

THE CITY OF NEW YORK  
MANHATTAN COMMUNITY BOARD NO. 3  
9 East 4th Street - New York, NY 10003  
Phone: (212) 533-5300 - Fax: (212) 533-3659  
www.cb3manhattan.org - info@cb3manhattan.org

Dominic Pisciotta, Board Chair

Susan Stetzer, District Manager

**Community Board 3 Liquor License Application Questionnaire**

Please complete and return (**with requested diagram**) to the Community Board office by fax or email. In addition, bring **6 copies (double sided)** plus supporting material requested to the meeting. Failure to complete and return this form on time will result in your item being placed at the end of the agenda. **Application must be complete to be heard, including petitions and all items on check list below. Use N/A for answer if appropriate.**

Conspicuously display the enclosed posters on the outside of your establishment for **7 days** prior to the meeting. Bring a photo with a newspaper showing date as proof of the posting.

Check which you are applying for:  new liquor license  upgrade of an existing liquor license  
 alteration of an existing liquor license  transfer of an existing liquor license

If applying for transfer, you must bring letter from current owner confirming that you are buying business.

Type of license: OIP Is location currently licensed?  Yes  No

If alteration, describe nature of alteration: \_\_\_\_\_

Previous or current use of the location: Restaurant

Corporation and trade name of current/previous license: STANDARD NOTIONS, INC (PALADAR)  
(Imperial Tavern)

Please bring the following items to the meeting:

**NOTE: ALL ITEMS MUST BE SUBMITTED FOR APPLICATION TO BE CONSIDERED.**

- Photographs of the inside and outside of your establishment;
- Schematics/floor plans of the inside of your establishment;
- If a restaurant, please include a proposed menu (including drink menu);
- Petition in support of proposed business or change in business with signatures from residential tenants at location and in surrounding buildings and also letter from block association if one exists. E-mail the CB office at [info@cb3manhattan.org](mailto:info@cb3manhattan.org) for help to find block associations. Petition must give proposed hours and method of operations. For example: restaurant, sports bar, combination restaurant/bar.  
**Petitions are required and application will not be heard without petitions.**
- Photographs of proof of conspicuous posting with newspaper showing date.

**APPLICANT:**

Name of applicant and all principals: Simon Ribok, Michael Auerbach,

Kenny Siegal, Arturo Carlo Samperi Malagnino

Trade name (DBA): 161 Ludlow Food, LLC

Premises address: 161 LUDLOW STREET

Between what streets: Houston / Stanton

**PREMISES:**

Type of building and number of floors: Six story Brick walk-up.

Prior use of premises: Restaurant

Any outside area or sidewalk cafe used for the sale or consumption of alcoholic beverages? (includes roof & yard)  Yes  No If Yes, describe and show on diagram: \_\_\_\_\_

Does premises have a valid Certificate of Occupancy and all appropriate permits?  Yes  No

Do you plan to apply for Public Assembly permit?  Yes  No

Zoning designation: NA Maximum number of persons that can legally occupy the premises? 74 Number of tables? 12 Number of seats at tables? 48

**BARS:**

How many \*stand-up bars/ bar seats are located on the premises (and how many seats)? Two (12, 6)

How many service bars? NONE

Describe all bars (length, shape and location): FRONT (L-SHAPE, 24') BACK (-, 8')

Any food counters?  Yes  No If Yes, describe: \_\_\_\_\_

\* A **stand up bar** is any bar or counter (whether seating or not) over which a member of the public can order, pay for and receive an alcoholic beverage.

**KITCHEN:**

Does premises have a  full kitchen or  food preparation area? (If any, show on diagram)

Is food available for sale?  Yes  No If yes, describe type of food and submit a menu menu submitted

**PROPOSED METHOD OF OPERATION:**

What type of establishment will this be? (i.e.: restaurant, tavern, sports bar, etc.) Restaurant

Will any other business besides food or alcohol service be conducted at said premises?  Yes  No

If yes, details: \_\_\_\_\_

What are the proposed days/hours of operation? (Specify days and hours each day)

SUN-SAT, 9am-4am (as per previous owner/operators schedule)

Will the business employ a manager?  Yes  No

How many employees? Eight

Will there be security personnel?  Yes  No (If Yes, how many?) \_\_\_\_\_

Do you  have or  plan to install  French doors,  accordion doors, or  windows?  none of these

Will there be TV's?  Yes  No (If Yes, how many?) \_\_\_\_\_



If there are block associations or tenant associations in the immediate vicinity of your location, you must contact them. **Please attach proof (copies of letters and poster) that you have advised these groups of your application. Petitions should clearly state the name, address, license for which you are applying, and the hours and method of operation of your establishment at the top of each page.** (Attach additional sheets of paper as necessary). You may contact the Community Board at [info@cb3manhattan.org](mailto:info@cb3manhattan.org) for any contact information that is on file.

#### **INFORMATION REGARDING NEARBY LOCATIONS:**

Premises is within a 500 foot radius of three or more establishments with OP license.  Yes  No

Premises is within 200 feet of any school or place of worship?  Yes  No

If there is a school place of worship within 200 feet of your premises on the same block, submit a block plot diagram or area map showing its location in proximity to your applicant premises (8 1/2" x 11") and indicate the distance and name and address.

Notes There are seventeen (17) liquor licensed establishments on Ludlow Street between Seventeen (17) liquor licensed establishments on Ludlow Street between Houston and Rivington Streets, as well as between twenty-three (23) and thirty (30) licensed establishments within five hundred (500) of this location, the majority of which provide some food service.





