

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

- 1- Applicant Name
Forge 30 Hudson LLC
- 2- Establishment Name (Corporate & DBA)
d/b/a Restaurant Marc Forgione
- 3- Address for Proposed License
30 Hudson Street
- 4- Proposed Days/Hours of Operation
Mon-Thurs., 11am-1am, Friday/Sat.: 11 am - 2 am.
 - 4.1 What floor(s) is the establishment on?
ground and basement
 - 4.2 Any rooftop, terrace, or other outside usage?
sidewalk
- 5- Square Footage of Location
Approx 5500 total
- 6- Method of Operations (bar restaurant, Catering, etc)
Full Service Restaurant (relocating Restaurant Marc Forgione)
- 7- Type of License (Full liquor/OP, beer and wine, etc.)
OP252 (On Premises Liquor)
 - 7.1 Type of application (New, Alteration, Change in Method of Operation, Corporate Change, Class Change)
New
- 8- Sidewalk Café? Yes/No
Yes
- 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 (existing black iron venting)
- 12- Applicant's Previous Licensed Establishments and Addresses
Restaurant Marc Forgione
Khe Yo

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 Any information provided herein is superseded by that described in the final stipulation sheet that will be agreed upon by the applicant and the Licensing and Permits Committee of Community Board 1.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, Marc Forgione, as a qualified representative of Forge 30 Hudson LLC,
located at 30 Hudson Street, New York, New York, agree to
the following stipulations for the applicant's Method of Operation for their on-premises 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): American fine dining full service restaurant
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 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 - 5PM
- (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 violations from previous establishments for which I have served as a principal.
- (14) I will (additionally):

* The hours of operation will be from 11AM opening to 1AM Sunday through Thursday, and 11AM opening to 2AM closing Friday through Saturday, and the hours of food service and bar service will be from 11AM opening to 12AM closing Sunday through Thursday and 11AM opening to 1AM closing Friday through Saturday

** The applicant confirmed that they will make sure to follow proper garbage disposal

(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: Britta Priest Phone Number: 917-449-5630

Alternate Contact: Marc Forgione Phone Number: 646-709-0134

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

 Signed Dated 7/31/21

Sworn to this 31st day of July, 2021
Notary Public



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

- 1- Applicant Name BL 109 WBroadway NY LLC
- 2- Establishment Name (Corporate & DBA)
Bluestone Lane
- 3- Address for Proposed License
109 West Broadway New York, NY
- 4- Proposed Days/Hours of Operation
7am-10pm all days
4.1 What floor(s) is the establishment on?
Ground
4.2 Any rooftop, terrace, or other outside usage?
Parklet during Open Restaurants program
- 5- Square Footage of Location
1526sqft
- 6- Method of Operations (bar restaurant, Catering, etc)
Restaurant
- 7- Type of License (Full liquor/OP, beer and wine, etc.)
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?
Roof
- 12- Applicant's Previous Licensed Establishments and Addresses
See attached Rider

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Manhattan Community Board 1 Liquor License Stipulations

I, Hari Nathan Kalyan, as a qualified representative of BL 109 WBroadway NY LLC,
located at 109 West Broadway, New York, New York, agree to
the following stipulations for the applicant's Method of Operation for their on-premises 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): Australian Cafe
_____ with full food service until all hour(s) before closing.
- (3) I will install soundproofing (please describe type and locations) Installed in ceiling

- (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
7AM - 10AM
- (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):

* The hours of operation and food service will be from 7AM opening to 10PM all days of the week, and the hours of bar service will be from 11AM opening to 10PM closing all days of the week

(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: Tom Selementi, SVP Retail Phone Number: 551-208-5228

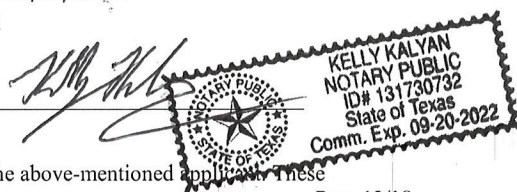
Alternate Contact: Hari Nathan Kalyan, General Counsel Phone Number: 917-653-0633

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

[Signature] _____ Dated 6/24/21

Signed _____
Sworn to this 27th day of June 2021

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 Stipulations

I, ELIZABETH NICHOLSON as a qualified representative of DELLASNYC LLC,
located at 66 WEST BROADWAY, NEW YROY, NY, New York, New York, agree to
the following stipulations for the applicant's Method of Operation for their TAVERN WINE license

