

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

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		ki Takeshige		, as a	qualified repr	esentative of _		Global Ni	ppa USA Inc
loca	ted	at	239-241	East 5th St	treet	, New Y	ork, NY agree	to the following	ng stipulations:
1.		I will operate a Kitchen open ar							
2.	My Mo Thu	hours of operati n <u>10:00am-Mid</u>	on will be: dnite; ⁻ ; F	Tue <u>Daily i</u> ri	nc. Sunday	; Wed _; Sat		; ; Sun	· · · · · · · · · · · · · · · · · · ·
(I ur									at specified closing hour)
3.		I will not use or				·			
4.		I will operate m	y sidewalk ca	fé no later t	han N.A.				, , , , , , , , , , , , , , , , , , , ,
5.									
6.		I will install sou					,		
7.	at 1 play	I will close any f .0:00 P.M. every ying, including bu musical perform	night or wher it not limited	n amplified s	ound is	windo or whe	ws except my en amplified s	entrance door sound is playing	e with no open doors or will close by 10:00 P.M., including but not limited cal performances.
8.		ll not have ⊠ DJ formances, □ m							, 🗷 scheduled ties per
9.	X	I will play ambie	ent recorded	background	music only.				
10.		I will not apply the ning before CB 3.		on to the m	ethod of opera	tion or for any	physical alte	rations of any r	nature without first
11.	X	I will not seek a	change in cla	ss to a full o	n-premises liq	uor license wit	hout first obt	aining approva	I from CB 3.
12.	X	I will not partici	pate in pub c	rawls or hav	e party buses o	ome to my es	tablishment.		
13.	X	I will not have u	nlimited drin	k specials, ir	cluding boozy	brunches, wit	h food.		
14.		I will not have a						I I will have hap	py hour and it will
15.	X	I will not have w	vait lines outs	ide. 🗆 I will	have a staff pe	erson responsi	ble for ensuri	ng no loitering,	noise or crowds outside.
16.	X	I will conspicuo	usly post this	stipulation f	orm beside my	liquor license	inside of my	business.	
									ed immediately. I will pact on my neighbors.
Nan	ne: _	Hiroshi Nagat	ta			Phor	ne Number: _	(917)863-727	9
18.	<u>п</u>	will:							
						V 100			
I he	reby	certify that the	information	provided ab	ove is truthful	and accurate		my personal be ugust 28, 2020	
Sign	ed	41-14				.	Da	ted	
Swo	rn te	o this	day of		2020				
							No	tary Public	



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Community Board 3 Liquor License Application Questionnaire

To	Today's Date: July 31, 2020									
ΔΡ	PLICANT									
1.	Name of applicant and principle(s): Global Nippa USA Inc.									
2.	Premise address: 239-241 East 5th Street, a/k/a 87 2nd Avenue									
3.	Cross streets: Corner East 5th Street & 2nd Avenue									
4.	Trade name (DBA): t/b/d									
5.	Check which you are applying to: ☑ New liquor license ☐ Alteration of an existing license ☐ Sale of assets									
6.	If alteration, describe nature of alteration:									
7.	Is location currently licensed? ☐ Yes ☐ No									
8.	Type of license: Restaurant Wine									
9.	Previous or current use of the location: Restaurant									
	0. Corporation and trade name of current location: Trim Castle Corp.									
	.1. Type of building and number of floors: 6 Story Walk-Up									
	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? LNO									
13.	13. Do you plan to apply for Public Assembly permit? ☐ Yes ☒ No									
14.	.4. 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): R7A Commercial Overlay									
	. How many licensed establishments are within 1 block? 10									
16.	L6. How many On-Premise (OP) liquor licenses are within 500 feet? 25 (N.A. Wine License)									
	17. Is premise within 200 feet of any school or place of worship? ☐ Yes ☒ No									
20	ODOSED METUOD OF ODERATION									
	OPOSED METHOD OF OPERATION . Describe your method of operation: First Class Japanese Restaurant									
	. Will any other business besides food or alcohol service be conducted at premise? ☐ Yes ☒ No									
	. 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: Close by Midnight, Daily inc. Sunday									
22	• • • • • • • • • • • • • • • • • • • •									
22. Total number of table: 24 tables, 2 counters 23. Total number of seats: 74										
24.	24. How many stand-up bars / bar seats are located on the premise? 0									
	(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.)									

Revised: December 2019

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. Will you host any promoted events, scheduled performances or any event at which a cover fee is charged? ☐ Yes ☒ No							
How do you plan to manage vehicular traffic and crowds on the sidewalk caused by your establishment? Not expected to attract crowds or vehicular traffic							
. Will there be security personnel? ☐ Yes ☒ No 40a. If Yes, how many and when?							
. How do you plan to manage noise inside and outside your business so neighbors will not be affected? No increase in noise inside or outside restaurant expect							
PLICANT HISTORY Has this corporation or any principal been licensed previously? Yes No If yes, please indicate name							
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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.