

Roongkant Manhattan Community Board 1 Liquor License Stipulations

I, X Preechathammarach, as a qualified representative of Lil Chef Mawa LLC, located at 27 Cliff Street, New York, New York, agree to

the following stipulations for the applicant's Method of Operation for their Restaurant license 12:pm to 1:am (Fri + Sat), 12:pm to 12:am (Sun - Thurs)

(1) My hours of operation will be \_\_\_\_\_ Sunday - Thursday and ~~Tue-Fri~~ <sup>(M)</sup> 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): Tiq with full food service until \_\_\_\_\_ 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 Acoustic

(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. closed

(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):


PA is 74 persons.  
Deliveries: 12:pm to 3:pm  
Acoustic live music.  
COFO pending.

(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: X Roongkant Preechathammarach Phone Number: X

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

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

X   
Signed

X 09-18-2019  
Dated

ANTHONY L. CARABALLO  
Notary Public, State of New York  
No. 24-4386989  
Qualified in Kings County  
Commission Expires December 22, 2019

Sworn to this 18th day of September, 2019  
Notary Public

**MANHATTAN COMMUNITY BOARD 1**  
**Liquor License Application Questionnaire Summary**  
**Revised 4/2018**

- 1- Applicant Name  
Roongkant Preechathammarach & David J. Louie
- 2- Establishment Name (Corporate & DBA)  
Lil Chef Mama LLC
- 3- Address for Proposed License  
27 Cliff Street, New York, NY 10038
- 4- Proposed Days/Hours of Operation  
Sunday-Thursday 12 PM to 12 AM  
Friday & Saturday 12PM to 1 AM
- 5- Square Footage of Location  
3,000
- 6- Method of Operations (bar restaurant, Catering, etc)  
Restaurant
- 7- Type of License (Full liquor/OP, beer and wine, etc.)  
Full liquor
- 8- Sidewalk Café? Yes  No
- 9- Type of Music ?  Live  Recorded  DJ  
(Acoustic dining on occasion)
- 10- Volume of Music?  Background  Other
- 11- Applicant's Previous Licensed Establishments and Addresses  
Cafe Sage-108 John Street-Full Liquor-License serial # 1127096  
Thai Sliders-108 John Street-Full Liquor-License serial # 1279798

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.

10/2/19  
*[Signature]*

Manhattan Community Board 1 Liquor License Stipulations

I, *[Signature]*, as a qualified representative of *d/b/a TBD*, located at *28 Liberty Street*, New York, New York, agree to

the following stipulations for the applicant's Method of Operation for their *Restaurant/Catering* license *11:am to 12:am (Sun to Thurs), 11:am to 1:am (Fri. + Sat.)*

(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/Catering* 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 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 \_\_\_\_\_ violations from previous establishments for which I have served as a principal.

(14) I will (additionally):

*- Only 10 buy-outs per year allowed. (Buy Out = Event)  
- 6:am delivery only at loading dock 3 stories below ground.*

(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: *x RICHARD PORTIUS* Phone Number: *x 212-602-4070*

Alternate Contact: *917-834-1415* Phone Number: \_\_\_\_\_

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

*[Signature]* Dated *x 9/18/19*

Embossed Hereon Is My State Of New Jersey Notary Public Seal My Commission Expires December 16, 2019 MARGARET A KELLEHER

Signed *[Signature]* day of *10/2/19* *October 2019* *Margaret A. Kelleher*  
Notary Public

**MANHATTAN COMMUNITY BOARD 1**

**Liquor License Application Questionnaire Summary**

**Revised 4/2018**

- 1- Applicant Name  
Legends Hospitality, LLC
- 2- Establishment Name (Corporate & DBA)  
Liberty Food Hall
- 3- Address for Proposed License  
28 Liberty Street, New York, New York 10005
- 4- Proposed Days/Hours of Operation  
7 Days a Week, 6am – 1am
- 5- Square Footage of Location  
37,047 square feet
- 6- Method of Operations (bar restaurant, Catering, etc)  
Food Hall – Bar, Restaurant, Private Events
- 7- Type of License (Full liquor/OP, beer and wine, etc.)  
Full Liquor on premise.
- 8- Sidewalk Café? Yes/ No
- 9- Type of Music?  Live  Recorded  DJ
- 10- Volume of Music?  Background  Other
- 11- Applicant's Previous Licensed Establishments and Addresses  
See attached Additional New York Venues

