

THE CITY OF NEW YORK MANHATTAN COMMUNITY BOARD NO. 3

59 East 4th Street - New York, NY 10003
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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.

be complete to be neard, including possible
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: I 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: OP Been wine + Lyack Is location currently licensed? • Yes • Yes
If alteration, describe nature of alteration:
Previous or current use of the location: RETAIL (TROVISOS)
Previous or current use of the location: Corporation and trade name of current/previous license: WA
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 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: G2 / 100/100 ST INC.
Photographs of proof of conspicuous posting with newspaper showing date. APPLICANT: Name of applicant and all principals: Tomas Dyskiewicz
Trade name (DBA): 95 De LANCOY STREET MY 4 (0002
Premises address: 95 CCAVICOT
Between what streets: <u>LUDIOW</u> + <u>OII Chaua</u> 37.

Revised: April 2011

Aug 29 11 11:30a Vidal 18882847525 43 Ludlow SIAnc (v = 51 = 18/ds) PREMISES:

TREWISES: (K-7 El STUR BIOS)
Type of building and number of floors: $(K-2F1 \text{ STove Blds})$
Prior use of premises: NOTAIL
Any outside area or sidewalk cafe used for the sale or consumption of alcoholic beverages? (includes roof &
Any outside area or sidewalk cafe used for the sale of consumption of alcohold (en closed) yard) Yes \(\subseteq \text{No If Yes, describe and show on diagram: } \) Roof Tol (en closed) No
The district of Court of Court and all appropriate Dettities;
Do you plan to apply for Public Assembly permit:
the premises? 2nd F/z Number of tables? 12 Number of seats at tables? 79
the premises? Ing F/r Number of tables? 12 Number of seats at tables? 46 BARS: Number of tables 23 85 Chairs 2nd F/r (1)
How many *stand-up bars/ bar seats are located on the premises (and how many seats)? 3 rd Flx (1)
How many service bars? Note Describe all bars (length, shape and location): 2nd Fin. 17' 758 ods 3rd Fl. 27' 103
Describe all bars (length, shape and location): 2/14 1/C 1/4 1/4 1/C 1/4
Any food counters? Yes No If Yes, describe:
* A <u>stand up bar</u> 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
Spanish / Europear TAPAS
Spanish Jeaupa 1. F.
A CONTRACTOR OF OPERATIONS
PROPOSED METHOD OF OPERATION:
What type of establishment will this be? (i.e.: restaurant, tavern, sports bar, etc.)
Will any other business besides food or alcohol service be conducted at said premises? Yes
What are the proposed days/hours of operation? (Specify days and hours each day) MON - San
What are the proposed days/hours of operation? (Specify days and hours each day)
Will the business employ a manager?
How many employees?
Will there be security personnel?
Do you □ have or □ plan to install □ French doors, □ accordion doors, or □ windows? □ none of these
Do you have or he plan to install herench doors, he accordion doors, or he will be a second on doors, or he will be a second of the second of
Will there be TV's? ☐ Yes ☐ No (If Yes, how many?)
Revised: April 2011

