

MANHATTAN COMMUNITY BOARD 1
Liquor License Application Questionnaire Summary
Revised 8/2019

- 1- Applicant Name
Anea LLC
- 2- Establishment Name (Corporate & DBA)
Anea LLC DBA Pending
- 3- Address for Proposed License
102 North End Avenue Restaurant A
West New York, NY 10013
- 4- Proposed Days/Hours of Operation 11am - 2am all days
- 4.1 What floor(s) is the establishment on?
Ground Floor
- 4.2 Any rooftop, terrace, or other outside usage?
Sidewalk Cafe
- 5- Square Footage of Location
Approx. 6,900 Sq. Feet
- 6- Method of Operations (bar restaurant, Catering, etc)
Restaurant
- 7- Type of License (Full liquor/OP, beer and wine, etc.)
Full Liquor/ OP
- 7.1 Type of application (New, Alteration, Change in Method
of Operation, Corporate Change, Class Change) *New Application
- 8- Sidewalk Café? Yes/No Yes, a Sidewalk Cafe
- 9- Type of Music ? Live Recorded DJ
- 10- Volume of Music? Background (*no sound from events, performances or music will be heard outside the premises or by neighbors*)
- Other
- 11- Where will the kitchen exhaust system vent to?
The highest roof of the hotel
- 12- Applicant's Previous Licensed Establishments and Addresses
***Please see attached

This Liquor License Application Questionnaire Summary will be made available to the public one week prior to the Licensing and Permits Committee meeting. Any information provided herein is superseded by that described in the final stipulation sheet that will be agreed upon by the applicant and the Licensing and Permits Committee of Community Board 1.

Manhattan Community Board 1 Liquor License Stipulations

I, PAUL LAMAS, as a qualified representative of ANEA LLC, located at 102 NORTH END AVENUE, New York, New York, agree to

the following stipulations for the applicant's Method of Operation for their LIQUOR license

11:am to 2:am, 7 days a week (no) Fri & Sat / 11:am to 1:am Sun to Thurs. (1) My hours of operation will be Sunday - Thursday and 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): MODERN GREEK RESTAURANT with full food service until 1 hour(s) before closing.

(3) I will install soundproofing (please describe type and locations) EXISTS

(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 music. X

(6) I will close all doors and windows by close windows! 10:pm Sun to Thurs / 11:pm Fri & Sat. Sun-Thurs and Fri-Sat. I will not have French doors or windows.

(7) I will have delivery of supplies, goods and services during the hours of Loading interior of building @ 7:am

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

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

(10) 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

(11) I will not apply for a sidewalk cafe license until at least a year after beginning operation. Yes No Existing

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

(13) I confirm that I have violations from previous establishments for which I have served as a principal.

(14) I will (additionally):

(15) 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: PAUL LAMAS Phone Number: 212-344-0500

Alternate Contact: PETER POULLAKAKOS Phone Number: 212-344-0500

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

Signed [Signature]

Dated 12/11/19 [Signature]

Sworn to this 11th day of December 2019

SUSAN P. COLE Notary Public, State of New York No. 01C04897058 Qualified in New York County Commission Expires May 26, 2023

MANHATTAN COMMUNITY BOARD 1
Liquor License Application Questionnaire Summary
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1- Applicant Name

CWJR Winery, LLC

2- Establishment Name (Corporate & DBA)

J&R Music Lounge by City Winery

3- Address for Proposed License

15 Park Row Commercial Unit
New York, NY 10038

4- Proposed Days/Hours of Operation

4.1 What floor(s) is the establishment on? Ground floor lobby and cellar

4.2 Any rooftop, terrace, or other outside usage? No

5- Square Footage of Location

9,447 sq ft

6- Method of Operations (bar restaurant, Catering, etc)

Full Service Restaurant

7- Type of License (Full liquor/OP, beer and wine, etc.)

Winery with On Premise Consumption

7.1 Type of application (New, Alteration, Change in Method

of Operation, Corporate Change, Class Change) New Location

8- Sidewalk Café? Yes/No

No

9- Type of Music ? Live Recorded DJ

10- Volume of Music? Background (*no sound from events, performances or music will be heard outside the premises or by neighbors*)

Other

Live performances which will be soundproofed and not heard outside of premises

11- Where will the kitchen exhaust system vent to?

Rooftop

12- Applicant's Previous Licensed Establishments and Addresses

None. Michael Dorf has previously licensed the below:

City Winery New York, LLC: 143 Varick St, New York, NY 10013

City Vineyard, LLC: 233 West St, New York, NY 10011

City Vineyard, LLC: 45 Rockefeller Plaza, New York, NY 10001

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Manhattan Community Board 1 Liquor License Stipulations

I, X Dylan Rocke, as a qualified representative of CWJR Winery, LLC, located at 15 Park Row, New York, New York, agree to the following stipulations for the applicant's Method of Operation for their Restaurant license

11:am to midnight, 7 days a week

(1) My hours of operation will be _____ Sunday - Thursday and _____ 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): _____

Jazz type music, Easy listening with full food service until _____ hour(s) before closing.

