



THE CITY OF NEW YORK MANHATTAN COMMUNITY BOARD 3

59 East 4th Street - New York, NY 10003 Phone: (212) 533-5300 - Fax: (212) 533-3659 www.cb3manhattan.org - info@cb3manhattan.org

Gigi Li, 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.	
P	Schematics, floor plans or architectural drawings of the inside 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	
	example: restaurant, sports bar, combination restaurant/bar. (petition provided)	
	Letter of notice of proposed business to block or tenant association if one exists. E-mail the	
	CB3 office at info@cb3manhattan.org for help to find block associations.	
	Photographs of proof of conspicuous posting of meeting with newspaper showing date.	
	If applicant has been or is licensed anywhere in City, letter from applicable community board	
	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 apr	plying for sale of assets, you must bring letter from current owner confirming that you	
are b	uying business or have the seller come with you to the meeting.	
	of license: On Premises lique Is location currently licensed? Tyes I No	
-		
If alte	eration, describe nature of alteration:	
Previ	ous or current use of the location: YES + QUE ant oration and trade name of current license: Uber Caffe LLC a/b/a Sour lafi 6%	
Composition and trade name of current license. Where Coffe LLC 0/2/2 Sow lefi 6K		
corp	465	
APPI	LICANT:	
Mana	a of anylians and all principals. LIBER CAFFE LLC	
Name	e or applicant and an principals:	
	NICK PENGOS	
Trad	e of applicant and all principals: <u>IJBER CAFFE LLC</u> NICK PLAGOS e name (DBA): Soly laki GR	
D	nise address and cross streets: 116 Stanton Street Bln Essex Ludba	
Prem	ise address and cross streets: 176 3 1 2007 or 41101 070 C 304 7208 00	
DOF	MISE:	
r KCl		
Туре	of building and number of floors: Story brick	

Will any outside area or sidewalk cafe be used for the sale or consumption of alcoholic beverages? (includes roof & yard) Yes No If Yes, describe and show on diagram:	
Does premise have a valid Certificate of Occupancy and all appropriate permits, including certificate of occupancy for back or side yard intended for commercial use? Yes \square No	
Indoor Certificate of Occupancy 55 Outdoor Certificate of Occupancy	
Do you plan to apply for Public Assembly permit? T Yes No	
Zoning designation (check zoning using map: http://gis.nvc.gov/doitt/nvcitymap/ - please give	
specific zoning designation, such as R8 or C2):	
C-4 Walk-up	
Is this premise wheel chair accessible? The Yes D No	
PROPOSED METHOD OF OPERATION:	
What type of establishment will this be (i.e.: restaurant, bar, performance space, club, hotel)? Sceek restaurant since April 2011	
Will any other business besides food or alcohol service be conducted at premise? □ Yes ▼No If yes, please describe what type:	
What are the proposed days/hours of operation? (Specify days and hours each day and hours of outdoor space) //AM-/ZAM MON-WED; //AM-/AM Mas Fri / Sat // (I/AM-11 PM Smday + - Delivery cervice during all hours of operation)	
Number of tables? Number of seats at tables?	
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)	
Describe all bars (length, shape and location): Service bac 3'x5 straight, front ight	
Any food counters? Yes No If Yes, describe:	
Does premise have a full kitchen ∑ Yes □ No?	
Does it have a food preparation area? D Yes D No (If any, show on diagram)	
Is food available for sale? Yes \(\mathbb{D}\) Yes, describe type of food and submit a menu	
What are the hours kitchen will be open? ROD Served during all hars a faper	

Will a manager or principal always be on site? Yes \(\begin{align*} \text{No If yes, which?} \\ \ell \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \		
How many employees will there be?		
Do you have or plan to install French doors □ accordion doors or □ windows?		
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?)		
Will premise have music? ► Yes □ No		
If Yes, what type of music? Live musician DJ Juke box Tapes/CDs/iPod		
If other type, please describe		
What will be the music volume? ■ Background (quiet) ■ Entertainment level		
Please describe your sound system: Tool generated with swell specker		
Will you host promoted events, scheduled performances or any event at which a cover fee is		
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. A - Small greek restaurant Will there he contains a second 17 Year Management of the sidewalk caused by your establishment?		
Will there be security personnel? • Yes No (If Yes, how many and when)		
How do you plan to manage noise inside and outside your business so neighbors will not be affected? Please attach plans. ALA -small greek mutawant		
Do you have or D plan to install sound-proofing?		
APPLICANT HISTORY:		
Has this corporation or any principal been licensed previously?		
If yes, please indicate name of establishment: UBER CAFFELLC		
Address: 16 Stanton Street Community Board # 3		
Dates of operation: 2011-Present		
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.		

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.

COMMUNITY OUTREACH:

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 with sufficient time for them to respond to your notice. You may contact the Community Board at info@cb3manhattan.org for any contact information.

Please use provided petitions, which 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).