12PM opening to 12AM closing all days of the 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): TAVERN
UNTIL CLOSING 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 _____ 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 time

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

(14) I will (additionally):

** Windows will be open 12PM with a closing time of 10PM during the weekdays and 11PM during the weekends.

(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: ELIZABETH NICHOLSON Phone Number: 917-558-3787

Alternate Contact: THOMAS BURKE Phone Number: 212-521-0828

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

Elizabeth Nicholson
Signed

5/25/21
Dated

STACY L WEISS
NOTARY PUBLIC-STATE OF NEW YORK
No. 02WE6056328
Qualified in New York County
My Commission Expires March 19, 2023

Sworn to this 25 day of May 2021
Stacy L Weiss
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

Stacey Sosa or Entity to be Formed

2- Establishment Name (Corporate & DBA)

North Bar

3- Address for Proposed License

458 Greenwich St, New York, NY 10038

4- Proposed Days/Hours of Operation

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

4.2 Any rooftop, terrace, or other outside usage?

outdoor space for future sidewalk cafe license

5- Square Footage of Location

1,500 sq ft

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

bar 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)

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 jukebox

11- Where will the kitchen exhaust system vent to?

12- Applicant's Previous Licensed Establishments and Addresses

460 Greenwich St, New York, NY 10013

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Manhattan Community Board 1 Liquor License Stipulations

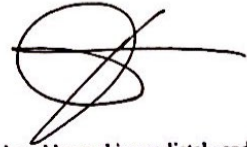
I, Stacey Sosa, as a qualified representative of North Bar located at 458 Greenwich Street, New York, New York, agree to the following stipulations for the applicant's Method of Operation for their liquor license

- ** (1) My hours of operation will be 4-12 Sunday - Thursday and 4-1 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): Road Centric with full food service until 1 hour(s) before closing.
- (3) I will install soundproofing (please describe type and locations) already 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.
- (6) I will close all doors and windows by 12 Sun-Thurs and 1 Fri-Sat. I will not have French doors or windows.
- (7) I will have delivery of supplies, goods and services during the hours of 10 am to 3 pm
- (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.
- (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):

** The hours of operation are 4PM opening to 12AM closing Sunday through Thursday and 4PM opening to 1AM closing Friday and Saturday, and the hours of food service are 5PM opening to 11PM closing Sunday through Thursday and 5PM opening to 12AM closing Friday and Saturday, and the hours of bar service are the same as the hours of operation.

- Windows will not be open

VINCENT J. LICATA
Notary Public, State of New York
No. 02L16321280
Qualified in New York County
Commission Expires Mar. 16, 23



(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: Elias Sosa Phone Number: 917 216 8061

Alternate Contact: Katie Leonard Phone Number: 917 446 5540

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

Signed Stacey Sosa Dated 5/25/2021
 Notary Public - State of New York
 No. 01SK6404402
 Qualified in Suffolk County
 Commission Expires Feb. 18, 2024

Sworn to this 25th day of May 2021
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. Rev. 12/18

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

1- Applicant Name

Food First LLC.

2- Establishment Name (Corporate & DBA)

Food First LLC d/b/a Blue Ribbon Sushi

3- Address for Proposed License

84 William Street, New York, New York 10038

4- Proposed Days/Hours of Operation 11:00am - 11:00pm (daily)

4.1 What floor(s) is the establishment on? Ground floor & cellar
(Ground floor only for patrons)

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

5- Square Footage of Location 3,843 SF (appx. 1,410 SF for public)

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

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

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?

Roof (existing system for previous restaurant by same operators)

12- Applicant's Previous Licensed Establishments and Addresses

Flexible Fish Corp. 119 Sullivan Street, Food First LLC 34 Downing Street, Brofish LLC 308 W. 58th Street
The Crystal Room LP 97 Sullivan Street, Cosmic Debris LLC 187 Orchard Street, Brofish LLC 6 Columbus Circ.
BR Chicken Manhattan I, LLC 28 E. 1st Street, The Ribbon Worldwide LLC 20 W. 72nd Street
Fast Fish LLC 225 Liberty Street, Sushi Rock 30 Rockefeller Plaza

