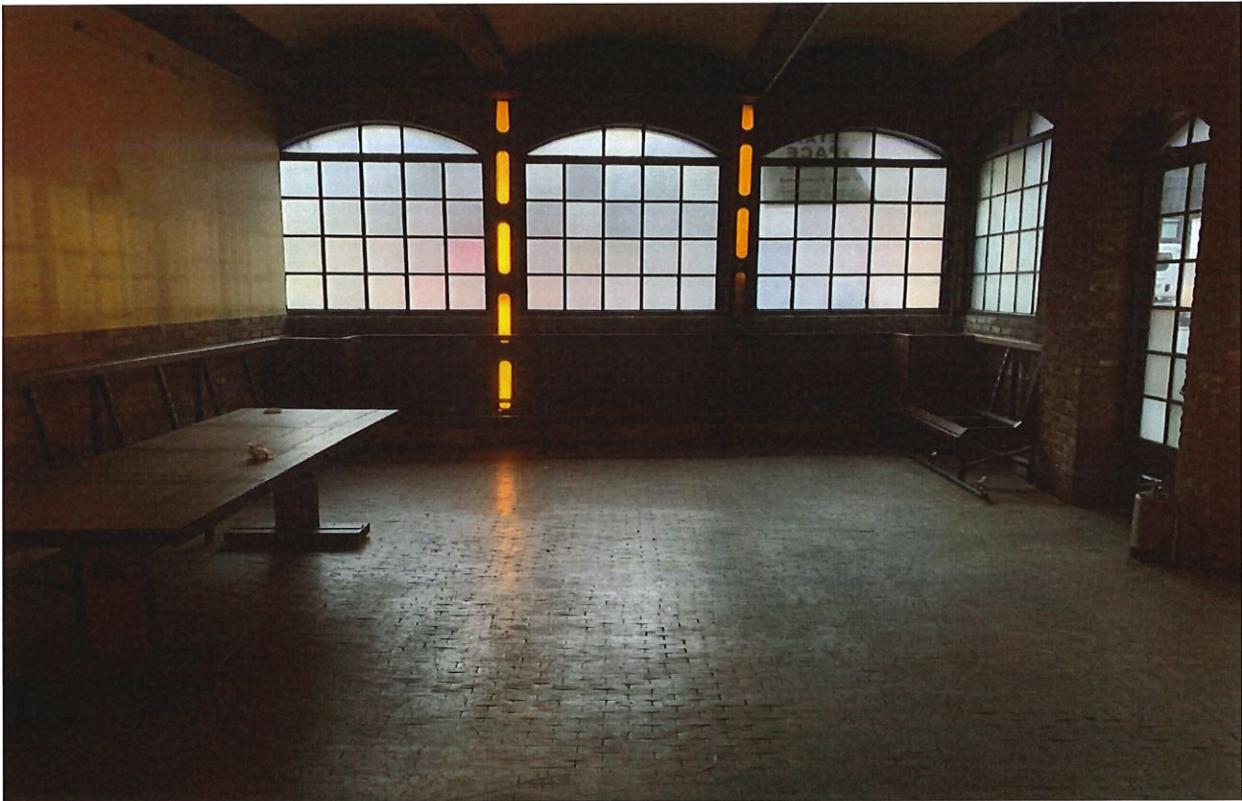
Risotto aux Champignons

Arborio rice, porcini, oyster mushrooms, button mushrooms, parmesan

HIGHLIFE ENTERTAINMENT CORP. – BASEMENT DIAGRAM

245 Bowery Street, New York, New York 10002

















Proximity Report for Location:

November 12, 2019

245 Bowery, New York, NY, 10002

* This report is for informational purposes only in aid of identifying establishments potentially subject to 500 and 200 foot rules. Distances are approximated using industry standard GIS techniques and do not reflect actual distances between points of entry. The NYS Liquor Authority makes no representation as to the accuracy of the information and disclaims any liability for errors.

Closest Liquor Stores

Name	Address	Approx. Distance
ELIZABETH & VINE INC	269 BOWERY	350 ft
WINE O INC	171 ELIZABETH ST	800 ft
NOLITA WINE MERCHANTS LLC	227 MULBERRY ST	900 ft
YOUNG NAM KANG	52 SPRING STREET	1050 ft
GROTTA AZZURRA IMPORTS INC	177 MULBERRY ST STORE 1A	1410 ft
FLYNN MCCLURE INC	100 STANTON ST	1455 ft
EL CORRAL SOHO INC	406 BROOME ST, STORE H AKA 199	1475 ft

Churches within 500 Feet

Name	Approx. Distance
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Schools within 500 Feet

Name	Address	Approx. Distance
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On-Premise Licenses within 750 Feet

