

Manhattan Community Board 1 Liquor License Stipulations

I, David Teyt, as a qualified representative of Madison & Park Hospitality located at 36 Battery Park, New York, New York, agree to

the following stipulations for the applicant's Method of Operation:

(1) My hours of operation will be 11am - 6pm (until 8pm on Wed & Thurs.) Sunday - Thursday and 11am - 5pm, closed Sat Friday - Saturday (I understand this to mean that all patrons will be cleared from the establishment at the specified hour). for catering: until 2am

(2) I will operate a full-service restaurant, (please describe type of restaurant): cafe and catering with full food service until \_\_\_\_\_ hour(s) before closing.

(3) I will install soundproofing (please describe type and locations) n/a

(4) I will have: DJs  Yes  No Live music  Yes  No Recorded Music  Yes  No Dancing  Yes  No Promoted events  Yes  No Cover fee events  Yes  No Scheduled performances  Yes  No

(5) Volume of all music, events or performances will be at background levels only. If it can be heard outside, or by neighbors, it is not background.

(6) I will close all doors and windows by n/a Sun-Thurs and n/a Fri-Sat.  I will not have French doors or windows.

(7) I will employ a doorman/security personnel on the following days and hours: using the museum's staff

(8) I will actively manage crowds congregating on the street at night, to minimize disturbances to residents.

(9) I will not apply to the SLA for an alteration to the method of operation agreed to by this stipulation without first notifying Community Board 1.

(10) I intend to apply for a sidewalk cafe license.  Yes  No

(11) I will conspicuously post this stipulation form beside my liquor license inside of my business.

(12) Residents may contact the manager/owner at the below number. Complaints will be addressed immediately and I will revisit the above-stated method of operation if necessary in order to minimize my establishment's impact on my neighbors.

Name: David Teyt Phone Number: 212 300 3013

Alternate Contact: Weyling Hago Phone Number: 212 203-7818

(13) I will (additionally): - they will be aware of loading/unloading equipment & crowds given the residential neighborhood to the north

I hereby certify that the information provided above is truthful and accurate based upon my personal belief.

Signed \_\_\_\_\_ Sworn to this 11th day of April, 2018

Dated 4/11/18  
SUSAN P. COLE  
Notary Public, State of New York  
No. 01084897058  
Qualified in New York County  
Commission Expires May 26, 2019

Community Board 1 requests that the SLA add these stipulations to the license of the above-mentioned applicant. These stipulations and board resolution shall supersede all other documents.

Manhattan Community Board 1 Liquor License Stipulations

I, Elie Ratsel, as a qualified representative of Co Workers, located at 60 Broad St., 24th-25th fl., New York, New York, agree to

the following stipulations for the applicant's Method of Operation:

(1) My hours of operation will be 4-6pm ~~Sunday~~ <sup>Mon</sup> - Thursday and 4-6pm Friday - ~~Saturday~~. (I understand this to mean that all patrons will be cleared from the establishment at the specified hour).

(2) I will operate a full-service restaurant, (please describe type of restaurant): no with full food service until \_\_\_\_\_ hour(s) before closing.

(3) I will install soundproofing (please describe type and locations) no

(4) I will have: DJs  Yes  No Live music  Yes  No Recorded Music  Yes  No Dancing  Yes  No Promoted events  Yes  No Cover fee events  Yes  No Scheduled performances  Yes  No

(5) Volume of all music, events or performances will be at background levels only. If it can be heard outside, or by neighbors, it is not background.

(6) I will close all doors and windows by n/a Sun-Thurs and n/a Fri-Sat.  I will not have French doors or windows.

(7) I will employ a doorman/security personnel on the following days and hours: building security & staff monitoring alcohol

(8) I will actively manage crowds congregating on the street at night, to minimize disturbances to residents.

(9) I will not apply to the SLA for an alteration to the method of operation agreed to by this stipulation without first notifying Community Board 1.

(10) I intend to apply for a sidewalk café license.  Yes  No

(11) I will conspicuously post this stipulation form beside my liquor license inside of my business.

(12) Residents may contact the manager/owner at the below number. Complaints will be addressed immediately and I will revisit the above-stated method of operation if necessary in order to minimize my establishment's impact on my neighbors.

Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Alternate Contact: \_\_\_\_\_ Phone Number: \_\_\_\_\_

(13) I will (additionally): 1 speaker for background music

I hereby certify that the information provided above is truthful and accurate based upon my personal belief.

