

THE CITY OF NEW YORK MANHATTAN COMMUNITY BOARD NO. 3

59 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 bring the following items to the meeting:

	E: ALL ITEMS MUST BE SUBMITTED FOR APPLICATION TO BE CONSIDERED.						
	Photographs of the inside and outside of the premise;						
	A proposed food and or drink menu;						
	Petition in support of proposed business or change in business with signatures from						
residential tenants at location and in buildings adjacent to, across the street from and behind							
	your proposed location. Petition must give proposed hours and method of operation. For						
0	example: restaurant, sports bar, combination restaurant/bar.						
_	Letter of notice of proposed business to block, tenant or neighborhood association if one exists. E-mail the CB3 office at info@cb3manhattan.org for help to find block associations.						
_							
	indicating history of complaints and other comments						
Chec	k which you are applying for:						
	new liquor license upgrade of an existing liquor license						
	□ alteration of an existing liquor license □ sale of assets						
	□ corporate change						
If an	plying for transfer, you must bring letter from current owner confirming that you are						
buyi	ng business or have the seller come with you to the meeting.						
buyi Type	ng business or have the seller come with you to the meeting. of license: Is location currently licensed? Yes No						
Type If alt	ng business or have the seller come with you to the meeting. of license: Is location currently licensed? eration, describe nature of alteration:						
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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:
Rooftop Garden 6 Tables 12 Seats
Does premise have a valid Certificate of Occupancy and all appropriate permits, including certificate of occupancy of back or side yard intended for commercial use? Yes No Indoor Certificate of Occupancy 150 Outdoor Certificate Ou
Zoning designation (using our website): 5 5 6
Is this premise wheel chair accessible?
PROPOSED METHOD OF OPERATION:
What type of establishment will this be (i.e.: restaurant, bar, performance space, club, hotel)?
Will any other business besides food or alcohol service be conducted at premise? Wes No If yes, please describe what type: Lodging What are the proposed days/hours of operation? (Specify days and hours each day and hours of
outdoor space] Hote will be spirated 24 hours: elabol serve 1200 pm - 12:00 AM SUN-WED: 12:00 pm - 2:00 am Thus fori
Number of tables? Number of seats at tables? 28
How many stand-up bars/ bar seats are located on the premise?
(A stand up bar is any bar or counter (whether with seating or not) over which a patron can order,
pay for and receive an alcoholic beverage)
pay for and receive an alcoholic beverage) Describe all bars (length, shape and location): 4/8 5900(e rooftop lef)
Any food counters? 🗖 Yes 🗗 No If Yes, describe:
Does premise have a full kitchen 🕒 Yes 💆 No?
Does it have a food preparation area? 💆 Yes 🗖 No (If any, show on diagram)
Is food available for sale? Wes I No If yes, describe type of food and submit a menu Continental Cuisine
What are the hours kitchen will be open? Q \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \
What are the hours kitchen will be open?

Do you have or plan to install □ French doors □ accordion doors or □ windows? No													
Will you agree to close any doors and windows at 10:00 P.M. every night? ▼Yes □ No													
Will there be TVs/monitors? ☐ Yes ☐ No (If Yes, how many?)													
							If other type, please describe What will be the music volume? ■ Background (quiet) ■ Entertainment level						
							Please describe your sound system: I pool generated with Small Speakers.						
							Please describe your sound system						
Will you host promoted events, scheduled performances or any event at which a cover fee is No													
charged? If Yes, what type of events or performances are proposed?													
How do you plan to manage vehicular traffic and crowds on the sidewalk caused by your establishment? Please attach plans. Employees currently monitor the Sidewalk regularly and will continue to do so. Will there be security personnel? Yes 10 No (If Yes, how many and when) 2 - Fri Sat													
How do you plan to manage noise inside and outside your business so neighbors will not be affected? Please attach plans. Do you have or plan to install sound-proofing?													
APPLICANT HISTORY: Has this corporation or any principal been licensed previously? □ Yes ☑ No													
If yes, please indicate name of establishment:													
Address: Community Board #													
Dates of operation:													
If you answered "Yes" to the above question, please provide a letter from the community													
board indicating history of complaints or other comments.													
Has any principal had work experience similar to the proposed business? Yes No If Yes, please													
attach explanation of experience or resume.													
Does any principal have other businesses in this area? Yes No If Yes, please give trade name													
and describe type of business													
Has any principal had SLA reports or action within the past 3 years? ☐ Yes ☐ No If Yes, attach list													
of violations and dates of violations and outcomes, if any. $ N $													
Attach a separate diagram that indicates the location (name and address) and total number of establishments selling/serving beer, wine (B/W) or liquor (OP) for 2 blocks in each direction. Please indicate whether establishments have On-Premise (OP) licenses. Please label streets and avenues and identify your location. Use letters to Indicate Bar, Restaurant, etc. The diagram must be submitted with the questionnaire to the Community Board before the meeting.													

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How many licensed establishments are within 1 block?	SEE MITADERED
How many licensed establishments are within 500 feet?	
Is premise within a 500 foot radius of 3 or more establishm	ents with OP licenses? Yes No
How many On-Premise (OP) liquor licenses are within 500	feet?
Is premise within 200 feet of any school or place of worship	o? 🛮 Yes 🗖 No
If there is a school or place of worship within 200 feet of yo	our premise on the same block, submit a
block plot diagram or area map showing its location in prox	simity to your premise and indicate the
distance and name and address of the school or house of wo	orship.

COMMUNITY OUTREACH:

If there are block associations, neighborhood 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 with sufficient time for them to respond to your notice. You may contact the Community Board at info@cb3manhattan.org for any contact information that is on file.

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).

