



# 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](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: AUGUST 23, 2021

**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: ON-PREMISES LIQUOR

If alteration, describe nature of alteration: N/A

Previous or current use of the location: RESTAURANT

Corporation and trade name of current license: MEAT SHOP LLC Trade Name:THE POINTS WINE & ALE ROOM

### APPLICANT:

Premise address: 76 FORSYTH ST - SOUTH STORE, NEW YORK, NY 10002

Cross streets: GRAND STREET & HESTER STREET

Name of applicant and all principals: DAVID HOSPITALITY GOUP CORPORATION    DAVID SUAREZ

Trade name (DBA): TO BE DETERMINED

**PREMISE:**

Type of building and number of floors: 5 STORY ATTACHED RESIDENTIAL WITH STORE

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? 74

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): C6-1G

**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: N/A

What are the proposed days/hours of operation? (Specify days and hours each day and hours of outdoor space) SUN THRU THURSDAY 5PM TO 2AM SAT AND SUN 5PM TO 4AM

Number of tables? 5 TABLES Total number of seats? 14 SEATS

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): 10 FEET - L-SHAPED - GROUND FLOOR

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

What are the hours kitchen will be open? N/A

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

How many employees will there be? 2 EMPLOYEES

Do you have or plan to install  French doors  accordion doors or  windows?

Will there be TVs/monitors?  Yes  No (If Yes, how many?) 3

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 N/A

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

Please describe your sound system: IPAD WITH SMALL SPEAKERS

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.") **IF THERE IS EVER A LINE OUTSIDE THE BAR - STAFF WILL BE ASSIGNED FOR CONTROL PURPOSES**

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. **MUSIC WILL BE BACKGROUND ONLY. STAFF WILL ENSURE THAT SOUND DOES NOT EMANATE FROM THE PREMISES . NO OUTSIDE**

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: N/A

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 APPLICANT CURENTLY OWNS HIS OWN 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? 1

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 Bethel Chinese Assembly of God

77 ELDRIDGE STREET

**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. My license type is:  beer & cider  wine, beer & cider  liquor, wine, beer & cider

2.  I will operate a full-service restaurant, specifically a (type of restaurant)

\_\_\_\_\_ restaurant, or

I will operate a TAVERN

with a kitchen open and serving food during all hours of operation OR  with less than a full-service kitchen but serving food during all hours of operation OR  Other

3. My hours of operation will be:

Mon 5PM-2AM; Tue 5PM-2AM; Wed 5PM-2AM;

Thu 5PM-2AM; Fri 5PM-4AM; Sat 5PM-4AM;

Sun 5PM-2AM. (I understand opening is "no later than" specified opening hour,

and all patrons are to be cleared from business at specified closing hour.)

4.  I will not use outdoor space for commercial use OR

My sidewalk café hours will be N/A

5.  I will employ a doorman/security personnel: N/A

6.  I will install soundproofing, N/A

7.  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, or during unamplified live performances or televised sports.