Name	Address	Approx. Distance
GONG HEY FAT CHOY LLC	245 BOWERY (ENTRANCE ON STANTO	55 ft
241 BOWERY CORP	241 BOWERY	105 ft
INTERNATIONAL CENTER OF PHOTGRY&MAMAN TRIBECA LLC	250 BOWERY	190 ft
JB DP STANTON CORPORATION	17 STANTON ST	240 ft
19 STANTON RESTAURANT LLC	19 STANTON ST	275 ft
ICON TWO LLC	218 220 BOWERY	280 ft
KAL REALTY PARTNERS LLC,VNAA LLC,TLLULE LLC,ACE GP	223 225 BOWERY	295 ft
JUNTOS INC	234 ELIZABETH STREET	315 ft
CAFE HABANA INC	229 ELIZABETH ST	330 ft
MISTER FRENCH NYC LLC	218 BOWERY	340 ft
215 CHRYSTIE LLC IS CHRYSTIE ST MANAGEMENT LLC &VS	215 CHRYSTIE ST	340 ft
IS CHRYSTIE STREET MANAGEMENT LLC&VS CHRYSTIE LLC	215 CHRYSTIE ST	345 ft
RHI EQUITY LLC & ET AL 150710 LLC	191 CHRYSTIE ST	345 ft
FREEMAN HOLDINGS LLC	191 CHRYSTIE ST	350 ft

Name	Address	Approx. Distance
VARIETY ENTERTAINMENT GROUP LLC	189 CHRYSTIE STREET	355 ft
PAMDH ENTERPRISES INC	217 BOWERY	380 ft
PUBLIC REST,L.P AVROKO REST GRP LLC,G.P &27 LTD PT	206 210 ELIZABETH STREET	390 ft
MUSKET HOSPITALITY LLC	265 ELIZABETH ST	420 ft
TACOMBI NYC LLC	267 ELIZABETH ST	430 ft
BIERGARTEN AMERICA INC	7 RIVINGTON STREET	460 ft
ZHEN WEI FANG INC	207 BOWERY	525 ft
CANTALOUPE LLC	196 ELIZABETH STREET	535 ft
2B RESTAURANT CORP	194 ELIZABETH STREET	555 ft
SWISS WHITE INT'L LLC	177 CHRYSTIE ST	575 ft
UNCLE BOON'S LLC	7 SPRING ST	635 ft
5 SPRING STREET CORP	5 SPRING STREET GROUND FL	640 ft
AURORA CATERING INC	231 MOTT ST	645 ft
YN WINEBAR LLC	227 MOTT ST	655 ft
BOWERY HOSPITALITY ASSOCIATES LLC	199 BOWERY	670 ft
TOM & JERRYS BAR REST INC	288 ELIZABETH STREET	700 ft
LES BRASSEURS INC	1006 08 2ND AVENUE	705 ft
TWELVE SPRING ST REST CORP	12 SPRING ST AKA176ELIZABETHST	725 ft
14 SPRING STREET CAFE LLC	14 SPRING STREET	735 ft
18 FRONT INC	18 SPRING STREET	740 ft
ERJO COMPANY LLC	285 MOTT ST	745 ft

Pending Licenses within 750 Feet

Name	Address	Approx. Distance
MANGIAMI INC	9 STANTON STREET	90 ft
JDS RESTAURANT LLC	9 STANTON ST	125 ft
WHOLE FOODS MARKET GROUP INC	95 E HOUSTON ST	560 ft

Unmapped licenses within zipcode of report location

Name	Address
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From: Kimberly Summers kimberly@ds-lawoffices.com 

Subject: CB3 Application- Liquor License- 245 Bowery

Date: November 21, 2019 at 5:58 PM

To:

Bcc: kwebster.nyc@verizon.net, vonhartz@me.com, ban62007@gmail.com, lesdwellers2012@gmail.com, mitchellgrubler@yahoo.com, friendsoftheles@gmail.com, alyshacoleman@yahoo.com, info@gohproductions.org, bonnie@gohproductions.org, ck@wingflix.com, richard@lespi-nyc.org, jancrc@gmail.com, michaeljschweinsburg@gmail.com, pupula79@aol.com, alyshaco1eman@yahoo.com, Kimberly Summers kimberly@ds-lawoffices.com

KS

Good afternoon,

Please find attached a completed community board application for our client, Highlife Entertainment Corp, who is scheduled to appear before the Community Board on Monday, December 9th with regards to its application for an on-premises liquor license at 245 Bowery, New York, New York. Please note that the intended hours of operation are 5pm-1am Monday-Wednesday, 5pm-2am Thursday & Friday, 11am-2am on Saturdays, and 11am-1am on Sundays. The applicant is also seeking approval to have a DJ, with no additional amplification, at for dinner on Wednesday-Saturdays and for weekend brunches. If you have any questions or comments on this application, please do not hesitate to reach out. Thank you.

Best regards,

Kimberly A. Summers, Esq.
DIPASQUALE & SUMMERS
555 Fifth Avenue, 14th Floor
New York, New York 10017
(t) 646.383.4607
(f) 646.606.2388
www.DS-LawOffices.com

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CB Application-
Submitted.pdf

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