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Manhattan Community Board 1 Liquor License Stipulations

I, Eric Bromberg, as a qualified representative of Food First LLC, located at 84 William Street, New York, New York, agree to the following stipulations for the applicant's Method of Operation for their on-premises license

* 11AM - 11PM all days of the week. Hours of food service and bar service are the same

- (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): sushi restaurant with full food service until 1 hour(s) before closing.
(3) I will install soundproofing (please describe type and locations) Walls with acoustic fabric
(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 8AM to noon
(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 had two violations from previous establishments for which I have served as a principal.*
(14) I will (additionally):

*Principals of applicants were co-licensees on a hotel license with an operator that received two violations for activity concerning the hotel, not Principal's restaurant

(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: ERIC BROMBERG Phone Number: 212-229-0404

Alternate Contact: Phone Number:

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

Signed [Signature] Dated 7/8/21

DONNA MARIE LACHMAN Notary Public, State of New York No. 01LA4846182 Qualified in Nassau County Commission Expires November 30, 2021

Sworn to this 8th day of July, 2021 [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 Katy McNulty
- 2- Establishment Name (Corporate & DBA)
THE PIXIE AND THE SCOUT LLC CAROUSEL KIOSK
- 3- Address for Proposed License
BATTERY PL., STATE ST. + WHITEHALL ST.
- 4- Proposed Days/Hours of Operation 9am - 2pm, 7 days a week
- 4.1 What floor(s) is the establishment on?
KIOSK
- 4.2 Any rooftop, terrace, or other outside usage?
OUTDOOR SEATING in the Park
- 5- Square Footage of Location
450
- 6- Method of Operations (bar restaurant, Catering, etc)
FOOD + BEVERAGE KIOSK
- 7- Type of License (Full liquor/OP, beer and wine, etc.)
WINE + BEER
- 7.1 Type of application (New, Alteration, Change in Method of Operation, Corporate Change, Class Change)
NEW
- 8- Sidewalk Café? Yes/ No
- 9- Type of Music? Live Recorded DJ None
- 10- Volume of Music? Background (*no sound from events, performances or music will be heard outside the premises or by neighbors*)
- Other None
- 11- Where will the kitchen exhaust system vent to?
N/A
- 12- Applicant's Previous Licensed Establishments and Addresses

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, KATY McNULTY, as a qualified representative of THE ALXIE AND THE SCOUT LLC, located at BATTERY PL, STATE ST. + WHITEHALL ST (CAROUSEL KIOSK), New York, New York, agree to the following stipulations for the applicant's Method of Operation for their FANROW SUMMER 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): KIOSK
_____ with full food service until 0 hour(s) before closing.
- (3) I will install soundproofing (please describe type and locations) There is no music
Our entire premises are outdoors in a NYC Park Department property. We will have tables and chairs in a crowd barrier stanchioned area. There are several established trees and heavy landscaping surrounding the entire area that isn't directly on the harbor.
- (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 7pm Sun-Thurs and 7pm 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 - 8AM
- (8) I will employ a doorman/security personnel on the following days and hours: We do not employ a doorman. Our supervisors will be onsite 9a-7p daily.
- (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):

** The hours of operation, food service and bar service will be from 9AM opening to 7PM closing all days of the week

** The applicant has represented that there will not be any kind of music or non-musical entertainment that will be played, no dancing, and no TV monitors; and

(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: Kathryn McNulty Phone Number: 646-389-5845

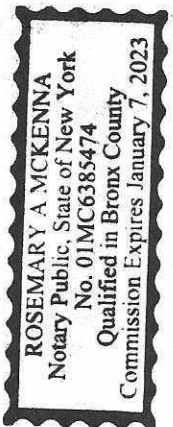
Alternate Contact: Jonathan Hittinger Phone Number: 973-760-0911

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

[Signature] _____ 06/28/2021
Signed _____ Dated _____

Sworn to this 28th day of June 2021 Rosemary A McKenna
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

KATY McNULTY

2- Establishment Name (Corporate & DBA)

THE PIKIE AND THE SCOUT LLC Fountain Kiosk

3- Address for Proposed License

BATTERY PL., STATE ST. + WHITEHALL ST.

4- Proposed Days/Hours of Operation 11Am - 9pm 7 days a week

4.1 What floor(s) is the establishment on?

KIOSK

4.2 Any rooftop, terrace, or other outside usage?

OUTDOOR SEATING IN PARK

5- Square Footage of Location

APPROX 450 SQ FT.