Signed [Signature] Dated 4-12-18

Sworn to this 12th day of April 2018

Community Board 1 requests that the SLA add these stipulations to the license of the above mentioned applicant. These stipulations and board resolution shall supersede all other documents.

Notary Public  
RICHARD L. YELLEN  
Notary Public, State of New York  
Qualified in New York County  
Commission Expires December 6, 2017

To Be Signed by Principal



Manhattan Community Board 1 Liquor License Stipulations

I, Minjeong Kim-Jin, as a qualified representative of HJK Plaza Deli, located at 11 Broadway, New York, New York, agree to

the following stipulations for the applicant's Method of Operation:

(1) My hours of operation will be 6:30am - 5pm ~~Sunday~~ <sup>Monday</sup> - Thursday and 6:30am - 5pm <sup>7:30-5pm on Sat.</sup> Friday - Saturday (I understand this to mean that all patrons will be cleared from the establishment at the specified hour).  
(2) I will operate a full-service restaurant, (please describe type of restaurant): eat-in deli for breakfast/lunch

with full food service until \_\_\_\_\_ hour(s) before closing.

(3) I will install soundproofing (please describe type and locations) no

(4) I will have: DJs  Yes  No Live music  Yes  No Recorded Music  Yes  No Dancing  Yes  No Promoted events  Yes  No Cover fee events  Yes  No Scheduled performances  Yes  No

(5) Volume of all music, events or performances will be at background levels only. If it can be heard outside, or by neighbors, it is not background.

(6) I will close all doors and windows by \_\_\_\_\_ Sun-Thurs and \_\_\_\_\_ Fri-Sat.  I will not have French doors or windows.

(7) I will employ a doorman/security personnel on the following days and hours: none

(8) I will actively manage crowds congregating on the street at night, to minimize disturbances to residents.

(9) I will not apply to the SLA for an alteration to the method of operation agreed to by this stipulation without first notifying Community Board 1.

(10) I intend to apply for a sidewalk cafe license.  Yes  No

(11) I will conspicuously post this stipulation form beside my liquor license inside of my business.

(12) Residents may contact the manager/owner at the below number. Complaints will be addressed immediately and I will revisit the above-stated method of operation if necessary in order to minimize my establishment's impact on my neighbors.

Name: Minjeong Kim-Jin Phone Number: (347) 523-2334

Alternate Contact: Sang Wod Chu Phone Number: (917) 232-0205

(13) I will (additionally):  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I hereby certify that the information provided above is truthful and accurate based upon my personal belief.

[Signature]  
Signed

4/12/18  
Dated

Sworn to this 12<sup>th</sup> day of April, 2018

[Signature]  
Notary Public **EURIE CHOI**

Community Board 1 requests that the SLA add these stipulations to the license of the above-mentioned applicant. These stipulations and board resolution shall supersede all other documents.

Notary Public, State of New York  
Reg. No. 02CH6353369  
Qualified in New York County  
Commission Expires January 23, 2021  
Rev. 3/18

Manhattan Community Board 1 Liquor License Stipulations

I, Elie Reich, as a qualified representative of Coworkers,

CORRECT located at 55 Broad St, 3rd floor, New York, New York, agree to  
BROADWAY

the following stipulations for the applicant's Method of Operation:

(1) My hours of operation will be 4-6pm ~~Sunday~~ <sup>Mon</sup> - Thursday and 4-6pm Friday - ~~Saturday~~  
(I understand this to mean that all patrons will be cleared from the establishment at the specified hour).

(2) I will operate a full-service restaurant, (please describe type of restaurant): no  
with full food service until \_\_\_\_\_ hour(s) before closing.

(3) I will install soundproofing (please describe type and locations) no

(4) I will have: DJs  Yes  No Live music  Yes  No Recorded Music  Yes  No Dancing  Yes  No  
Promoted events  Yes  No Cover fee events  Yes  No Scheduled performances  Yes  No

(5) Volume of all music, events or performances will be at background levels only. If it can be heard outside, or by neighbors, it is not background.

(6) I will close all doors and windows by \_\_\_\_\_ Sun-Thurs and \_\_\_\_\_ Fri-Sat.  I will not have French doors or windows.

(7) I will employ a doorman/security personnel on the following days and hours: building security & staff monitoring alcohol

(8) I will actively manage crowds congregating on the street at night, to minimize disturbances to residents.

(9) I will not apply to the SLA for an alteration to the method of operation agreed to by this stipulation without first notifying Community Board 1.

