

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

- 1- Applicant Name 120-122 Water Street LLC
- 2- Establishment Name (Corporate & DBA)
- 3- Address for Proposed License  
120 Water Street New York, NY 10005
- 4- Proposed Days/Hours of Operation Sunday -Thursday 12am-12pm and 7am to12am  
Friday-Saturday 12pm to 1am and 7am to 1am
- 4.1 What floor(s) is the establishment on? Entire Building
- 4.2 Any rooftop, terrace, or other outside usage? Rooftop
- 5- Square Footage of Location  
55,302 sq. ft.
- 6- Method of Operations (bar restaurant, Catering, etc)
- 7- Type of License (Full liquor/OP, beer and wine, etc.) Full Liquor
- 7.1 Type of application (New, Alteration, Change in Method of Operation, Corporate Change, Class Change) Alteration
- 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? West side of building by the terrace
- 12- Applicant's Previous Licensed Establishments and Addresses  
YYY Atlas 48 LLC 305 W. 48th Street, New York, NY (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 Any information provided herein is superseded by that described in the final stipulation sheet that will be agreed upon by the applicant and the Licensing and Permits Committee of Community Board 1.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, Robert Mahon, as a qualified representative of More Peas LLC located at 6 Stone Street, New York, New York, agree to the following stipulations for the applicant's Method of Operation for their on-premise license

- (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): gastropub serving American-style food with full food service until 2 hour(s) before closing.
(3) I will install soundproofing (please describe type and locations) Acoustic foam and quiet rock sheeting in accordance with NYC fire and safety code.
(4) I will have: DJs [ ] Yes [x] No Live music [ ] Yes [x] No Recorded Music [x] Yes [ ] No Dancing [ ] Yes [x] No Promoted events [ ] Yes [ ] No Cover fee events [ ] Yes [x] No Scheduled performances [ ] Yes [x] 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 7AM - 9AM
(8) I will employ a doorman/security personnel on the following days and hours: none
(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. [x] 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 0 violations from previous establishments for which I have served as a principal.
(14) I will (additionally):

\* Hours of operation will be from 11AM opening to 2AM closing Sunday through Wednesday, and 11AM opening to 4AM closing Thursday through Saturday, and hours for food service and bar service will be the same as the hours of operation

\*\* Only one front open window that will be open weather-permitting from noon to 9PM

(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: Robert Mahon Phone Number: (917) 790-3472

Alternate Contact: Phone Number:

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

Signed Robert Mahon Dated 4/26/2021

Sworn to this 26th day of April, 2021

Notary Public

SHRADHA LAMA NOTARY PUBLIC, STATE OF NEW YORK: Registration No. 01LA6372555 Qualified in QUEENS County Commission Expires 03/19/2022

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

- 1- Applicant Name Hide Lounge Inc
- 2- Establishment Name (Corporate & DBA)
- 3- Address for Proposed License 24 John Street, 20th and 21st Floors
- 4- Proposed Days/Hours of Operation Sun-Wed: 12pm-12am and Thursday-Saturday: 12pm-1am
- 4.1 What floor(s) is the establishment on? 20th and 21st Floors
- 4.2 Any rooftop, terrace, or other outside usage? N/A
- 5- Square Footage of Location 3776 Total Square Footage
- 6- Method of Operations (bar restaurant, Catering, etc) Bar/Tavern
- 7- Type of License (Full liquor/OP, beer and wine, etc.) Full 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  
\*Private Events Only
- 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  
Piping Rock Restaurant: 130 Post Avenue, Westbury, NY 11590  
Best Ray Pizza: 874 Ave of the Americas, New York, NY 10001

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Manhattan Community Board 1 Liquor License Stipulations

I, Salvatore LoDuca, as a qualified representative of Hide Lounge Inc.

located at 24 John Street, New York, New York, agree to

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

12pm-10pm Sunday, 12pm-11pm Monday, Tuesday, Wednesday, 12pm-12am Thursday, Friday and Saturday

(1) My hours of operation will be see above Sunday-Thursday and xxxxxxxxxxxx Friday x 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): N/A This is a Bar/Lounge not a full-service restaurant with full food service until 0 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 \*DJ-Private Events Only\*