(3) I will install soundproofing (please describe type and locations) _____

- (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 Tickets 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 music.

- (6) I will close all doors and windows by _____ Sun-Thurs and _____ Fri-Sat. I will not have French doors or windows. No windows

- (7) I will have delivery of supplies, goods and services during the hours of Not before 7:am

- (8) I will employ a doorman/security personnel on the following days and hours: Yes

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

(10) 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.

- (11) I will not apply for a sidewalk cafe license until at least a year after beginning operation. Yes No No sidewalk cafe

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

(13) I confirm that I have _____ violations from previous establishments for which I have served as a principal.

(14) I will (additionally):

(15) 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: X DYLAN ROCKE Phone Number: X 646-751-6028

Alternate Contact: X MICHAEL CORE Phone Number: X 917-613-8333

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

X [Signature]
Signed

X 12/11/19
Dated [Signature]

Sworn to this 11th day of December 2019

SUSAN P. COLE
Notary Public, State of New York
No. 01604897056
Qualified in New York County
Commission Expires May 26, 2023

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 Application Questionnaire Summary
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- 1- Applicant Name
iPic Theaters, LLC
- 2- Establishment Name (Corporate & DBA)
iPic Theaters and The Tuck Room
- 3- Address for Proposed License
11 Fulton Street
New York, NY 10038
- 4- Proposed Days/Hours of Operation
10:00 AM -2:00 AM (indoors); 1:00 AM (outdoors seasonally)
 - 4.1 What floor(s) is the establishment on?
All floors (ground, first and second)
 - 4.2 Any rooftop, terrace, or other outside usage?
Yes, outdoor patio.
- 5- Square Footage of Location
46,145 sq. feet
- 6- Method of Operations (bar restaurant, Catering, etc)
Restaurant
- 7- Type of License (Full liquor/OP, beer and wine, etc.)
New/Transfer 7.1 Type of application (New, Alteration, Change in Method of Operation, Corporate Change, Class Change)
- 8- Sidewalk Café? Yes/No
Yes
- 9- Type of Music ? Live Recorded DJ
Piped in
- 10- Volume of Music? Background (*no sound from events, performances or music will be heard outside the premises or by neighbors*)
 Other Non musical entertainmnet- movie theaters. Sound will not be heard from outside.
- 11- Where will the kitchen exhaust system vent to?
Vented to the roof.
- 12- Applicant's Previous Licensed Establishments and Addresses
iPic Theaters, LLC does not currently hold any liquor licenses. However, one officer of iPic Theaters, LLC is currently an officer for the current licensee at this locaiton.

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Manhattan Community Board 1 Liquor License Stipulations

I, Lindsey Farina, Esq., as a qualified representative of iPic Theaters, LLC, located at 11 Fulton Street, New York, New York, agree to the following stipulations for the applicant's Method of Operation for their On Premises Liquor license

- (1) My hours of operation will be 10AM-2AM Sunday - Thursday and 10AM-2AM Friday - Saturday...
(2) I will operate a full-service restaurant, (please describe type of restaurant): Full Service Restaurant...
(3) I will install soundproofing...
(4) I will have: DJs, Live music, Recorded Music, Dancing, Promoted events, Cover fee events, Scheduled performances...
(5) Volume of all music, events or performances will be at background levels only...
(6) I will close all doors and windows by Sun-Thurs and Fri-Sat...
(7) I will have delivery of supplies, goods and services during the hours of...
(8) I will employ a doorman/security personnel on the following days and hours:
(9) I will actively manage crowds congregating on the street at night...
(10) I will not apply to the SLA for an alteration to the method of operation...
(11) I will not apply for a sidewalk cafe license until at least a year after beginning operation...
(12) I will conspicuously post this stipulation form beside my liquor license inside of my business...
(13) I confirm that I have 0 violations from previous establishments...
(14) I will (additionally):

Close the outdoor seating area at 1AM, 7 days a week. Outdoor seating includes 8 tables within 721 square feet. Outdoor seating opens at 11AM, 7 days a week.

* Change of LLC, with no changes to current stipulations

Ref: July 25, 2017 CBI Resolution

(15) 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: Chris Haarsgaard Phone Number: 914-704-0727

Alternate Contact: Phone Number:

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

X [Signature]

Signed

[Signature] 12/11/19

SUSAN P. COLE Notary Public, State of New York No. 01C04897056 Qualified in New York County Notary Public Expires May 26, 2023

Sworn to this 11th day of December 2019

Manhattan Community Board 1 Liquor License Stipulations

I, X JOHN HILL, as a qualified representative of The Grey Dog Tribeca, Inc., located at 124 Chambers Street, New York, New York, agree to the following stipulations for the applicant's Method of Operation for their On-Premises Liquor license