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

FOOD + BEVERAGE KIOSK

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

WINE + BEER

NEW

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 NONE

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

NONE

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, KATY McNulty, as a qualified representative of THE PIXIE AND THE SCOUT LLC located at BATTERY PL, STATE ST. + WHITEHALL ST (FOUNTAIN KIOSK) New York, New York, agree to the following stipulations for the applicant's Method of Operation for their TAVERN SUMMER 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): KIOSK with full food service until 0 hour(s) before closing.
- (3) I will install soundproofing (please describe type and locations) THERE IS NO MUSIC
Our entire premises are outdoors in a NYC Park Department property. We will have tables and chairs in a crowd barrier stanchioned area. There are several established trees and heavy landscaping surrounding the entire area that isn't directly on the harbor.
- (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 9:00 pm Sun-Thurs and 9 pm Fri-Sat. I will not have French doors or windows.
- (7) I will have delivery of supplies, goods and services during the hours of 9AM - 10AM
- (8) I will employ a doorman/security personnel on the following days and hours: We do not employ a doorman. Our supervisors will be onsite 9a-10p daily.
- (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):

** The applicant has represented that there will not be any kind of music or non-musical entertainment that will be played, no dancing, and no TV monitors.

** The hours of operation, food service and bar service will be from 11AM opening to 9PM all days of the week

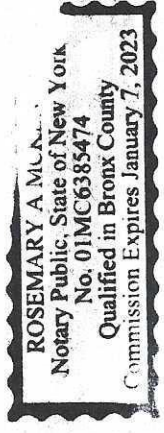
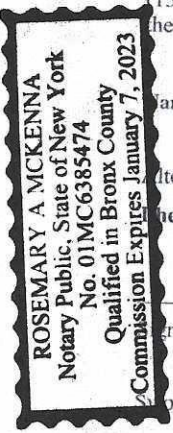
(15) Residents may contact the manager/owner at the below number. Complaints will be addressed immediately and I will revisit the above-stated method of operation if necessary in order to minimize my establishment's impact on my neighbors.

Name: Kathryn McNulty Phone Number: 646-389-5845
 Alternate Contact: Jonathan Hittinger Phone Number: 973-760-0911

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

Signed: [Signature] Dated: June 28, 2021

Notary Public for this 28th day of June 2021. Rosemary A McKenna
 Notary Public



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

- 1- Applicant Name
Missy Robbins and Sean Feeney
- 2- Establishment Name (Corporate & DBA)
MisiPasta LLC
- 3- Address for Proposed License
928 Craig Road S New York, NY 10004
- 4- Proposed Days/Hours of Operation Wed-Sat 5PM-11:30PM
- 4.1 What floor(s) is the establishment on?
Ground Floor, Governors' Island Picnic Area
- 4.2 Any rooftop, terrace, or other outside usage?
Yes, Outdoor Picnic Area of Governor's Island
- 5- Square Footage of Location
500 sq feet
- 6- Method of Operations (bar restaurant, Catering, etc)
Seasonal OP Restaurant License
- 7- Type of License (Full liquor/OP, beer and wine, etc.) Full Liquor
- Seasonal OP Restaurant 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 N/A No Music
- 10- Volume of Music? Background (*no sound from events, performances or music will be heard outside the premises or by neighbors*)
 Other N/A No Music
- 11- Where will the kitchen exhaust system vent to?
Open Air Cooking
- 12- Applicant's Previous Licensed Establishments and Addresses
MisiDomino LLC, 325 Kent Avenue Brooklyn 11249
Woodfire Collision LLC, 567 Union St Brooklyn 11221

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, Sean Feeney, as a qualified representative of Misipasta LLC located at 928 Craig Road S New York, NY 10004, New York, New York, agree to the following stipulations for the applicant's Method of Operation for their Seasonal OP license 5PM to 11:30PM all days of the 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): seasonal picnic style restaurant prepared by celebrity chef Missy Robbins with full food service until 1:30PM(s) before closing.
(3) I will install soundproofing (please describe type and locations) N/A NO MUSIC, outdoor space, seasonal space
(4) I will have: DJs [X]Yes [X]No Live music [X]Yes [X]No Recorded Music [X]Yes [X]No Dancing [X]Yes [X]No Promoted events [X]Yes [X]No Cover fee events [X]Yes [X]No Scheduled performances [X]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. [X] I will not have French doors or windows. * outdoor space, no doors or windows
(7) I will have delivery of supplies, goods and services during the hours of 5-7pm via ferry
(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. [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 [X]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.