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 Application Questionnaire Summary**  
**Revised 4/2018**

- 1- Applicant Name  
30 Hudson Street, LLC
- 2- Establishment Name (Corporate & DBA)  
Pending
- 3- Address for Proposed License  
30 Hudson Street
- 4- Proposed Days/Hours of Operation  
Monday - Sunday 12pm - 11pm
- 5- Square Footage of Location  
2800 square feet
- 6- Method of Operations (bar restaurant, Catering, etc)  
Full service restaurant
- 7- Type of License (Full liquor/OP, beer and wine, etc.)  
Full liquor
- 8- Sidewalk Café? Yes/No  
No
- 9- Type of Music ?  Live  Recorded  DJ
- 10- Volume of Music?  Background  Other
- 11- Applicant's Previous Licensed Establishments and Addresses  
Restaurant Marc Forgione, 134 Reade Street

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, Christopher Bluml as a qualified representative of 30 Hudson Street, LLC (DBA + TBD) located at 30 Hudson Street, New York, New York, agree to

the following stipulations for the applicant's Method of Operation for their \_\_\_\_\_ license

- 12:pm to 11:pm all days
- (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): \_\_\_\_\_ 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 MA 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: NO
- (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 \_\_\_\_\_ violations from previous establishments for which I have served as a principal.
- (14) I will (additionally):

Deliveries only 7:am to 10:pm

(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: Christopher Bluml Phone Number: 646 773 9664

Alternate Contact: Marg Forgiore Phone Number: 646 709 0134

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

Signed: [Signature] Dated: 9/18/19

Sworn to this 19<sup>th</sup> day of September 2019 [Signature]  
Notary Public THOMAS J. McCALLEN  
Notary Public, State of New York  
No. 027065067357  
Qualified in Nassau County  
Commission Expires 10/15/22

**MANHATTAN COMMUNITY BOARD 1**  
**Liquor License Application Questionnaire Summary**  
**Revised 4/2018**

- 1- Applicant Name  
Omarie Georges
- 2- Establishment Name (Corporate & DBA)  
TBD
- 3- Address for Proposed License  
32 Cliff Street, New York, NY 10038
- 4- Proposed Days/Hours of Operation  
Sunday to Wednesday: 11am - 1am; Thursday - Saturday: 11am - 2am
- 5- Square Footage of Location  
3700 sq ft - Includes basement for storage
- 6- Method of Operations (bar restaurant, Catering, etc)  
Bar/Tavern
- 7- Type of License (Full liquor/OP, beer and wine, etc.)  
Full Liquor
- 8- Sidewalk Café? Yes/No  
No
- 9- Type of Music ?  Live    Recorded    DJ
- 10- Volume of Music?  Background    Other
- 11- 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, X Donald J. Trump, Jr., as a qualified representative of The Vaults at 40 Wall located at 40 Wall Street, New York, New York, agree to

the following stipulations for the applicant's Method of Operation for their \_\_\_\_\_ license

8:am to 12:am (Mon. to Sat.), 10:am to 12:am (Sun.) \* these are liquor service hours. premise s will operate at 7:00am daily  
(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/Cafe with full food service until \_\_\_\_\_ 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 N/A 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 7:am - 9:am

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

(14) I will (additionally):

Basement space  
Small kitchen with light fare  
~~No kitchen, coffee, food prep area.~~  
Live acoustic music.

(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: X Dani Taylor Phone Number: X 212-715-7296

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

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

X \_\_\_\_\_ X 9/23/19  
Signed Dated

Sworn to this 23 day of September, 2019 YM - S Z  
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.