(10) I intend to apply for a sidewalk café license.  Yes  No

(11) I will conspicuously post this stipulation form beside my liquor license inside of my business.

(12) Residents may contact the manager/owner at the below number. Complaints will be addressed immediately and I will revisit the above-stated method of operation if necessary in order to minimize my establishment's impact on my neighbors.

Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Alternate Contact: \_\_\_\_\_ Phone Number: \_\_\_\_\_

(13) I will (additionally): 1 speaker for background music

I hereby certify that the information provided above is truthful and accurate based upon my personal belief.

Elie Reich  
Signed

4-12-18  
Dated

Sworn to this 12<sup>th</sup> day of April 2018

[Signature]  
RICHARD L. YELLEN  
Notary Public, State of New York  
Notary No 02YE6034133  
Qualified in New York County  
Commission Expires December 6, 2017

Community Board 1 requests that the SLA add these stipulations to the license of the above establishment.  
These stipulations and board resolution shall supersede all other documents.



Manhattan Community Board 1 Liquor License Stipulations

I, Alessio De Sensi, as a qualified representative of HHC Cobblestones, LLC, located at 203 Front Street, New York, New York, agree to

the following stipulations for the applicant's Method of Operation:

(1) My hours of operation will be 11am-1am Sunday - ~~Thursday~~<sup>Wed</sup> and 11am-2am ~~Friday~~<sup>Thur</sup> - Saturday (I understand this to mean that all patrons will be cleared from the establishment at the specified hour).

(2) I will operate a full-service restaurant, (please describe type of restaurant): New American with full food service until \_\_\_\_\_ hour(s) before closing.

(3) I will install soundproofing (please describe type and locations) no, use whatever is already in place

(4) I will have: DJs  Yes  No Live music  Yes  No Promoted events  Yes  No recorded music Cover fee events  Yes  No Scheduled performances  Yes  No

(5)  I will play recorded background music only, consisting of \_\_\_\_\_ If it can be heard outside, or by neighbors, it is not background music.

(6) I will close all doors and windows by \_\_\_\_\_ Sun-Thurs and \_\_\_\_\_ Fri-Sat.  I will not have French doors or windows.

(7) I will employ a doorman/security personnel on the following days and hours: HHC personnel

(8) I will actively manage crowds congregating on the street at night, to minimize disturbances to residents.

(9) I will not apply to the SLA for an alteration to the method of operation agreed to by this stipulation without first notifying Community Board 1.

(10) I intend to apply for a sidewalk café license.  Yes  No

(11) I intend to apply for a cabaret license.  Yes  No

(12) I will conspicuously post this stipulation form beside my liquor license inside of my business.

(13) Residents may contact the manager/owner at the below number. Complaints will be addressed immediately and I will revisit the above-stated method of operation if necessary in order to minimize my establishment's impact on my neighbors.

Name: Alessio De Sensi Phone Number: (646) 762-4767

Alternate Contact: 310 258 9320 Phone Number: \_\_\_\_\_

(14) I will (additionally): \_\_\_\_\_

I hereby certify that the information provided above is truthful and accurate based upon my personal belief.

Signed *Alessio De Sensi*



Dated 04/12/2018

Sworn to this 12 day of April, 2018 *Lisette Gonzalez* Notary Public

Manhattan Community Board 1 Liquor License Stipulations

I, Alessio De Sensi, as a qualified representative of HHC Cobblestones, LLC, located at 19 Fulton Street, New York, New York, agree to

the following stipulations for the applicant's Method of Operation:

(1) My hours of operation will be 11am - 1am Sunday - Thursday and 11am - 2am Friday - Saturday (I understand this to mean that all patrons will be cleared from the establishment at the specified hour).

(2) I will operate a full-service restaurant, (please describe type of restaurant): New American with full food service until \_\_\_\_\_ hour(s) before closing.

(3) I will install soundproofing (please describe type and locations) n/a

(4) I will have: DJs [X]Yes [ ]No Live music [X]Yes [ ]No Promoted events [ ]Yes [ ]No Recorded [X] Cover fee events [ ]Yes [ ]No Scheduled performances [ ]Yes [ ]No

(5) [ ]I will play recorded background music only, consisting of \_\_\_\_\_ If it can be heard outside, or by neighbors, it is not background music.

(6) I will close all doors and windows by \_\_\_\_\_ Sun-Thurs and \_\_\_\_\_ Fri-Sat. [ ] I will not have French doors or windows.