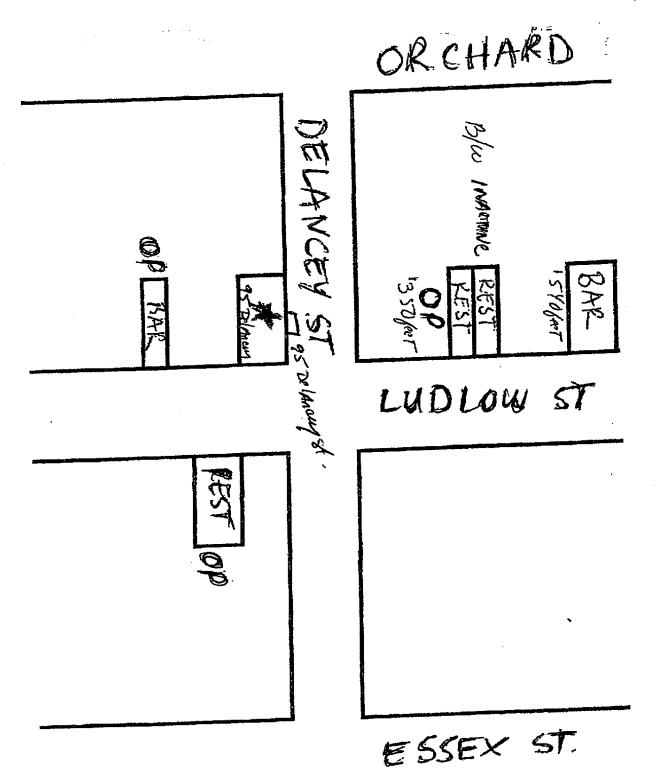
		4	
Will premises have music? ☐ Yes ☐ No	oksa	oud	
		luke box 🔏 Ta	nes/CDs
Volume level: \[\int \text{Background (quiet)} \int \text{En} \]	tertainment l	evel	
Do you have or plan to install sound-proofing? Please description	ribe your sou	nd system:	UISC_
Will you host □ promoted events, □ scheduled performances or	☐ any event	at which a cover	fee is charged?
Do you have plans to manage or address vehicular traffic and croestablishment?			
Is this establishment wheel chair accessible?	☐ Yes	□ No	BACILICAL
Has this corporation or any principal been licensed previously?	☐ Yes	Q NO	•
If yes, please indicate name of establishment:		<u> </u>	
Address:	Commu	ınity Board #	
Dates:	·		-
If you answered "Yes" to the above question, please provide a let history of complaints or other comments. Using the diagram below as an example, attach a separate similar address) and total number of establishments selling/serving beer each direction. Please indicate whether establishments have Ondiagram. Please label streets and avenues and identify your locat indicate it with a [*]. Use the letters to indicate Bar, Restaurant questionnaire to the Community Board before the meeting.	diagram that, wine (B/W) Premises (OF ion near the to, etc. The diagram)	t indicates the loc or liquor (OP) for P) licenses by circ middle of the diagon agram must be su	eation (name and or 2 blocks in cling the letter on gram and bmitted with the
Bar (B) Hotel Restaurant (I OPB/W	R) '	Sidewalk Ca OPB/W	
Example:			
BGBSRGBRB BRSGBBBRB BRGSBBBRB B*RSGRBBB		See ATT	Jehnl Ayuns
How many licensed establishments are within 1 block?	2		
How many licensed establishments are within 500 feet?	<u>3</u>		
How many within 500 feet are On-Premises (OP) liquor licenses	? 3		

Premises is within a 500 foot radius of three or more establishments with OP license. Yes

Premises is within 200 feet of any school or place of worship?

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.

18882847525



93 Ludlow St. Onc.

LISTING OF ESTABLISHMENTS WITH SLA Liquor Licenses Within (2) Blocks within 500 feet. of 95 Delancey St. NY, NY

- 1. Kuma Inn 113 Ludlow St NY,NY 10002 (RW inactive)
- 2. Chloe 81 81 Ludlow St. NY, NY 10002 OP
- 3. Los Feliz Restaurant 109 Ludlow St. NY,NY 10002 OP
- 4. Hotel Chantelle Restaurant 92 Ludlow St. NY NY 10002 OP

PUBLIC INTEREST STATEMENT:

The opening of this new FIRST CLASS Restaurant with 2 floors and an enclosed Rooftop Garden dining / seating area will provide a new economic vitality and development to this location, which has been vacant for an extended period of time.

This Establishment is located at the corner of DELANCEY and LUDLOW St. . .The building Façade will be renovated , from it current deteriorated state. This new business will provide Increase Retail Diversity , as the menu will offer Spanish/ European Tapas dishes .