MARIA ENRIQUEZ Rev. 12/18  
Notary Public, State of New York  
Registration #01EN6282871  
Qualified In Queens County  
Commission Expires May 28, 2021



**MANHATTAN COMMUNITY BOARD 1**  
**Liquor License Application Questionnaire Summary**  
**Revised 4/2018**

- 1- Applicant Name F&B 40 Wall LLC
  
- 2- Establishment Name (Corporate & DBA) F&B 40 Wall LLC d/b/a The Vaults at 40 Wall
  
- 3- Address for Proposed License 40 Wall Street, New York, NY 10005
  
- 4- Proposed Days/Hours of Operation 7AM - 12AM Daily
  
- 5- Square Footage of Location Approximately 6,000 sf
  
- 6- Method of Operations (bar restaurant, Catering, etc) Tavern/Cafe
  
- 7- Type of License (Full liquor/OP, beer and wine, etc.) On-Premises Liquor
  
- 8- Sidewalk Café? Yes/No
  
- 9- Type of Music?  Live  Recorded  DJ  
Acoustic
  
- 10- Volume of Music?  Background  Other
  
- 11- Applicant's Previous Licensed Establishments and Addresses  
See rider Annexed

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, Stefano Stefanov, as a qualified representative of Elmwood Ventures LLC, located at 62 Thomas Street (Assunta) (Buddha), <sup>2 Floors</sup> <sub>Basement</sub>, New York, New York, agree to the following stipulations for the applicant's Method of Operation:

(1) My hours of operation will be 11:30am - 11:30pm Sunday - Thursday and 10:am - 12:am Friday - Saturday (I understand this to mean that all patrons will be cleared from the establishment at the specified hour). For both Assunta and Buddha

(2) I will operate a full-service restaurant, (please describe type of restaurant): Italian Restaurant and Buddha Bar (2 sections) with full food service until \_\_\_\_\_ hour(s) before closing.

(3) I will install soundproofing (please describe type and locations) Applicant states that they are soundproofing the ceiling.

(4) I will have: DJs  Yes  No Live music  Yes  No Promoted events  Yes  No No Outside Promoters  Yes  No Cover fee events  Yes  No Scheduled performances  Yes  No

(5)  I will play recorded background music only, consisting of CD played on computer. If it can be heard outside, or by neighbors, it is not background music.

(6) I will close all doors and windows by Windows will be closed all days and times Sun-Thurs and \_\_\_\_\_ Fri-Sat.  I will not have French doors or windows.

(7) I will employ a doorman/security personnel on the following days and hours: For Crowd and Traffic

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

(9) 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.

(10) I intend to apply for a sidewalk cafe license.  Yes  No

(11) I intend to apply for a cabaret license.  Yes  No Will there be dancing? No

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

(13) 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: \_\_\_\_\_

(14) I will (additionally): No velvet ropes or private parties. Will employ "security" company to control traffic and crowds and oversee employees.

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

Signed [Signature]

Dated 19/09/2019

Sworn to this 19th day of September, 2019

[Signature]  
Notary Public

FRANK W. PANLLO  
Notary Public, State of New York  
No. 24794182  
Qualified in Kings County  
Commission Expires April 30, 2022

Community Board 1 requests that the SLA add these stipulations to the license of the above-mentioned applicant. Rev. 3/17

- 19 Sept 2019 ADDITIONS:
- 6 security guards employed
  - reservations will be taken
  - traffic control practice for parties
  - waiting areas inside for both areas
  - smoking/loud talking monitoring

**MANHATTAN COMMUNITY BOARD 1**  
**Liquor License Application Questionnaire Summary**  
**Revised 4/2018**

1- Applicant Name

Stefan Stefanov

2- Establishment Name (Corporate & DBA)

Elmwood Ventures LLC dba Buddha Bar/  
Assunta Madre

3- Address for Proposed License

62 Thomas Street

4- Proposed Days/Hours of Operation

SUN-THURS 11:30 am - 11:30 pm  
Fri/Sat 10:00 am - 12:00 am

5- Square Footage of Location

1,200 sf

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

Restaurant

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

Full liquor

8- Sidewalk Café? Yes/No

No

9- Type of Music?  Live  Recorded  DJ

10- Volume of Music?  Background  Other

11- Applicant's Previous Licensed Establishments and Addresses

N/A

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Manhattan Community Board 1 Liquor License Stipulations

I, X Grant Herlitz, as a qualified representative of Pier 17 GR Restaurant LLC & Seaport F&B LLC, located at 89 South Street, Building A 101/102, New York, New York, agree to

the following stipulations for the applicant's Method of Operation for their On-Premises Liquor license

10:am to 2:am (all days)

(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 / chophouse with full food service until hours before closing.

(3) I will install soundproofing (please describe type and locations) subwoofers

(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 N/A Fri-Sat.  I will not have French doors or windows.