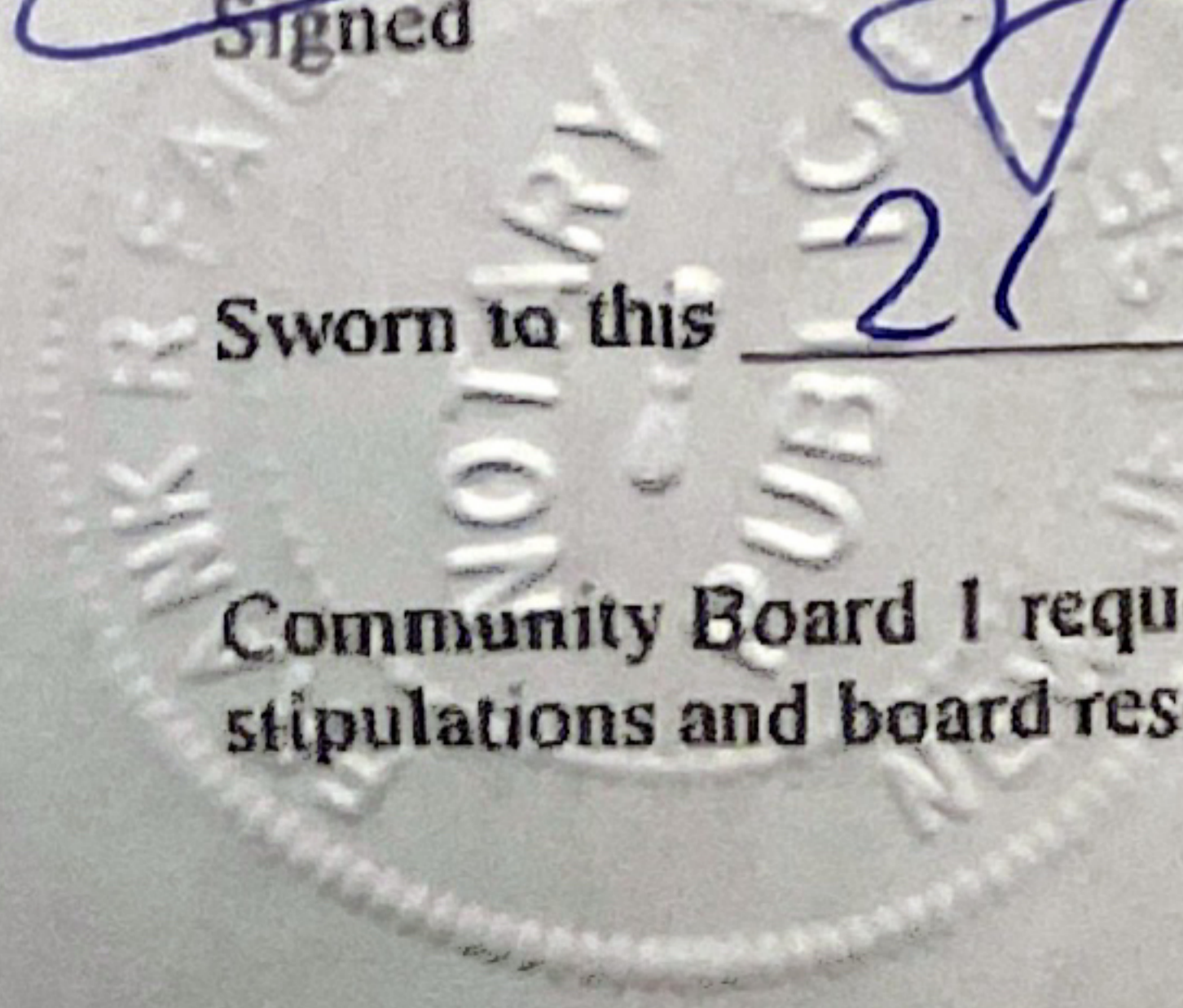
Name: Sean Feeney Phone Number: 347.244.9046