* Sunday 10:00am - 9:30pm / Monday - Saturday: 8:00am - 11:30pm

- (1) My hours of operation will be Sunday - Thursday and 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): All-Day American Restaurant with full food service until hour(s) before closing.
(3) I will install soundproofing (please describe type and locations) Existing
(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 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 have delivery of supplies, goods and services during the hours of Not before 7:00am
(8) I will employ a doorman/security personnel on the following days and hours: N/A
(9) I will actively manage crowds congregating on the street at night, to minimize disturbances to residents.
(10) 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.
(11) I will not apply for a sidewalk cafe license until at least a year after beginning operation. Yes No
(12) I will conspicuously post this stipulation form beside my liquor license inside of my business.
(13) I confirm that I have violations from previous establishments for which I have served as a principal.
(14) I will (additionally):

* Liquor service hours.
RESTAURANT OPERATION HOURS
7am - 11:30pm - MON - SAT
7:45pm - 9:45pm - Sunday

(15) 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: X JOHN HILL Phone Number: X 917.282.7505

Alternate Contact: X DAVE GRAN Phone Number: X 347.622.1769

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

Signed [Signature] Dated X 12/11/19

Sworn to this 11th day of December 2019 SUSAN P. COLE Notary Public, State of New York Notary Public 01C04897056 Qualified in New York County, NY

MANHATTAN COMMUNITY BOARD 1
Liquor License Application Questionnaire Summary
Revised 8/2019

- 1- Applicant Name
PROPER HALL 175 GREENWICH LLC
- 2- Establishment Name (Corporate & DBA)
PROPER HALL
- 3- Address for Proposed License
175 GREENWICH STREET NY NY
- 4- Proposed Days/Hours of Operation 11AM-2AM ALL DAYS
- 4.1 What floor(s) is the establishment on? GROUND FL WITHIN OCULUS
- 4.2 Any rooftop, terrace, or other outside usage? NO
- 5- Square Footage of Location
4515 SQ FT, APPROX 2,100 IS FOR THE DINING AND BAR AREA - THE REST IS EMPLOYEES ONLY SPACE
- 6- Method of Operations (bar restaurant, Catering, etc)
THIS IS A RESTAURANT WITH A FULL FOOD MENU THAT IS ALSO FOCUSING ON CRAFT BEER
- 7- Type of License (Full liquor/OP, beer and wine, etc.) THIS IS A NEW, ON-PREMISE LICENSE APPLICATION FOR FULL LIQUOR
- 7.1 Type of application (New, Alteration, Change in Method of Operation, Corporate Change, Class Change)
- 8- Sidewalk Café? Yes/No
NO
- 9- Type of Music ? Live Recorded DJ
- 10- Volume of Music? Background (*no sound from events, performances or music will be heard outside the premises or by neighbors*)
- Other
- 11- Where will the kitchen exhaust system vent to?
NEW EXHAUST WILL CONNECT TO EXISTING DUCT SYSTEM WITHIN THE OCULUS
- 12- Applicant's Previous Licensed Establishments and Addresses
SEE ATTACHMENT

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Manhattan Community Board 1 Liquor License Stipulations

I, Jonathan Krieger, as a qualified representative of PROPER HALL 175 GREENWICH LLC, located at 175 GREENWICH STREET, New York, New York, agree to the following stipulations for the applicant's Method of Operation for their ON-PREMISE LIQUOR license

11:am to 2:am

- (1) My hours of operation will be 11:am to 2:am Sunday - Thursday and 11:am to 2:am 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): RESTAURANT SERVING AMERICAN STYLE FOOD, Arcade Games with full food service until 0 hour(s) before closing.
(3) I will install soundproofing (please describe type and locations) _____

- (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 music.

- (6) I will close all doors and windows by _____ Sun-Thurs and _____ Fri-Sat. I will not have French doors or windows. No windows
(7) I will have delivery of supplies, goods and services during the hours of _____

- (8) I will employ a doorman/security personnel on the following days and hours: _____
(9) I will actively manage crowds congregating on the street at night, to minimize disturbances to residents.
(10) 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.

- (11) I will not apply for a sidewalk cafe license until at least a year after beginning operation. Yes No
(12) I will conspicuously post this stipulation form beside my liquor license inside of my business.

(13) I confirm that I have _____ violations from previous establishments for which I have served as a principal.

(14) I will (additionally): Will be 3 points of sale!
Self serve beer bar.
Island Bar
Sit Down

Only pre-package beer to-go for sale.

(15) 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: BRIDGETT PIRRET Phone Number: 718 637 4311

Alternate Contact: CHRISTIAN PALIKUCA Phone Number: 917 667 6666

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

X _____
Signed

X 12/13/19
Dated

CLARA SIERRA
NOTARY PUBLIC-STATE OF NEW YORK
No. 01SI6208623
Qualified in New York County
My Commission Expires 7-6-2021

Sworn to this 13 day of December 2019
Notary Public