(7) I will have delivery of supplies, goods and services during the hours of 5am st loading dock

(8) I will employ a doorman/security personnel on the following days and hours: No

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

(14) I will (additionally):

No use of roof.

(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: X Grant Herlitz Phone Number: X 214-741-7744

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

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

X [Signature]  
Signed

X 9/19/2019  
Dated

Sworn to this 19 day of September, 2019  
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. Rev. 12/18



**MANHATTAN COMMUNITY BOARD 1**  
**Liquor License Application Questionnaire Summary**  
**Revised 4/2018**

- 1- Applicant Name Pier 17 GR Restaurant LLC & Seaport F&B LLC
- 2- Establishment Name (Corporate & DBA)
- 3- Address for Proposed License                      89 South Street, Building A 101/102  
New York, NY 10038
- 4- Proposed Days/Hours of Operation                      Mon - Sun 10am - 2am
- 5- Square Footage of Location                      8868 sq ft
- 6- Method of Operations (bar restaurant, Catering, etc)                      Restaurant
- 7- Type of License (Full liquor/OP, beer and wine, etc.)                      Full liquor/OP
- 8- Sidewalk Café? Yes/ No
- 9- Type of Music ?     Live     Recorded     DJ
- 10- Volume of Music?     Background                       Other
- 11- Applicant's Previous Licensed Establishments and Addresses

Several affiliated licenses throughout Seaport

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Manhattan Community Board 1 Liquor License Stipulations

I, Amit Fridman, as a qualified representative of AVS International Retail, Inc. located at 96 Lafayette Street, New York, NY 10012, 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 10AM - 12:30AM Sunday - Thursday and 10AM - 1:30 AM 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): no Bar - Tavern 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 9PM Sun-Thurs and 10PM 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 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 \_\_\_\_\_ 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: Amit Fridman Phone Number: (410) 227-2745

Alternate Contact: Zac Segal Phone Number: (917) 941-8171

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

Signed \_\_\_\_\_ Dated 9/18/19

Sworn to this 18 day of Sept, 2019 Notary Public

MAX BOOKMAN  
NOTARY PUBLIC-STATE OF NEW YORK  
NO. 02B06334211  
QUALIFIED IN NEW YORK COUNTY  
MY COMMISSION EXPIRES 12-14-2019

**MANHATTAN COMMUNITY BOARD 1**  
**Liquor License Application Questionnaire Summary**  
**Revised 4/2018**

1- Applicant Name

**AVS International Retail, Inc.**

2- Establishment Name (Corporate & DBA)

**The Backyard Game Lodge**

3- Address for Proposed License

**96 Lafayette Street, New York, NY 10013**

4- Proposed Days/Hours of Operation

**Sunday - Thursday: 10 AM - 12:30 AM**

**Friday - Saturday: 10 AM - 1:30 AM**

5- Square Footage of Location

**8000 sqft**

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

**Game Lounge**

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

**Full Liquor**

8- Sidewalk Café? Yes/No  No

9- Type of Music ?  Live  Recorded  DJ

10- Volume of Music?  Background  Other

11- 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, Igor Kantor as a qualified representative of Drop Coffee Company located at 111 John Street, New York, New York, agree to

the following stipulations for the applicant's Method of Operation for their Restaurant license

12:pm to 1:am (Fri + Sat), 12:pm to 12:am (Sun) 12:pm - 12:am (Mon - Thurs)  
(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 / Coffee Shop with full food service until \_\_\_\_\_ 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 closed 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 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 \_\_\_\_\_ violations from previous establishments for which I have served as a principal.

(14) I will (additionally):  
Delivery: 9:am - 10:am  
Background music.

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OCT 11 2019  
Manhattan Community Board 1  
Centre St, Rm 2202N NY, NY  
212-669-7970

(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: Igor Kantor Phone Number: 347-782-0830

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

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

[Signature]  
Signed

9/18/19  
Dated

Sworn to this 24 day of September 2019  
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.

