

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

1- Applicant Name

Lucinda Barry

2- Establishment Name (Corporate & DBA)

TriBeCa Arts Club LLC

3- Address for Proposed License

75 Murray Street New York, NY 10007

4- Proposed Days/Hours of Operation

11:00 am - 12:00 am (Monday - Thursday)

11:00 am - 1:00 am (Friday - Sunday)

4.1 What floor(s) is the establishment on?

First Floor, Basement

4.2 Any rooftop, terrace, or other outside usage?

NO

5- Square Footage of Location 2,375

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

Bar/Tavern

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

Full Liquor License

Transfer

Application

7.1 Type of application (New, Alteration, Change in Method of Operation, Corporate Change, Class Change)

8- Sidewalk Café? Yes/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? N/A

12- Applicant's Previous Licensed Establishments and Addresses

N/A

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 Any information provided herein is superseded by that described in the final stipulation sheet that will be agreed upon by the applicant and the Licensing and Permits Committee of Community Board 1.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, X Lucinda Barry, as a qualified representative of TriBeCa Arts Club, located at 75 Murray Street, New York, New York, agree to the following stipulations for the applicant's Method of Operation for their Banquet Hall license

Sun. to Thurs. 11:am to 1:am / Fri. + Sat. 11:am to 2:am

(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 Club with full food service until _____ hour(s) before closing.

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

(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 N/A 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: 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 café 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):

PA 125 persons
Prep Food only
Similar M of O as previous owner

(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 Scott Levinsohn Phone Number: X 347-513-9690

Alternate Contact: _____ Phone Number: _____

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

Signed X [Signature]

Dated X 02/12/20 [Signature]

Sworn to this [Signature] day of February

SUSAN P. COLE
Notary Public, State of New York
No. 01C04897058
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
Revised 4/2018

- 1- Applicant Name
Hanover Hospitality LLC and 18 William Partners, LLC
- 2- Establishment Name (Corporate & DBA)
To be determined.
- 3- Address for Proposed License
18 William Street
- 4- Proposed Days/Hours of Operation
Sunday through Thursday:
10:00 p.m. -- end time for last show/performance and all food and beverage service.
11:00 p.m. -- time that all patrons will be cleared from the premises.
Friday and Saturday:
11:00 p.m. -- end time for last show/performance and all food and beverage service.
12:00 a.m. -- time that all patrons will be cleared from the premises.
Cafe: approx. 6:00 a.m. to 1-hour before a performance.
- 5- Square Footage of Location
Approximately 100,000 square feet between 7 floors (mezzanine, ground floor, basement, cellar, sub-cellar 1, sub-cellar 2, and sub-cellar 3), approximately 25,000 of which is not accessible to patrons and will be used for back-of-house purposes only, e.g. mechanical, storage, etc.
- 6- Method of Operations (bar restaurant, Catering, etc)
Exhibition & Performance Venue with Eating & Drinking & Cafe
***Despite the premises having a max. occupancy for 3,500, performances will be limited to 500 guests.**
- 7- Type of License (Full liquor/OP, beer and wine, etc.)
On-Premises Liquor
- 8- Sidewalk Café? Yes/No
No
- 9- Type of Music ? Live Recorded DJ
Aside from live jazz in connection with the daytime cafe, the music to be played during each theatrical experience/performance will be to complement the show (similar to a soundtrack accompanying a film) or in connection with the pre- or post- show experience for purposes of fostering gradual patron entry and exiting.
- 10- Volume of Music? Background Other
Music will not be heard outside the premises, much less the building.
- 11- Applicant's Previous Licensed Establishments and Addresses

Sleepnomore NA LLC:	530 West 27th Street
New York Shakespeare Festival, et. al.:	425 Lafayette Street
Vegeteria Inc.:	55 West 14th Street
One 27 Roof LLC:	530-542 West 27th Street
Becker Paramount Fee LLC, DH VWW NYC, LLC et. al.:	235-245 West 46th Street
Variety Entertainment Group LLC:	189 Chrystie Street
Chelsea Opera House, LLC & Variety Worldwide Miami, LLC:	437-451 West 13th Street

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 Application Questionnaire Summary
Revised 8/2019

