

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

- 1- Applicant Name
Suco Hana, Inc
- 2- Establishment Name (Corporate & DBA)
Suco Hana, Inc DBA Sushi & Co
- 3- Address for Proposed License
67 Nassau Street, New York, NY 10038
- 4- Proposed Days/Hours of Operation 11:00am - 11:00pm Sunday-Saturday
- 4.1 What floor(s) is the establishment on? First Floor
- 4.2 Any rooftop, terrace, or other outside usage? None
- 5- Square Footage of Location
400 SF
- 6- Method of Operations (bar restaurant, Catering, etc)
Japanese Restaurant
- 7- Type of License (Full liquor/OP, beer and wine, etc.) Restaurant Wine License
- 7.1 Type of application (New, Alteration, Change in Method
of Operation, Corporate Change, Class Change)
New Application
- 8- Sidewalk Café? Yes/No
No
- 9- Type of Music? Live Recorded DJ
No
- 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
N/A

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 Any information provided herein is superseded by that described in the final stipulation sheet that will be agreed upon by the applicant and the Licensing and Permits Committee of Community Board 1.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, Jae Yu, as a qualified representative of Suco Hana, Inc., located at 67 Nassau Street, New York, New York, agree to the following stipulations for the applicant's Method of Operation for their Restaurant Wine 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): Japanese restaurant
_____ with full food service until _____ hour(s) before closing.
- (3) I will install soundproofing (please describe type and locations) None
- (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 11:30AM to 9:30 PM Sunday through Saturday
- (8) I will employ a doorman/security personnel on the following days and hours: No security personnel employed
- (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 NO violations from previous establishments for which I have served as a principal.
- (14) I will (additionally):

** The hours of operation and food service hours will be from 11AM to 11PM all days of the week, food service hours will be from 11AM to 10:30PM all days of the week

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

Name: Suyeoul Lee Phone Number: 646-799-9911

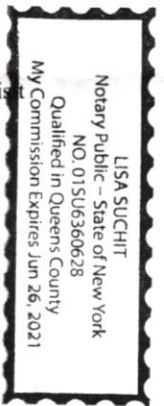
Alternate Contact: Suyeoul Lee Phone Number: 646-853-7083

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

Signed [Signature] Dated 10/8/2020

Sworn to this 8th day of October 2020

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 APQ 85 Broad NY, LLC
- 2- Establishment Name (Corporate & DBA) Le Pain Quotidien
- 3- Address for Proposed License 85 Broad Street, New York, NY 10004
- 4- Proposed Days/Hours of Operation Monday-Sunday 7am-8:30pm (closed to patrons at 7:30)
- 4.1 What floor(s) is the establishment on?
- 4.2 Any rooftop, terrace, or other outside usage?
- 5- Square Footage of Location Approx 7600 square feet- 3800/floor
- 6- Method of Operations (bar restaurant, Catering, etc) Restaurant
- 7- Type of License (Full liquor/OP, beer and wine, etc.) Restaurant Wine
- 7.1 Type of application (New, Alteration, Change in Method of Operation, Corporate Change, Class Change)
- 8- Sidewalk Café? Yes/No Yes- will be transferred.
- 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, JohnRigos, as a qualified representative of APQ 85 Broad NY, LLC, located at 85 Broad Street, New York, NY 10004, New York, New York, agree to the following stipulations for the applicant's Method of Operation for their Restaurant Wine license

- (1) My hours of operation will be 7am-8:30pm Sunday - Thursday and 7am-8:30pm 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): Bakery/Cafe Style with full food service until 1 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

(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. (French doors open during peak service hours)

(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-1 pm

(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):

** food service hours will be from 7AM to 7:30PM all days of the week, and bar service hours from 8AM to 7:30PM Monday through Saturday, and 10AM to 7:30PM on Sundays

*** The applicant will have delivery of supplies, goods and services overnight through a loading dock on a scheduled basis with the building team

**** The establishment has an existing sidewalk cafe permit that will be transferred upon SLA approval of the Restaurant Wine license

- Outdoor seating is limited to the area under the arcade for customers only, where the principal is neither permitted to place any furniture in the public park nor serve customers in the park

(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: Maria Mackie Phone Number: 212.505.5861

Alternate Contact: Marina Roulis Phone Number: 646-649-9810

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

Signed [Signature] Dated 9/28/20

Sworn to this 28th day of September 2020 Notary Public [Signature]

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.

MARINA ROULIS Notary Public, State of New York No: 30-4750452 Qualified in Nassau County Commission Expires July 31, 2021

Liquor License Application Questionnaire Summary
Revised 8/2019

- 1- Applicant Name *Rex Pipe Shop Inc.*
- 2- Establishment Name (Corporate & DBA)
Rex Club
- 3- Address for Proposed License
*126 Pearl Street
New York, N.Y. 10005*
- 4- Proposed Days/Hours of Operation
Sunday - Thursday 11am-12am, Friday-Saturday 11am-late
- 4.1 What floor(s) is the establishment on?
2nd floor
- 4.2 Any rooftop, terrace, or other outside usage?
No
- 5- Square Footage of Location
1,013 sq. ft.
- 6- Method of Operations (bar restaurant, Catering, etc)
Club
- 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? *No vent / Kitchen has no mechanical/electrical appliances*
- 12- Applicant's Previous Licensed Establishments and Addresses
*Barclay Rex - 90 Water Street New York, N.Y. 10004
Barclay Rex - 75 Broad Street New York, N.Y. 10004
Barclay Rex - 70 East 42nd Street New York, N.Y. 10165*

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.