Alternate Contact: Phone Number:

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

Signed: [Signature] Dated: August 21, 2021

Sworn to this 21 day of August 2021 [Signature] Notary Public



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

FRANK R. FAIELLO ID # 2386230 12/18 NOTARY PUBLIC STATE OF NEW JERSEY My Commission Expires June 3, 2024

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

1- Applicant Name

AB Fulton Nominee LLC and Hersha Hospitality Management LP

2- Establishment Name (Corporate & DBA)

Moxy NYC Downtown

3- Address for Proposed License

26 Ann Street, New York, NY 10038

4- Proposed Days/Hours of Operation

4.1 What floor(s) is the establishment on? Entire hotel

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

5- Square Footage of Location

128,690 sq ft

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

Hotel bar restaurant/lounge

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

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?

N/A

12- Applicant's Previous Licensed Establishments and Addresses

See attached list

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

AB Fulton Nominee LLC and Hersha Hospitality Management LP

I, Yanshu Li, as a qualified representative of located at 26 Ann Street, New York, New York, agree to the following stipulations for the applicant's Method of Operation for their hotel liquor license 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): restaurant with lounge located in a boutique hotel Continental Menu with full food service until 1/2 hour(s) before closing.
(3) I will install soundproofing (please describe type and locations) Sound proofing already installed throughout hotel - Acoustic plaster used for ceiling and exterior walls are fully insulated
(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. Windows will not be open

- (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 Regular business hours
(8) I will employ a doorman/security personnel on the following days and hours: 24 hours / 7 days a week
(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 N/A
(12) I will conspicuously post this stipulation form beside my liquor license inside of my business.
(13) I confirm that I have zero violations from previous establishments for which I have served as a principal.
(14) I will (additionally):

** The hours of operation are 24 hours 7 days a week for the hotel, and hours of food service are from 8AM opening to 12AM closing all days of the week, and the hours of bar service are from 8AM opening to 2AM closing Monday through Saturday, and 10AM to 2AM on Sundays. There will be a grab-and-go station for guests only located on the third floor next to the bar area for the sale of bottled alcoholic beverages that will be open until 4AM for hotel guests only after the restaurant with lounge closes

*** Will have occasional live music in the form of jazz, acoustic, piano, and guitar, DJs, no non-musical entertainment, and TV monitors in the basketball room and event space

(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: Yanshu Li Phone Number: 212 823 3747

Alternate Contact: Hiram A Negron Phone Number: 914 960 7611

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

Signed [Signature]

Dated 7/19/21

JOSHUA DAVILA
OFFICE OF THE CLERK OF THE SUPREME COURT OF THE STATE OF NEW YORK
No. 01DA6397671
Qualified in Bronx County
My Commission Expires 09-09-2023

Sworn to this 19 day of July 2021

[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 BL 2 River NY LLC
- 2- Establishment Name (Corporate & DBA)
Bluestone Lane
- 3- Address for Proposed License
2 River Terrace New York, NY
- 4- Proposed Days/Hours of Operation
7am-10pm all days
4.1 What floor(s) is the establishment on?
Ground
4.2 Any rooftop, terrace, or other outside usage?
Outdoor annex area
- 5- Square Footage of Location
1100sqft
- 6- Method of Operations (bar restaurant, Catering, etc)
Restaurant
- 7- Type of License (Full liquor/OP, beer and wine, etc.)
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?
Roof
- 12- Applicant's Previous Licensed Establishments and Addresses
See attached Rider

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, Hari Nathan Kalyan, as a qualified representative of BL 2 River NY LLC,
located at 2 River Terrace, New York, New York, agree to
the following stipulations for the applicant's Method of Operation for their on-premises 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): cafe serving Australian-inspired cuisine
_____ with full food service until all hour(s) before closing.
- (3) I will install soundproofing (please describe type and locations) installed in ceiling
- (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
7AM - 10AM
- (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):

* The hours of operation and food service will be from 7AM opening to 10PM all days of the week, and the hours of bar service will be from 11AM opening to 10PM closing all days of the week

(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: Tom Selementi, SVP Retail Phone Number: 551-208-5228

Alternate Contact: Hari Nathan Kalyan, General Counsel Phone Number: 917-653-0633

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

Signed _____ Dated 6/21/21

Sworn to this 24th day of June 2021

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. Rev. 12/18