- 1- Applicant Name
76 Catering, LLC
- 2- Establishment Name (Corporate & DBA)
76 Catering, LLC
DBA pending
- 3- Address for Proposed License
76 Trinity Place, Ground Floor
New York, NY 10006
- 4- Proposed Days/Hours of Operation **Sun-Th: 8am-9pm**
Fri-Sat: 8am-9pm
- 4.1 What floor(s) is the establishment on? **Ground**
- 4.2 Any rooftop, terrace, or other outside usage? **No**
- 5- Square Footage of Location **1,337 sq. ft.**
- 6- Method of Operations (bar restaurant, Catering, etc) **cafe/eatery**
- 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**
- 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? **Trinity Place via louver above ground floor level**
- 12- Applicant's Previous Licensed Establishments and Addresses **N/A**

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, Robert Sokol, as a qualified representative of 76 Catering, LLC, located at 76 Trinity Place, Ground Floor, New York, New York, agree to the following stipulations for the applicant's Method of Operation for their on-premises liquor license

Mon. to Sat. 8:am to 9:pm / 10:am to 9:pm

(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): New American cafe/eatery Restaurant 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 music. X

(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:am

(8) I will employ a doorman/security personnel on the following days and hours: No

(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

(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: X Robert Sokol Phone Number: X 212 507 9900

Alternate Contact: Phone Number:

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

Signed: X [Signature] Dated: X [Signature]

Sworn to this 12th day of February 2020 Notary Public SUSAN P. COLE Notary Public, State of New York No. 01C04897056 Qualified in New York County Commission Expires May 26, 2023

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

- 1- Applicant Name 88 Wall Street LLC & 88 Wall Manager LLC & (3rd Party Operator TBD)
- 2- Establishment Name (Corporate & DBA) The Walk Street Hotel, 88 Wall Street
- 3- Address for Proposed License 88 Wall Street, New York, NY 10005
- 4- Proposed Days/Hours of Operation
- 4.1 What floor(s) is the establishment on? Hotel is 24/7
Food/Alcohol Service: 7am - 2am
- 4.2 Any rooftop, terrace, or other outside usage? N/A
- 5- Square Footage of Location 100,048 sq. ft.
- 6- Method of Operations (bar restaurant, Catering, etc) Restaurant and Hotel
- 7- Type of License (Full liquor/OP, beer and wine, etc.) Full Liquor Hotel/Restaurant
- 7.1 Type of application (New, Alteration, Change in Method of Operation, Corporate Change, Class Change) New Application
- 8- Sidewalk Café? Yes/ 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? Rear Yard
- 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, X Gigi Vega, as a qualified representative of 88 Wall Street LLC, located at 88 Wall Street, New York, New York, agree to

2/24/20
2/20
ZAM
Restaurant/Hotel/Event Space

the following stipulations for the applicant's Method of Operation for their Hotel/Restaurant license

Event space: 8:am-1:am (Fri+Sat.) / 8:am to 12:am (Sun to Thurs.) / Basement + Ground Floor (8:am-12:am) Monday - Saturday
(1) My hours of operation will be Sunday's start to serve at 10:am ← Monday - Saturday understand this to mean that all patrons will be cleared from the establishment at the specified hour). Friday - Saturday (1

(2) I will operate a full-service restaurant, (please describe type of restaurant): The restaurant will have a full menu and be open to the public. Room service will also be available 24/7* 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 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 closed 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 _____

(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 café 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 0** violations from previous establishments for which I have served as a principal.

(14) I will (additionally):

Hotel: 16 Floor / 181 rooms

Event space on 14 Floor (Set Back RooF), PA 160 persons

Basement - Restaurant

Ground Floor - Cafe/Lounge

No Dancing

* Doors on 14th Floor remain closed by 10:pm.

* As to the 14th Floor (No Liquor, Beer, Wine on outdoor areas) spaces

(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: Gigi Vega Phone Number: 702-701-4352

Alternate Contact: _____ Phone Number: _____

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

X Gigi Vega
Signed

X 2/12/2020
Dated

Sworn to this 12th day of February 2020
Notary Public

SUSAN P. COLE
Notary Public, State of New York
No. 01C04897056
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. Rev. 12/18

*Room service will operate 24 hours a day, however alcohol service will be contained to the hours allowed by New York State law.
**Robert Indeglia is the only proposed officer currently licensed in NYS. There have been minor health and building violations in the past, however all infractions have been settled at this time.