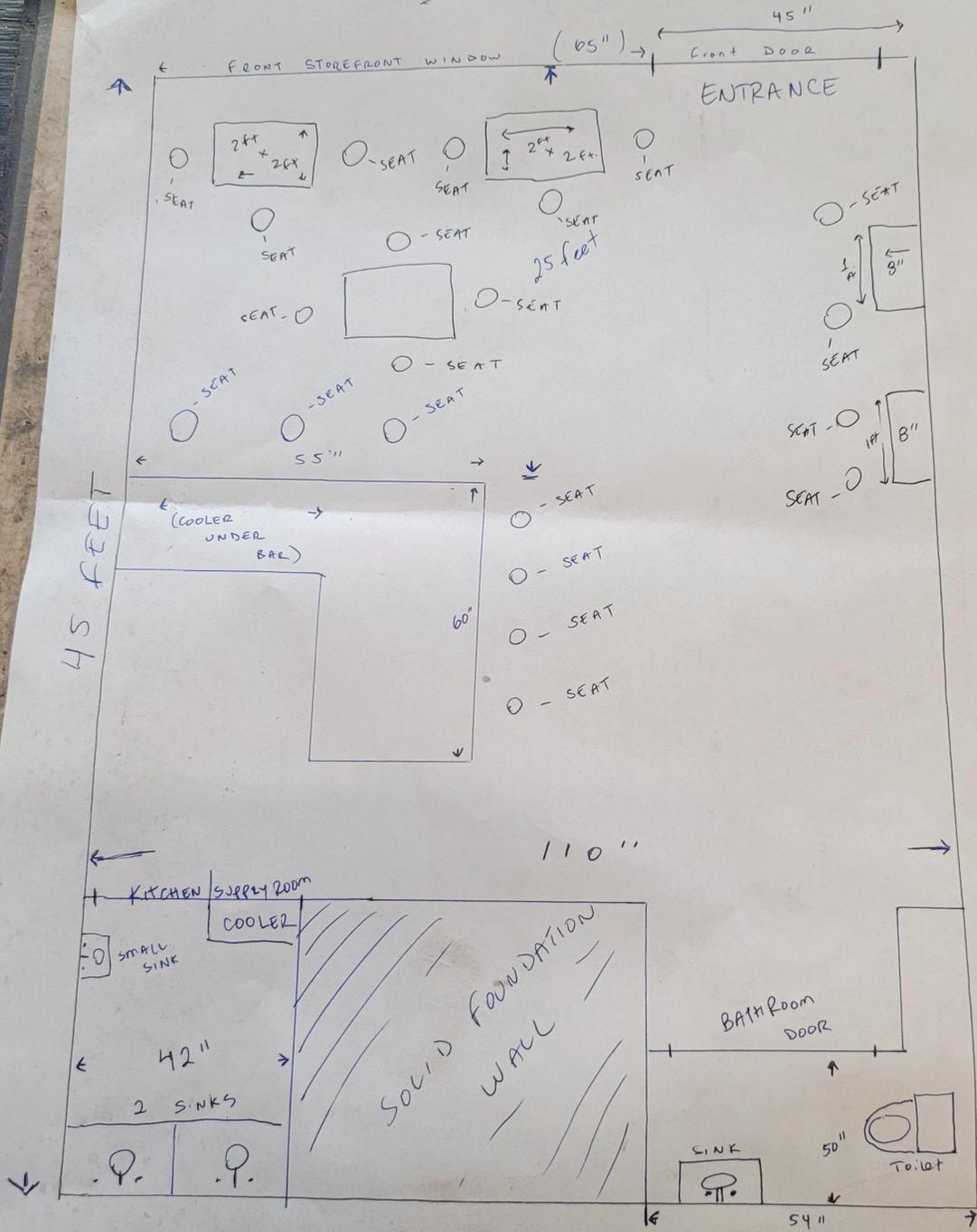
I will have a closed fixed façade with no open doors or windows except my entrance door will close by 10:00 P.M. or when amplified sound is playing, including but not limited to DJs, live music and live nonmusical performances, or during unamplified live performances or televised sports.

8. I will not have  DJs,  live music,  promoted events,  any event at which a cover fee is charged,  scheduled performances,  more than \_\_\_\_\_ DJs per \_\_\_\_\_,  more than 0 private parties per \_\_\_\_\_, 3 number of TVs.
9.  I will play ambient recorded 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.  I will not seek a change in class to a full on-premises liquor license without first obtaining approval from CB 3.
12.  I will not participate in pub crawls or have party buses come to my establishment.
13.  I will not have unlimited drink specials, including boozy brunches, with food.
14.  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 7PM.
15.  I will not have wait lines outside.  I will have a staff person responsible for ensuring no loitering, noise or crowds outside.
16.  I will conspicuously post this stipulation form beside my liquor license inside of my business.
17.  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.