Bryan R. Williams  
Notary Public, State of New York  
No. 02W14978084  
Qualified in Westchester County  
Commission Expires February 25, 2016 23



**MANHATTAN COMMUNITY BOARD 1**  
**Liquor License Application Questionnaire Summary**  
**Revised 4/2018**

- 1- Applicant Name *Felix Komrash*
- 2- Establishment Name (Corporate & DBA)  
*The Drop Coffee Company LLC*  
*DBA: The Drop ; Kissaki*
- 3- Address for Proposed License  
*111 John St.*  
*NY, NY 10038*
- 4- Proposed Days/Hours of Operation  
*7am - 12 Sun - Thurs*  
*7am - 1am Fri & Sat*
- 5- Square Footage of Location  
*1,800*
- 6- Method of Operations (bar restaurant, Catering, etc)  
*Coffee shop in the front*  
*sushi ~~bar~~ restaurant in the back*
- 7- Type of License (Full liquor/OP, beer and wine, etc.)  
*Full liquor*
- 8- Sidewalk Café? Yes  No
- 9- Type of Music?  Live  Recorded  DJ
- 10- Volume of Music?  Background  Other
- 11- Applicant's Previous Licensed Establishments and Addresses  
*NA*

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 Application Questionnaire Summary**  
**Revised 4/2018**

- 1- Applicant Name  
Lam Pearl Street Hotel, LLC
  
- 2- Establishment Name (Corporate & DBA)  
Lam Pearl Street Hotel, LLC
  
- 3- Address for Proposed License  
213-221 Pearl Street, New York, NY 10038
  
- 4- Proposed Days/Hours of Operation  
Sunday - Thursday: 7:00am to 2:00am  
Friday & Saturday: 7:00am to 2:00am
  
- 5- Square Footage of Location  
Dining Area: 2800  
Bar Area: 700  
Kitchen Area: 1000
  
- 6- Method of Operations (bar restaurant, Catering, etc)  
Hotel
  
- 7- Type of License (Full liquor/OP, beer and wine, etc.)  
Full Liquor
  
- 8- Sidewalk Café? Yes/No  
No
  
- 9- Type of Music ?  Live  Recorded  DJ
  
- 10- Volume of Music?  Background  Other
  
- 11- Applicant's Previous Licensed Establishments and Addresses  
Please see attached i

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, X Hung Luk, as a qualified representative of Lam Pearl Street Hotel, located at 213 & 221 Pearl Street, New York, New York, agree to

the following stipulations for the applicant's Method of Operation for their Restaurant/Catering license

8:am to 2:am (Mon to Sat), 10:am to 2:am (Sch.) (Does not include mix-bars)

(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): Hotel, Restaurant, Room mix-bar, 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 <sup>closed</sup> 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 7:am

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

(14) I will (additionally):

No Liquor, Beer, or wine outdoors on 5th Floor.  
Open to the public is on 2nd Floor. (OP License)  
Mix-Bars are in hotel rooms.

(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: X Arthur Cheung Phone Number: X 646 930 2520

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

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

X  
Signed [Signature]

X 9-18-19  
Dated

Sworn to this 18th day of [Signature]  
Notary Public

**ELKE HOFMANN**  
Notary Public, State of New York  
No. 02HO6176638  
Qualified in Kings County  
Commission Expires April 27, 2022

**MANHATTAN COMMUNITY BOARD 1**  
**Liquor License Application Questionnaire Summary**  
**Revised 4/2018**

1- Applicant Name

Ryan Simonetti

2- Establishment Name (Corporate & DBA)

225 Liberty Location, LLC dba For Five Coffee Roasters

3- Address for Proposed License

225 Liberty Street, Lobby Level

4- Proposed Days/Hours of Operation

Monday - Friday: 7am - 7pm; Saturday: 9am - 4pm

5- Square Footage of Location

Approx. 1600

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

Cafe

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

Beer, Wine & Cider

8- Sidewalk Café? Yes/No

No

9- Type of Music ?  Live  Recorded  DJ

10- Volume of Music?  Background  Other

11- Applicant's Previous Licensed Establishments and Addresses

Downtown Locations - 101 Greenwich Street, 32 Old Slip, One Liberty Plaza

Midtown West Locations - 117 W 46th Street, 810 Seventh Ave., 75 Rockefeller Plaza

Midtown East Locations - 730 Third Ave., 101 Park Ave., 237 Park Ave.

