

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

1- Applicant Name

VB Pier 16 LLC

2- Establishment Name (Corporate & DBA)

VB Pier 16 LLC dba Cobblefish

3- Address for Proposed License

Pier 16, 89 South Street

4- Proposed Days/Hours of Operation

9:00am - 1:00am; 7 days per week

4.1 What floor(s) is the establishment on?

Ground floor

4.2 Any rooftop, terrace, or other outside usage?

Yes, Pier

5- Square Footage of Location

3,200 sf

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

Restaurant

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)

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?

To be determined.

12- Applicant's Previous Licensed Establishments and Addresses

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 Any information provided herein is superseded by that described in the final stipulation sheet that will be agreed upon by the applicant and the Licensing and Permits Committee of Community Board 1.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, Renee Lee, as a qualified representative of VB Pier 16 LLC, located at Pier 16, 89 South 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): restaurant serving seaport-style cuisine  
ALL HOURS OF OPERATION with full food service until \_\_\_\_\_ hour(s) before closing.

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

(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 - 9AM

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

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

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

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

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

(13) I confirm that I have no violations from previous establishments for which I have served as a principal.

(14) I will (additionally):

\* Hours of operation will be from 9AM opening to 1AM closing all days of the week, and hours for food service will be the same as the hours of operation, and hours of bar service will be from 11AM opening to 1AM closing all days of the week

\*\* Windows will be open during all hours of operation

\*\*\* Three licensed security guards will be employed to oversee crowd control and keep day-to-day business in order

(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: Renee Lee Phone Number: (917) 887-9065

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

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

x Renee Lee Signed \_\_\_\_\_ Dated 4/20/21

FRANK W. PALILLO  
Notary Public, State of New York  
No. 24-4754  
Qualified in the County of New York  
Commission Expires 12/18/21

Sworn to this 20th day of April 2021  
Notary Public [Signature]

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 *Tower 4 Liberty Market LLC*
- 2- Establishment Name (Corporate & DBA) *Tower 4 Liberty Market LLC*  
*d/b/a Gansevoort Liberty Market*
- 3- Address for Proposed License *185 Greenwich Street LL 2465*  
*NYC, NY*
- 4- Proposed Days/Hours of Operation *11AM-12AM 7 days per week*
- 4.1 What floor(s) is the establishment on? *lower level*
- 4.2 Any rooftop, terrace, or other outside usage? *No*
- 5- Square Footage of Location *11,000 sf*
- 6- Method of Operations (bar restaurant, catering, etc) *Food Hall*
- 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) *NEW*
- 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? *4th floor venting*
- 12- Applicant's Previous Licensed Establishments and Addresses
- |                            |                              |                  |
|----------------------------|------------------------------|------------------|
| <i>SOHO NY Lodging LLC</i> | <i>151 E. Houston St NYC</i> | <i>2012-2014</i> |
| <i>W 14 Market LLC</i>     | <i>353 W. 14th St NYC</i>    | <i>2018-5/20</i> |

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Manhattan Community Board 1 Liquor License Stipulations

I, Sonny Choi, as a qualified representative of Tower 4 Liberty Market LLC, located at 185 Greenwich 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): food hall serving different food cuisines with full food service until 1 hour(s) before closing.
(3) I will install soundproofing (please describe type and locations) NO SOUND PROOFING
(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 [ ] 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. (lower level)
(7) I will have delivery of supplies, goods and services during the hours of operation
(8) I will employ a doorman/security personnel on the following days and hours: NO SECURITY PERSONNEL
(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):

SC \* Hours of operation will be from 11AM opening to 12AM closing all days of the week, and hours of food service and bar service will be the same as the hours of operation

(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: Sonny Choi Phone Number: (917) 734-9001

Alternate Contact: Erin An Phone Number: (718) 772-2833

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

Signed: [Signature]

Dated: May 19, 2021

FRANK W. PALILLO Notary Public, State of New York No. 24400410 Qualified in Kings County Commission Expires April 5, 2023

Sworn to this 19th day of May 2021 Notary Public

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

1- Applicant Name

Barry Lipsitz or Entity to be Formed

2- Establishment Name (Corporate & DBA)

TBD

3- Address for Proposed License

41 Murray Street, New York, NY 10007

4- Proposed Days/Hours of Operation Noon to 2AM Sunday-Thursday, noon to 3AM Friday-Saturday

4.1 What floor(s) is the establishment on?

Ground floor, sub basement and basement

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

5- Square Footage of Location

1,250 sq ft ground floor and basement, 500 sq ft in sub cellar

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

Restaurant/sports bar

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? Roof

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, \_\_\_\_\_, as a qualified representative of Barry Lipsitz or an Entity to be Formed,  
located at 41 Murray Street, New York, New York, agree to  
the following stipulations for the applicant's Method of Operation for their \_\_\_\_\_ 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 sports bar serving American-style food 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. **windows will be closed at all times**
- (7) I will have delivery of supplies, goods and services during the hours of 10AM to 2PM
- (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):

\* Hours of operation will be from 12PM opening to 1AM Sunday through Thursday, and 2AM closing Fridays and Saturdays. Hours of food service and bar service will be the same as the hours of operation.

\*\*\* The Committee explained that after 1 year of commencing operation, if the applicant wishes to seek longer hours, the Committee will consider review if there have been no issues within the community.

(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: \_\_\_\_\_ Phone Number: \_\_\_\_\_

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

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

\_\_\_\_\_  
Signed

\_\_\_\_\_  
Dated

Sworn to this \_\_\_\_\_ day of \_\_\_\_\_

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



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 Stipulations

I, Jacob Rabinowitz, as a qualified representative of Balcony Cafe Inc, located at 78-82 Reade 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 11:30am-2:00am Sunday - Thursday and 11:30am-2:00am Friday - Saturday (I understand this to mean that all patrons will be cleared from the establishment at the specified hour).
(2) I will operate a full-service restaurant, (please describe type of restaurant): restaurant serving New Orleans' - inspired cuisine with full food service until 1 hour(s) before closing.
(3) I will install soundproofing (please describe type and locations) Double echo reduction sound proofing panels installed inside and under the ceilings of entire main dining room.
\* (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 2am Sun-Thurs and 2am Fri-Sat. I will not have French doors or windows.
(7) I will have delivery of supplies, goods and services during the hours of 12pm-10pm Mondays through sundays
(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.
(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):

\* Live music will be played mainly for happy hour from 6PM to 9PM non-amplified, unless for other reasons such as a musician needing to connect an electrical guitar to an amplifier
\*\* The establishment does not have windows

(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: Jacob Rabinowitz Phone Number: 917-407-3144
Alternate Contact: Tal Lavi Phone Number: 646-675-0755

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

Signed [Signature] Dated 4/26/2021

Sworn to this 24th day of April 2021 [Signature]
Notary Public

