

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

- 1- Applicant Name
ONE HANOVER LLC
- 2- Establishment Name (Corporate & DBA)
HARRY'S CAFE
- 3- Address for Proposed License
62 STONE STREET
- 4- Proposed Days/Hours of Operation 11AM-1AM
- 4.1 What floor(s) is the establishment on? GROUND FLOOR
- 4.2 Any rooftop, terrace, or other outside usage?
*STONE STREET PEDESTRIAN
PLAZA EVERY YEAR
- 5- Square Footage of Location
1500
- 6- Method of Operations (bar restaurant, Catering, etc)
CAFE - FULL FOOD MENU AND KITCHEN
- 7- Type of License (Full liquor/OP, beer and wine, etc.) OP LICENSE, TRANSFER AND UPGRADE
FROM RW TO OP
- 7.1 Type of application (New, Alteration, Change in Method
of Operation, Corporate Change, Class Change)
- 8- Sidewalk Café? Yes No
*STONE STREET PEDESTRIAN PLAZA EVERY YEAR
- 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?
- 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 Any information provided herein is superseded by that described in the final stipulation sheet that will be agreed upon by the applicant and the Licensing and Permits Committee of Community Board 1.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, Peter Poulakakos, as a qualified representative of One Hanover LLC, located at 62 Stone Street, New York, New York, agree to the following stipulations for the applicant's Method of Operation for their On-premises liquor license

- (1) My hours of operation will be 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-style pastry shop with full food service until hour(s) before closing.
(3) I will install soundproofing (please describe type and locations) soundproofing board addition to sheetrock also the windows will be soundproof
(4) I will have: DJs, Live music, Recorded Music, Dancing, Promoted events, Cover fee events, Scheduled performances
(5) Volume of all music, events or performances will be at background levels only.
(6) I will close all doors and windows by 11pm Sun-Thurs and 11pm Fri-Sat.
(7) I will have delivery of supplies, goods and services during the hours of 7am to 10am
(8) I will employ a doorman/security personnel on the following days and hours: no doorman will be schedule
(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 violations from previous establishments for which I have served as a principal.
(14) I will (additionally):

* Hours of operation and food service hours will be from 11AM to 12AM Monday through Wednesday, 11AM to 1AM Thursday through Sunday, and bar service hours 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: Doris Jimenez Phone Number: 212-344-0500

Alternate Contact: Ivan Mitankin Phone Number: 646-331-2390

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

Signed [Signature]

Dated 1/21/21

MINYRA E. CHISHOLM Notary Public, State of New York Reg. No. 01CH4928736 My Commission Expires July 31, 2022

Sworn to this 21 day of January 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.

MINYRA E. CHISHOLM Notary Public, State of New York Qualified in New York County Reg. No. 01CH4928736 My Commission Expires July 31, 2022

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

1- Applicant Name

ONE HANOVER LLC

2- Establishment Name (Corporate & DBA)

ULYSSES' FOLK HOUSE

3- Address for Proposed License

48 STONE STREET AKA 91-97 PEARL STREET

4- Proposed Days/Hours of Operation 11AM - 4AM ALL DAYS

4.1 What floor(s) is the establishment on?

GROUND FLOOR

4.2 Any rooftop, terrace, or other outside usage?

STONE STREET PEDESTRIAN PLAZA EVERY YEAR

5- Square Footage of Location

4,500 SQ FEET

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

AUTHENTIC IRISH PUB WITH FULL FOOD MENU

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

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?

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, PETER POULAKAKOS, as a qualified representative of ONE HANOVER LLC

located at 48 STONE STREET AKA 91-97 PEARL STREET, New York, New York, agree to the following stipulations for the applicant's Method of Operation for their OP 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):
SERVING PUB FARE 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 _____
- (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 from 11AM-4AM all days of the week, food service hours from 11AM-3:30AM all days of the week, and bar service hours being the same as the hours of operation

** Stone Street Pedestrian Plaza is used every year

(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: Doris Jimenez Phone Number: 212- 344-0500

Alternate Contact: Ivan Mitankin Phone Number: 212-785-9200

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


Signed

1/21/21
Dated


MINVERA E. CHRISTOL
Notary Public, State of New York
Qualified in New York County
Reg. No. 01CH4928736
My Commission Expires July 31, 2022

Sworn to this 21 day of January 2021
Notary Public