(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 Morning to Early Afternoon

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

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

(14) I will (additionally): (A) Limit private events to a maximum of 2 per month; (B) No promoted events, no promoters, no ticketed events, no scheduled performances; (C) No outdoor space, no open windows at any point; (D) No outdoor queuing or wait lines, any queuing will be contained within hotel lobby; (E) Will follow all recommendations of traffic study submitted by applicant to Manhattan CB1, including assignment of hotel security to monitor sidewalk in front of the premises to facilitate drop offs and pick ups; (F) Limit maximum occupancy to 100

\*Applicant does not agree to these stipulations if Manhattan CB1 does not recommend approval or "deny unless" to SLA on the same terms as these stipulations\*

(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: Salvatore LoDuca Phone Number: 212-818-0249

Alternate Contact: Philip Loria Phone Number: 917-363-5827

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

Salvatore LoDuca 6/24/2022  
Signed Salvatore LoDuca Dated

Sworn to this 24th day of June, 2022 [Signature]  
Notary Public

FARIBA ZEINALI-NAMIN  
Notary Public, State of New York  
No. 01ZE6147309  
Qualified in Queens County  
Commission Expires 5-30-2026

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

- 1- Applicant Name  
York Street Lessee DE LLC, York Street LLC and Hersha Hospitality Management LP
- 2- Establishment Name (Corporate & DBA)  
Hilton Garden Inn Tribeca
- 3- Address for Proposed License  
39 Avenue of the Americas, New York, NY 10013
- 4- Proposed Days/Hours of Operation Hotel: 24 hrs/Daily; Restaurant: 11AM - 2AM daily
- 4.1 What floor(s) is the establishment on? Entire Hotel and Restaurant
- 4.2 Any rooftop, terrace, or other outside usage? Only sidewalk as per DOT Open Restaurants Program
- 5- Square Footage of Location 65,660
- 6- Method of Operations (bar restaurant, Catering, etc) Hotel with restaurant
- 7- Type of License (Full liquor/OP, beer and wine, etc.) Full Liquor - Hotel Liquor License
- 7.1 Type of application (New, Alteration, Change in Method of Operation, Corporate Change, Class Change) Alteration Application
- 8- Sidewalk Café? ~~Yes~~/No Possibly DOT Open Restaurants Program
- 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?  
Main Kitchen Exhaust – vents from Hotel Main Roof  
Pizza oven vents from hotel 2<sup>nd</sup> floor Roof
- 12- Applicant's Previous Licensed Establishments and Addresses  
See rider annexed

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**Manhattan Community Board 1 Liquor License Stipulations**

I, Ashish R. Parikh, as a qualified representative of York Street Lessee DE, LLC,

located at 39 Avenue of the Americas, New York, New York, agree to

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

Hotel: 24 hours daily with alcohol service limited to room service 12Noon to 12AM daily restaurant:

(1) My hours of operation will be 11AM -2AM 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 <sup>hotel with a</sup> full-service restaurant, (please describe type of restaurant): American Bistro with full food service until ----- hour(s) before closing.

(3) ~~I will install soundproofing (please describe type and locations)~~ \_\_\_\_\_

The premises is already open and operating - no service on the roof \_\_\_\_\_

(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 5:00 am - 10:00 am

(8) I will employ a doorman/security personnel on the following days and hours: None-Hotel management on site 24/7

(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 DOT Open Restaurants Program

(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):

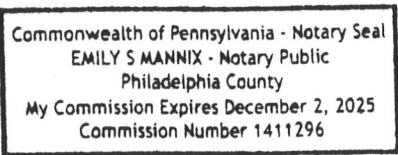
(15) Residents may contact the manager/owner at the below number. Complaints will be addressed immediately and I will revisit the above-stated method of operation if necessary in order to minimize my establishment's impact on my neighbors.

Name: Hiram A. Negron Phone Number: (914) 960-7611

Alternate Contact: Elizabeth Pimentel Phone Number: (201) 492-3146

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

[Signature] Signed \_\_\_\_\_ Dated 05/26/2022



Sworn to this 26 day of May 2022 [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.