Name: DAVID SUAREZ

Phone Number: 973-842-1041

# 76 Forsyth



CANAL STREET

CITYVIEW  
CHINA TOWN LLC  
OP - BAR  
93 BOWERY

88 KEN INC  
OP BAR  
97 BOWERY

MN130 BOWERY  
REST CORP  
OP REST  
130 BOWERY

[Empty Box]

[Empty Box]

[Empty Box]

[Empty Box]

TES CHRISTIE  
LLC  
OP BAR  
131 CHRISTIE

[Empty Box]

100 BUNSYTHE  
RESTAURANT LLC  
OP REST  
100 BUNSYTHE

NOBEE THAI  
BAZAR  
OP REST  
274 GRAND ST

303 CANARY  
LLC  
OP BAR  
303 BROADWAY ST

[Empty Box]

[Empty Box]

EDGEIDGE  
HOSPITALITY LLC  
OP REST  
107 EDGEIDGE ST

REST HOSP  
INC  
OP REST  
122 EDGEIDGE ST

HESTER STREET

GRAND STREET

BROADWAY STREET

DELANCEY STREET

BOWERY

ALLEN STREET

# DAVID'S

# MENU

HAMBURGER

CHEESEBURGER

BACON CHEESEBURGER

CHICKEN WINGS - BUFFALO STYLE

MOZZARELLA STICKS

STUFFED JALAPENOS

FRIES

ONION RINGS



ATTENTION RESIDENTS & NEIGHBORS  
We are currently in the process of...

ATTENTION RESIDENTS & NEIGHBORS  
We are currently in the process of...

**Pops & Alex**

# ATTENTION RESIDENTS & NEIGHBORS

DAVIDS HOSPITALITY GROUP CORPORATION

Company/DBA Name and Contact Number for Questions

**Plans to open a**

**TAVERN**

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

**at the following location**

**76 FORSYTHE STREET, NEW YORK, NY 10002**

Building Number and Street Name (Address)

**This establishment is seeking a license to serve**

**BEER/WINE & LIQUOR**

Beer & Wine or Beer/Wine & Liquor

**There will be an opportunity for public comment on**

**Monday, October 18, 2022 at 6:30pm  
Community Board 3 Office, 59 East 4th**

**Street Online: [https://zoom.us/](https://zoom.us/j/92199317942)**

**[j/92199317942](https://zoom.us/j/92199317942)**

**973-842-1041**

Applicant Contact Information

**At COMMUNITY BOARD 3  
SLA & DCA Licensing Committee Meeting  
mn03@cb.nyc.gov - [www.cb3manhattan.org](http://www.cb3manhattan.org)**

Petition to Support Proposed Liquor License

Date: AUGUST 23, 2021

The following undersigned residents of the area support the following liquor license (indicate the type of license such as full-liquor or beer-wine) FULL LIQUOR

to the following applicant/establishment (company and/or trade name) DAVID HOSPITALITY GROUP COROPORATION

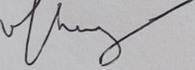
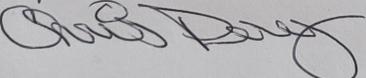
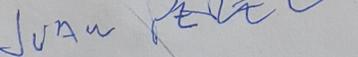
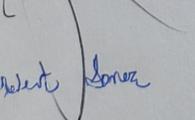
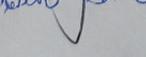
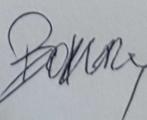
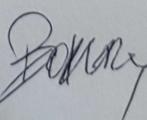
Address of premises: 76 FORSYTHE STREET, NEW YORK, NY 10002

This business will be a: (circle) Bar Restaurant Other: BAR/TAVERN

The hours of operation will be: SUN THRU THU - 5PM TO 2PM FRI & SAT 5PM TO 4AM

PLEASE NOTE: Signatures should be from residents of building, adjoining buildings, and within 2-blocks on the same street.

Other information regarding the license:

Name	Signature	Address and Apt # (required)
① VINCE CHANG		FORSYTH # 82
② <del>ANNIE</del>		FORSYTH # 90
③ CHRIS PEREZ		FORSYTH # 76
④ Jore Guller		210 GRAND 64 GRAND
⑤ Juan Perez		
⑥ Thap Trang		60. CHAN
⑦ Robert Gomez		
⑧ <del>Juan Rodriguez</del>		
⑨ Lefty B	