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

- 1- Applicant Name 10 South Street Hotel Operator LLC
- 2- Establishment Name (Corporate & DBA)
- 3- Address for Proposed License 10 South Street
- 4- Proposed Days/Hours of Operation Hotel: 24 hours daily; Restaurant: 7AM - 10PM Daily
- 4.1 What floor(s) is the establishment on? 3rd and 4th floors
- 4.2 Any rooftop, terrace, or other outside usage? No
- 5- Square Footage of Location
- 6- Method of Operations (bar restaurant, Catering, etc) Hotel with restaurant
- 7- Type of License (Full liquor/OP, beer and wine, etc.) Hotel Liquor License
- 7.1 Type of application (New, Alteration, Change in Method of Operation, Corporate Change, Class Change)
- 8- Sidewalk Café? Yes/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? Roof

12- Applicant's Previous Licensed Establishments and Addresses

- *42nd Street Lessee LLC (Cipriani 42nd Street), 110 East 42nd Street, New York, NY 10017
- *Downtown Restaurant Company LLC (Cipriani Downtown), 372-376 W Broadway, New York, NY 10012
- *GC Ballroom Operator LLC (Cipriani Club 55), 55 Wall Street, New York, NY 10005
- *GC Alpha LLC (Cipriani Dolce), Grand Central Station-West Balcony, New York, NY 10017
- *10 South Street LLC (Cipriani South Street), 10 South Street, New York, NY 10004 - application pending

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, X Jan Henrik Gudmundson, as a qualified representative of 10 South Street Hotel Operator LLC, located at 10 South Street, New York, New York, agree to the following stipulations for the applicant's Method of Operation for their Hotel Liquor license

8:12:am all days for restaurant. Hotel open 24/7

(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 hotel with} a full-service restaurant, (please describe type of restaurant): Restaurant/Bar with full food service until 12AM hours

(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 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 After 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 café 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):

(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 Jan Henrik Gudmundson Phone Number: X (646) 577-9324

Alternate Contact: Michael Romei Phone Number: (646) 256-2050

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

X Signed _____ Dated X 2/14/2020

Sworn to this 14 day of FEB 2020 Tami J Chotkowski 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.



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

- 1- Applicant Name 10 South Street Club Operator Inc.
- 2- Establishment Name (Corporate & DBA) 10 South Street Club Operator Inc. d/b/a TBD
- 3- Address for Proposed License 10 South Street, 5th Floor
- 4- Proposed Days/Hours of Operation 7AM - 3AM Daily
- 4.1 What floor(s) is the establishment on? 5th floor
- 4.2 Any rooftop, terrace, or other outside usage? Deck space
- 5- Square Footage of Location
- 6- Method of Operations (bar restaurant, catering, etc) Private Member's Club
- 7- Type of License (Full liquor/OP, beer and wine, etc.) Club Liquor License
- 7.1 Type of application (New, Alteration, Change in Method of Operation, Corporate Change, Class Change)
- 8- Sidewalk Café? Yes/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 music will be jazz
- 11- Where will the kitchen exhaust system vent to? Roof

12- Applicant's Previous Licensed Establishments and Addresses

- *42nd Street Lessee LLC (Cipriani 42nd Street), 110 East 42nd Street, New York, NY 10017
- *Downtown Restaurant Company LLC (Cipriani Downtown), 372-376 W Broadway, New York, NY 10012
- *GC Ballroom Operator LLC (Cipriani Club 55), 55 Wall Street, New York, NY 10005
- *GC Alpha LLC (Cipriani Dolce), Grand Central Station-West Balcony, New York, NY 10017
- *10 South Street LLC (Cipriani South Street), 10 South Street, New York, NY 10004 - application pending

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, X Jan Hennil Gudmundson, as a qualified representative of 10 South Street Club Operator Inc., located at 10 South Street, 5th Floor, New York, New York, agree to

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

8:am to 2:am Mon. to Sat / 10:am to 2:am Sunday for liquor service.

(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~~ ~~club~~ ~~bar~~ ~~private club~~ ~~restaurant~~ Private Member Club Club with full food service until _____ hour(s) before closing.

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

(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 Membership 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 n/a 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 After 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 café 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):

Live music will be Jazz
On 5th Floor

Deck space allowed as there as no residents in close proximity

(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 Jan Hennil Gudmundson Phone Number: X (646) 577-9324

Alternate Contact: Michael Romer Phone Number: (646) 256-2050

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

X Signed _____ Dated X 2/14/2020

Sworn to this 14 day of Feb 2020 Tina Gutierrez
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.

