

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 Stipulations for Administrative Approval

١, _	Kun	dapa Wall	, as a qualified represe	ntative of	Thai Direct Inc		
loc	ated	at 1 :	31 Avenue A New	York, NY agree	to the following stipulations:		
1.		I will operate a full-s	ervice restaurant, specifically a (type or rving food every night during all hours	of restaurant)			
2.	My Mo Thu	hours of operation won 11:30am to 12am 11:30am to 12am	ill be: ; Tue _11:30am to 12am ; Fri _11:30am to 12am;	; Wed <u>11:30am t</u> Sat <u>11:30am to 12</u>	to 12am ; 2am ; Sun 11:30am to 12am .		
(I u					e cleared from business at specified closing hour)		
3.	X	I will not use outdo	or space for commercial use.				
4.		I will operate my sid	ewalk café no later than				
5.		I will employ a door	nan/security personnel on the following	ng days:			
6.		I will install soundpr	oofing,				
7.	at 1 pla	LO:00 P.M. every night	or rear façade doors and windows or when amplified sound is limited to DJs, live music and live s.	windows ex or when am	eve a closed fixed façade with no open doors or cept my entrance door will close by 10:00 P.M. plified sound is playing, including but not limited music and live nonmusical performances.		
8.	l wi per	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					
9.	X	I will play ambient re	corded background music only.				
10.		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.					
11.	X	I will not seek a chan	ge in class to a full on-premises liquor	license without f	first obtaining approval from CB 3.		
12.	X	I will not participate	n pub crawls or have party buses com-	e to my establish	nment.		
13.	X	I will not have unlimi	ted drink specials, including boozy bru	nches, with food	l.		
14.			y hour or drink specials with or withou ase indicate one of the above -	ıt time limitatior	ns $\overline{\mathit{OR}} \square I$ will have happy hour and it will		
15.	X	I will not have wait lin	nes outside. 🗖 I will have a staff person	n responsible for	r ensuring no loitering, noise or crowds outside.		
16.	X	I will conspicuously p	ost this stipulation form beside my liqu	or license inside	e of my business.		
17.		Residents may contact the manager/owner at the number below. Any complaints will be addressed immediately. I will exist the above-stated method of operation if necessary in order to minimize my establishment's impact on my neighbors.					
Van	ne: _			Phone Nur	mber:		
.8.		will:					
ign	60	m	of Movembe 2019		JAMES LAM Notary Public, State of New York Notary Public State o		



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

	Today's Date: 11/26/2019				
	<u>APPLICANT</u>				
	Name of applicant and principle(s): THAI DIRECT INC				
	Premise address: 131 AVENUE A NEWYORK NY 10009				
	Cross streets: EAST 8TH AND 9TH STREET				
4.	Trade name (DBA): THAI DIRECT				
5.	Check which you are applying to: New liquor licence Alteration of an existing license Sale of assets				
	6. If alteration, describe nature of alteration:				
	Is location currently licensed? Yes No				
8.	Type of license: BEER AND WINE				
	Previous or current use of the location:				
10.	Corporation and trade name of current location: 131 AVENUE A NEW YORK NY 10009				
11.	. Type of building and number of floors: GROUND FLOOR				
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 using map: http://gis.nyc.gov/doitt/nycitymap/ -please give specific zoning				
	designation, such as R8 or C2): C5				
15.	How many licensed establishments are within 1 block? 2				
16.	How many On-Premise (OP) liquor licenses are within 500 feet? UNKNOWN				
	Is premise within 200 feet of any school or place of worship? Yes No				
	PROPOSED METHOD OF OPERATION				
18.	Describe your method of operation: FULL DINING RESTAURANT				
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: 7 DAYS 11:30 AM TO 12:00 AM 22. Total number of table: 8 23. Total number of seats: 16				

24.	How many stand-up bars/ bar seats are located on the premise? (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.)				
25.	Describe all bars (length, shape, and location): 4' X 5'				
26.	Does premise have a full kitchen? Yes No				
27.	What are the hours kitchen will be open? 11:00 AM THROUGH 11:30 PM				
28.	What type of food is available for sale? THAI FOOD				
29.	Will a manager or principal always be on site? Yes No If yes, which? PRINCIPLE How many employees will there be? 5				
30.					
	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/iPod				
34.	If other type, please describe:				
35.	What will be the music volume? ✓ Background (quiet) ☐ Entertainment level				
36.	Please describe your sound system: REGULAR STERO SYSTEM				
37.	Will you host any promoted events, scheduled performances or any event at which a cover fee is charged? Yes No				
	If Yes, what type of events or performances are proposed and how often?				
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. D	o you have sound proofing installed? Yes No 43. If not, do you plan to install sound-proofing? Yes No				
	APPLICANT HISTORY				
44.	Has this corporation or any principal been licensed previously? Yes No <i>If yes</i> , please indicate name of establishment(s):				
45.	Address: 47. Community Board #				
46.	Dates of operation:				
	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:				
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.				
MMUN	NITY OUTREACH				

<u>CO</u>]

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.