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 Application Questionnaire Summary**  
**Revised 4/2018**

1- Applicant Name

Ryan Simonetti

2- Establishment Name (Corporate & DBA)

225 Liberty Location, LLC dba Convene

3- Address for Proposed License

225 Liberty Street, 1st & Lobby Level

4- Proposed Days/Hours of Operation

Monday - Thursday: 8am - 11pm; Friday - Saturday: 8am - 12am; Sunday: 8am - 11pm

5- Square Footage of Location

Approx. 73,000

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

Corporate Meetings & Special Events Venue (Catering Establishment License)

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

Full liquor

8- Sidewalk Café? Yes/No

No

9- Type of Music ?  Live  Recorded  DJ

10- Volume of Music?  Background  Other

11- Applicant's Previous Licensed Establishments and Addresses

Downtown Locations - 101 Greenwich Street, 32 Old Slip, One Liberty Plaza

Midtown West Locations - 117 W 46th Street, 810 Seventh Ave., 75 Rockefeller Plaza

Midtown East Locations - 730 Third Ave., 101 Park Ave., 237 Park Ave.

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, Roberto Passon, as a qualified representative of 225 W Bway Corp (Attraversa) located at 225 West Broadway, New York, New York, agree to

the following stipulations for the applicant's Method of Operation for their \_\_\_\_\_ license

→ Sidewalk Cafe Hours 11am - 11pm (Sun to Thur) / 11:30am to 12am (Fri + Sat)

(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): M O F O Same 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 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 \_\_\_\_\_ violations from previous establishments for which I have served as a principal.

(14) I will (additionally):

- Sidewalk Cafe (Between White & Franklin)
- 3 Tables will extend 7 feet from building lot line  
6 seats
- Refer to Liquor licence stipulations sheet for other info

(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: Roberto Passon Phone Number: (917) 587-6799

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

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

Signed Roberto Passon

Dated 9-27-19

Sworn to this 27 day of September 2019

Dad [Signature]  
Notary Public

DONDRE STEVEN PERRY  
NOTARY PUBLIC-STATE OF NEW YORK  
No. 01PE6368561  
Qualified in New York County  
My Commission Expires 12-18-2021

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, Thomas Mikolasko, as a qualified representative of TM Restaurant Group LLC dba TBD, located at 279 Church Street @ White Street, New York, New York, agree to the following stipulations for the applicant's Method of Operation for their Full On Premises Liquor license 10 am to 12 am (Sun); 8 am to 1 am (Fri - Sat); 8 am to 12 am (Mon - Thurs)

- (1) My hours of operation will be see above Sunday - Thursday and see above 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): French Diner  
with full food service until \_\_\_\_\_ hour(s) before closing.
- (3) I will install soundproofing (please describe type and locations): will install soundproofing in ceiling
- (4) I will have: DJ:  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 7 am - 7 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 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 \_\_\_\_\_ violations from previous establishments for which I have served as a principal
- (14) I will (additionally):

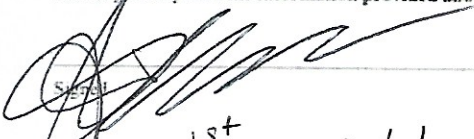
No live music, no DJ.

(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: Thomas Mikolasko Phone Number: (917) 825-9831

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

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

  
Sworn to this 1st day of October, 2019  
Notary Public

10/1/19  
Dated



**KAISH M BHUIYAN**  
NOTARY PUBLIC, STATE OF NEW YORK  
**01BH6372950**  
QUALIFIED IN NEW YORK COUNTY  
COMMISSION EXPIRES APRIL 02, 2022

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 4/2018**

- 1- Applicant Name  
Thomas Mikolasko
- 2- Establishment Name (Corporate & DBA)  
TM Restaurant Group LLC
- 3- Address for Proposed License  
279 Church Street, New York, NY 10013
- 4- Proposed Days/Hours of Operation  
Sunday to Thursday: 7am - 1am; Friday - Saturday: 7am - 2am
- 5- Square Footage of Location  
Approx. 3750 sq ft - Includes basement for kitchen and storage
- 6- Method of Operations (bar restaurant, Catering, etc)  
Restuarant
- 7- Type of License (Full liquor/OP, beer and wine, etc.)  
Full Liquor
- 8- Sidewalk Café? Yes/No  
No
- 9- Type of Music ?  Live  Recorded  DJ
- 10- Volume of Music?  Background  Other
- 11- 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.