(7) I will employ a doorman/security personnel on the following days and hours: at least 4 HHC security personnel at all hours of ops

(8) I will actively manage crowds congregating on the street at night, to minimize disturbances to residents. [X]

(9) I will not apply to the SLA for an alteration to the method of operation agreed to by this stipulation without first notifying Community Board 1. [X]

(10) I intend to apply for a sidewalk cafe license. [ ]Yes [X]No

(11) I intend to apply for a cabaret license. [ ]Yes [X]No

(12) I will conspicuously post this stipulation form beside my liquor license inside of my business. [X]

(13) Residents may contact the manager/owner at the below number. Complaints will be addressed immediately and I will revisit the above-stated method of operation if necessary in order to minimize my establishment's impact on my neighbors.

Name: Alessio De Sensi Phone Number: (646) 762-4767 310 259 9320

\* Alternate Contact: 310 259 9320 Phone Number: \_\_\_\_\_

(14) I will (additionally): amplified music at outdoor bar along with occasional live music seasonal

I hereby certify that the information provided above is truthful and accurate based upon my personal belief.

Signed Alessio De Sensi



Dated 4/12/2018

Sworn to this 12 day of April, 2018

Lisette Gonzalez Notary Public



Manhattan Community Board 1 Liquor License Stipulations

I, John J. Bevins, as a qualified representative of SeaStreak, LLC

located at Gouverneur Lane and South Street Seaport, Pier 11, New York, New York, agree to

the following stipulations for the applicant's Method of Operation:

(1) My hours of operation will be 10:00am - 10:00pm Sunday - Thursday and 10:00am - 10:00pm Friday - Saturday (I understand this to mean that all patrons will be cleared from the establishment at the specified hour).

(2) I will operate a full-service restaurant, (please describe type of restaurant): Food Preparation Area selling chips, candy, coffee, donuts, bagels and pizza with full food service until all hour(s) before closing.

(3) I will install soundproofing (please describe type and locations) n/a

(4) I will have: DJs [ ] Yes [X] No Live music [ ] Yes [X] No Promoted events [ ] Yes [X] No Cover fee events [ ] Yes [X] No Scheduled performances [ ] Yes [X] No

(5) [ ] I will play recorded background music only, consisting of none. If it can be heard outside, or by neighbors, it is not background music.

(6) I will close all doors and windows by Sun-Thurs and Fri-Sat. [ ] I will not have French doors or windows.

(7) I will employ a doorman/security personnel on the following days and hours: crew members & NYC DOT on piers

(8) I will actively manage crowds congregating on the street at night, to minimize disturbances to residents. [X]

(9) I will not apply to the SLA for an alteration to the method of operation agreed to by this stipulation without first notifying Community Board 1. [X]

(10) I intend to apply for a sidewalk cafe license. [ ] Yes [X] No

(11) I intend to apply for a cabaret license. [ ] Yes [X] No

(12) I will conspicuously post this stipulation form beside my liquor license inside of my business. [X]

(13) Residents may contact the manager/owner at the below number. Complaints will be addressed immediately and I will revisit the above-stated method of operation if necessary in order to minimize my establishment's impact on my neighbors.

Name: John J. Bevins Phone Number: Office (732) 872-2628 ext. 1986 Cell (908) 216-8643

Alternate Contact: Thomas Wynne Phone Number: (440) 360-6968

(14) I will (additionally):

I hereby certify that the information provided above is truthful and accurate based upon my personal belief.

Signed: [Signature] Sworn to this 11th day of April 2018

Dated: [Signature] SUSAN P. COLE Notary Public, State of New York Notary Public Qualified in New York County Commission Expires May 26, 2019

Community Board 1 requests that the SLA add these stipulations to the license of the above-mentioned applicant. Rev. 3/17

Manhattan Community Board 1 Liquor License Stipulations

I, \_\_\_\_\_, as a qualified representative of \_\_\_\_\_,

located at Olive's, New York, New York, agree to

the following stipulations for the applicant's Method of Operation:

(1) My hours of operation will be 7am - 9pm <sup>Monday (JE)</sup> ~~Sunday - Thursday~~ and 7am - 9pm Friday - Saturday, 10AM - 7PM <sup>(JE)</sup> ~~SUNDAY~~  
(I understand this to mean that all patrons will be cleared from the establishment at the specified hour).

(2) I will operate a full-service restaurant, (please describe type of restaurant): coffee & cafe fare  
soup, salad & sandwiches with full food service until \_\_\_\_\_ hour(s) before closing.