I, Vincent Nastro, as a qualified representative of Rek Pipe Shop Inc.
located at 126 Pearl Street, New York, New York, agree to
the following stipulations for the applicant's Method of Operation for their full 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): private, members only cigar club
_____ 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 12 am Sun-Thurs and 1 am Fri-Sat. I will not have French doors or windows.
- (7) I will have delivery of supplies, goods and services during the hours of 9 am - 5 pm
- (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):

** The hours of operation will be from 11am-12am Monday through Thursday, 11am to 1am Friday and Saturday and 11am-9pm on Sundays. Food Service hours will be from 11am-11pm Sunday through Thursday and 11am to 12am Friday and Saturday. 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: Joanna Wbowska Phone Number: (347) 382-5964
Alternate Contact: Vanessa Nastro Phone Number: (914) 843-8225

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

Vincent Nastro
Signed _____ Dated 10/3/20

PETER J. CHO
NOTARY PUBLIC, STATE OF NEW YORK
NO. 01CH6308766
QUALIFIED IN WESTCHESTER COUNTY
MY COMMISSION EXPIRES JULY 28, 2022

Sworn to this 3 day of oct, 2020
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 Application Questionnaire Summary
Revised 8/2019

- 1- Applicant Name APQ Tribeca NY, LLC
- 2- Establishment Name (Corporate & DBA) Le Pain Quotidien
- 3- Address for Proposed License 81 West Broadway (aka 60Warren Street), New York, NY 10007
- 4- Proposed Days/Hours of Operation Monday-Sunday 7am-8:30pm
- 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 Ground floor- 2800 square feet
- 6- Method of Operations (bar restaurant, Catering, etc) Restaurant
- 7- Type of License (Full liquor/OP, beer and wine, etc.) Restaurant Wine
- 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? Existing vent
- 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, John Rigos, as a qualified representative of APQ Tribeca NY, LLC, located at 81 West Broadway (a/k/a 60 Warren Street), New York, New York, agree to the following stipulations for the applicant's Method of Operation for their Restaurant Wine license

- * (1) My hours of operation will be 7am-8:30pm Sunday – Thursday and 7am-8:30pm 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): Bakery/cafe with full food service until 1 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
- (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. (has double doors that are never propped 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 9PM - 4AM overnight
- (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):

* food service hours will be from 7AM to 7:30PM all days of the week, and bar service hours from 8AM to 7:30PM Monday through Saturday, and 10AM to 7:30PM on Sundays

(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: Maria Mackie Phone Number: 212.505.5861

Alternate Contact: Marina Roulis Phone Number: 646-649-9810

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

Signed [Signature] Dated 9/28/20

Sworn to this 20th day of September 2020 [Signature]
Notary Public

Community Board 1 requests that the SLA add these stipulations to the license of the above-notary public, State of New York stipulations and board resolution shall supersede all other documents.
MARINA ROULIS
Notary Public, State of New York
No. 30-4750452 REV. 12/18
Qualified in Nassau County
Commission Expires July 31, 2021

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

- 1- Applicant Name APQ South End Avenue NY, LLC
- 2- Establishment Name (Corporate & DBA) Le Pain Quotidien
- 3- Address for Proposed License 395-397 South End Avenue, New York, NY 10280
- 4- Proposed Days/Hours of Operation Monday-Friday 7am-8:30pm
- 4.1 What floor(s) is the establishment on? Ground floor
- 4.2 Any rooftop, terrace, or other outside usage? Currently a sidewalk cafe
- 5- Square Footage of Location 1170 square feet
- 6- Method of Operations (bar restaurant, Catering, etc) Restaurant
- 7- Type of License (Full liquor/OP, beer and wine, etc.) OP Restaurant Wine
- 7.1 Type of application (New, Alteration, Change in Method of Operation, Corporate Change, Class Change) Transfer Application
- 8- Sidewalk Café? Yes/No Yes- existing
- 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? Existing system
- 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, John Rigos, as a qualified representative of APQ South End Avenue NY, LLC, located at 395-397 South End Avenue, New York, New York, agree to the following stipulations for the applicant's Method of Operation for their transfer of Restaurant Wine license

- * (1) My hours of operation will be 7am-8:30pm Sunday – Thursday and 7am-8:30pm 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): Bakery/Cafe with full food service until 1 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

(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-11pm

(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):

* food service hours will be from 7AM to 7:30PM all days of the week, and bar service hours from 8AM to 7:30PM Monday through Saturday, and 10AM to 7:30PM on Sundays

** have open windows during the hours of 7AM -7:30PM

(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: Maria Mackie Phone Number: 212.505.5861

Alternate Contact: Marina Roulis Phone Number: 646-649-9810

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

Signed [Signature] Dated 9/28/20

Sworn to this 28th day of September, 2020
Notary Public

[Signature]
MARINA ROULIS
Notary Public, State of New York
No. 30-4750452
Qualified in Nassau County
Commission Expires July 31, 2021
Rev. 12/18

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