

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

1- Applicant Name

2- Establishment Name (Corporate & DBA)

3- Address for Proposed License

4- Proposed Days/Hours of Operation

4.1 What floor(s) is the establishment on?

4.2 Any rooftop, terrace, or other outside usage?

5- Square Footage of Location

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

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

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 Any information provided herein is superseded by that described in the final stipulation sheet that will be agreed upon by the applicant and the Licensing and Permits Committee of Community Board 1.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, Mark Fox, as a qualified representative of entity to be determined, located at 515 Wheeler Avenue, New York, New York, agree to the following stipulations for the applicant's Method of Operation for their Tavern license

(1) My hours of operation will be 12pm-7pm Sunday – Thursday and 12pm-7pm 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): _____ 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 0 violations from previous establishments for which I have served as a principal.

(14) I will (additionally):

a. Keep the agreed to capacity of 50 at the premises

(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: Mark Fox Phone Number: 917-261-5495

Alternate Contact: _____ Phone Number: _____

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

[Signature]
Signed

5-19-2022
Dated



Sworn to this 19th day of May, 2022 [Signature]
Notary Public