(3) I will install soundproofing (please describe type and locations) n/a

(4) I will have: DJs  Yes  No Live music  Yes  No Recorded Music  Yes  No Dancing  Yes  No  
Promoted events  Yes  No Cover fee events  Yes  No Scheduled performances  Yes  No

(5) Volume of all music, events or performances will be at background levels only. If it can be heard outside, or by neighbors, it is not background.

(6) I will close all doors and windows by \_\_\_\_\_ Sun-Thurs and \_\_\_\_\_ Fri-Sat.  I will not have French doors or windows.

(7) I will employ a doorman/security personnel on the following days and hours: n/a

(8) I will actively manage crowds congregating on the street at night, to minimize disturbances to residents.

(9) I will not apply to the SLA for an alteration to the method of operation agreed to by this stipulation without first notifying Community Board 1.

(10) I intend to apply for a sidewalk café license.  Yes  No

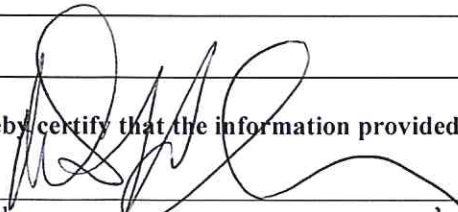
(11) I will conspicuously post this stipulation form beside my liquor license inside of my business.

(12) Residents may contact the manager/owner at the below number. Complaints will be addressed immediately and I will revisit the above-stated method of operation if necessary in order to minimize my establishment's impact on my neighbors.

Name: Nick Hartman Phone Number: 212-858-0111, 917-370-1505

Alternate Contact: Tom Avoloca Phone Number: 212-941-0111

(13) I will (additionally):  
\_\_\_\_\_  
\_\_\_\_\_

  
Signed \_\_\_\_\_

4/11/18  
Dated \_\_\_\_\_

Sworn to this 11th day of April 2018   
SUSAN P. COLE Notary Public  
Notary Public, State of New York  
No. 01C04897056  
Qualified in New York County

Community Board 1 requests that the SLA add these stipulations to the license for the mentioned applicant. These stipulations and board resolution shall supersede all other documents.



Manhattan Community Board 1 Liquor License Stipulations

I, Yuichiro Enyo, as a qualified representative of ICCA, located at 20 Warren St., NY, NY 10007, New York, New York, agree to the following stipulations for the applicant's Method of Operation:

(1) My hours of operation will be 11:30-11pm Sunday - Thursday and 11:30-11pm Friday - Saturday (I understand this to mean that all patrons will be cleared from the establishment at the specified hour).

(2) I will operate a full-service restaurant, (please describe type of ~~restaurant~~ sushi) with full food service until 11pm hour(s) before closing.

(3) I will install soundproofing (please describe type and locations) soundproofing  
(information included within packet)

(4) I will have: DJs  Yes  No Live music  Yes  No Recorded Music  Yes  No Dancing  Yes  No Promoted events  Yes  No Cover fee events  Yes  No Scheduled performances  Yes  No

(5) Volume of all music, events or performances will be at background levels only. If it can be heard outside, or by neighbors, it is not background.

(6) I will close all doors and windows by \_\_\_ Sun-Thurs and \_\_\_ Fri-Sat.  I will not have French doors or windows. N/A

(7) I will employ a doorman/security personnel on the following days and hours: N/A

(8) I will actively manage crowds congregating on the street at night, to minimize disturbances to residents.

(9) I will not apply to the SLA for an alteration to the method of operation agreed to by this stipulation without first notifying Community Board 1.

(10) I intend to apply for a sidewalk cafe license.  Yes  No

(11) I will conspicuously post this stipulation form beside my liquor license inside of my business.

(12) Residents may contact the manager/owner at the below number. Complaints will be addressed immediately and I will revisit the above-stated method of operation if necessary in order to minimize my establishment's impact on my neighbors.

Name: Hisanori Yamamoto Phone Number: 212-661-7540

Alternate Contact: \_\_\_\_\_ Phone Number: \_\_\_\_\_

(13) I will (additionally):  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I hereby certify that the information provided above is truthful and accurate based upon my personal belief.

Signed Yuichiro Enyo

Dated 04/15/18

Sworn to this 15<sup>th</sup> day of April, 2018

[Signature]  
Notary Public

Community Board 1 requests that the SLA add these stipulations to the license of the above-mentioned applicant. These stipulations and board resolution shall supersede all other documents.