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

- 1- Applicant Name  
Yuji Fukushima
- 2- Establishment Name (Corporate & DBA)  
All Blues Inc. d/b/a All Blues
- 3- Address for Proposed License  
87 Walker Street, New York, NY 10013
- 4- Proposed Days/Hours of Operation Monday to Sunday 12PM - 2AM
- 4.1 What floor(s) is the establishment on? Ground floor
- 4.2 Any rooftop, terrace, or other outside usage? No.
- 5- Square Footage of Location 1,700 sq ft.
- 6- Method of Operations (bar restaurant, Catering, etc) Bar/ Tavern
- 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? Rear of the premises.
- 12- Applicant's Previous Licensed Establishments and Addresses  
See Attached.

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Manhattan Community Board 1 Liquor License Stipulations

I, YUJI FUKUSHIMA, as a qualified representative of All Blues INC., located at 87 Walker Street, New York, New York, agree to the following stipulations for the applicant's Method of Operation for their LIQUOR license

- (1) My hours of operation will be 12PM - 11PM Sunday, 12PM-12AM Monday- Thursday and 12PM-2AM Friday - Saturday...
(2) I will operate a full-service restaurant, (please describe type of restaurant): JAPANESE 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 [x] No Live music [ ] Yes [x] No Recorded Music [x] Yes [ ] No Dancing [ ] Yes [x] No Promoted events [ ] Yes [x] No Cover fee events [ ] Yes [x] No Scheduled performances [ ] Yes [x] 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
(8) I will employ a doorman/security personnel on the following days and hours: NA
(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 0 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: YUJI FUKUSHIMA Phone Number: 917-449-4655

Alternate Contact: Phone Number:

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

Signed [Signature] Dated March 10, 2023

Sworn to this 10 day of March 2023 [Signature] Notary Public

RONGSHENG GAO Notary Public - State of New York No. 01GA6391193 Qualified in Kings County My Commission Expires Apr. 29, 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 8/2019**

- 1- Applicant Name NANAHENGE LLC
- 2- Establishment Name (Corporate & DBA) AJISAI ON DUANE
- 3- Address for Proposed License 183 DUANE ST , NEW YORK NY 10013
- 4- Proposed Days/Hours of Operation MONDAY TO SUNDAY 11:30AM TO 10PM
- 4.1 What floor(s) is the establishment on? Ground Floor & basement
- 4.2 Any rooftop, terrace, or other outside usage? No
- 5- Square Footage of Location 1000 sq ft for ground and 1000 sq ft for basement
- 6- Method of Operations (bar restaurant, Catering, etc) Full Service Japanese Cuisine Restaurant
- 7- Type of License (Full liquor/OP, beer and wine, etc.) Restaurant beer and wine
- 7.1 Type of application (New, Alteration, Change in Method of Operation, Corporate Change, Class Change)
- 8- Sidewalk Café? Yes/**No**  
No 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? To the roof
- 12- Applicant's Previous Licensed Establishments and Addresses None.

The previous operator of the premises is called TOKYO BAY ENTERPRISE NY INC DBA Tokyo Bay who had restaurant wine and beer license as well.

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**Manhattan Community Board 1 Liquor License Stipulations**

I, LAI KING SO, as a qualified representative of NANAHENG LLC DBA AJISAI ON DUANE, located at 183 DUANE ST, New York, New York, agree to the following stipulations for the applicant's Method of Operation for their RESTAURANT BEER & WINE license

(1) My hours of operation will be 11:30AM TO 10PM Sunday – Thursday and 11:30AM TO 10PM 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): Japanese Cuisine Restaurant with full food service until half 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 10pm Sun-Thurs and 10pm Fri-Sat.  I will not have French doors or windows.

(7) I will have delivery of supplies, goods and services during the hours of monday to sunday: 11:30am to 10pm

(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 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):

(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: LAI KING SO Phone Number: 646-422-7166

Alternate Contact: Kenji King @ hotmail.com Phone Number: 917-968-6980

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

[Signature]  
Signed

5/31/2022  
Dated

Sworn to this 31<sup>st</sup> day of May 2022  
Notary Public

KALUN CHAN  
Notary Public New York State  
No. 01CH6116304  
Qualified in New York County  
Commission Expires Sep 27, 2024  
Rev. 12/18

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.