meet ing



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:

NOTE: ALL ITEMS MUST BE SUBMITTED FOR APPLICATION TO BE CONSIDERED. Photographs of the inside and outside of the premise. will submit at meeting Schematics, floor plans or architectural drawings of the inside of the premise. will submit at meeting A proposed food and or drink menu. will submit at meeting 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] will submit at meeting 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.will submit at meeting indicating history of complaints and other comments. will submit at meeting
Check which you are applying for: ☐ new liquor license ☐ alteration of an existing liquor license ☐ corporate change
b new industricense acceration of an existing industricense accorporate change
Check if either of these apply:
□ sale of assets □ upgrade (change of class) of an existing liquor license
Today's Date:
If applying for sale of assets, you must bring letter from current owner confirming that you are buying business or have the seller come with you to the meeting.
Type of license: Is location currently licensed? □ Yes □ No
If alteration, describe nature of alteration:
Previous or current use of the location:
Corporation and trade name of current license: One East Broadway Restaurant Inc.
APPLICANT:
Premise address: 1 East Broadway, new York, NY 10038
Cross streets: Chatham Square
Name of applicant and all principals: Runan Zhang
Trade name (DBA): Yi Hao Chiese Restaurant

PREMISE:
Type of building and number of floors: multi unit, 4 floors
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 🗖 No
Indoor Certificate of Occupancy 74 Outdoor Certificate of Occupancy
(fill in maximum NUMBER of people permitted)
Do you plan to apply for Public Assembly permit? ■ Yes ■ No
Zoning designation (check zoning using map: http://gis.nyc.gov/doitt/nycitymap/ - please give
specific zoning designation, such as R8 or C2): R6
is this premise wheel chair accessible? ☐ Yes ☐ No
PROPOSED METHOD OF OPERATION:
What type of establishment will this be (i.e.: restaurant, bar, performance space, club, hotel)? Restaurant
Will any other business besides food or alcohol service be conducted at premise? 🗖 Yes 💆 No
If yes, please describe what type: Chinese
What are the proposed days/hours of operation? (Specify days and hours each day and hours of outdoor space) 11A-4A seven days a week
Number of tables? 18 Number of seats at tables? 70
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): 15'
Any food counters? Yes No If Yes, describe:

Is food available for sale?	Does premise have a full kitchen ☑ Yes ☐ No?
Chinese What are the hours kitchen will be open? 11A-4AM seven days a week Will a manager or principal always be on site? 2 Yes No If yes, which? How many employees will there be? 3-5 Do you have or plan to install Prench doors accordion doors or windows?n/a Will you agree to close any doors and windows at 10:00 P.M. every night? 2 Yes No Will there be TVs/monitors? 2 Yes No (If Yes, how many?) 1 Will premise have music? 2 Yes No (If Yes, how many?) 1 Will premise have music? Live musician Df Juke box 2 Tapes/CDs/iPod If other type, please describe What will be the music volume? 3 Background (quiet) Entertainment level Please describe your sound system: 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? n/a How do you plan to manage vehicular traffic and crowds on the sidewalk caused by your establishment? Please attach plans. 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. Do you have or plan to install sound-proofing? n/a APPLICANT HISTORY: Has this corporation or any principal been licensed previously? Yes No If yes, please indicate name of establishment: One East Broadway Restaurant Inc. Address: 1 East Broadway, New York, NY 10038 Community Board # 3 Dates of operation: 02/08/11 If you answered "Yes" to the above question, please provide a letter from the community	Does it have a food preparation area? 🖾 Yes 🗖 No (If any, show on diagram)
Will a manager or principal always be on site?	Is food available for sale? ☑ Yes ☐ No If yes, describe type of food and submit a menu Chinese
How many employees will there be? \$\frac{3-5}{2}\$ Do you have or plan to install \(\) French doors \(\) accordion doors or \(\) windows?n/a 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 Will there be TVs/monitors? \(\) Yes \(\) No Will premise have music? \(\) Yes \(\) No If Yes, what type of music? \(\) Live musician \(\) D\(\) 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: 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? \(\frac{n}{2} \) A How do you plan to manage vehicular traffic and crowds on the sidewalk caused by your establishment? Please attach plans. 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. Do you \(\) have or \(\) plan to install sound-proofing? \(\) n/a APPLICANT HISTORY: Has this corporation or any principal been licensed previously? \(\) Yes \(\) No If yes, please indicate name of establishment: \(\) One \(\) East \(\) Broadway \(\) Restaurant \(\) Inc. Address: \(1 \) East \(\) Broadway, \(\) New \(\) York, \(\) NY \(10038 \) Community Board \(\) 3 Dates of operation: \(02/08/11 \) If you answered "Yes" to the above question, please provide a letter from the community	What are the hours kitchen will be open? 11A-4AM seven days a week
Do you have or plan to install	Will a manager or principal always be on site? ☑ Yes □ No If yes, which?
Will you agree to close any doors and windows at 10:00 P.M. every night? A Yes No Will there be TVs/monitors? Yes No Will there be TVs/monitors? Yes No Will premise have music? Yes No If Yes, what type of music? Live musician Di 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: 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? No How do you plan to manage vehicular traffic and crowds on the sidewalk caused by your establishment? Please attach plans. 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. Do you have or plan to install sound-proofing? No APPLICANT HISTORY: Has this corporation or any principal been licensed previously? Yes No If yes, please indicate name of establishment: One East Broadway Restaurant Inc. Address: 1 East Broadway, New York, NY 10038 Community Board # 3 Dates of operation: 02/08/11 If you answered "Yes" to the above question, please provide a letter from the community	How many employees will there be? $3-5$
Will there be TVs/monitors? \(\mathbb{Q} \) Yes \(\mathbb{N} \) No (If Yes, how many?) \(\mathbb{Q} \) Tapes/CDs/iPod If Yes, what type of music? \(\mathbb{Q} \) Live musician \(\mathbb{Q} \) Di \(\mathbb{Q} \) Juke box \(\mathbb{Q} \) Tapes/CDs/iPod If other type, please describe \(\mathbb{M} \) What will be the music volume? \(\mathbb{Q} \) Background (quiet) \(\mathbb{Q} \) Entertainment level Please describe your sound system: 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? \(\frac{n}{a} \) How do you plan to manage vehicular traffic and crowds on the sidewalk caused by your establishment? Please attach plans. Will there be security personnel? \(\mathbb{Q} \) Yes \(\mathbb{Q} \) 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. Do you \(\mathbb{Q} \) have or \(\mathbb{Q} \) plan to install sound-proofing? \(n/a \) APPLICANT HISTORY: Has this corporation or any principal been licensed previously? \(\mathbb{Q} \) Yes \(\mathbb{Q} \) No If yes, please indicate name of establishment: \(\text{One} \) East \(\mathbb{B} \) Toadway \(\mathbb{R} \) Restaurant \(\mathbb{Inc} \). Address: \(1 \) East \(\mathbb{B} \) Toadway, \(\mathbb{N} \) New \(\mathbb{Y} \) Ork, \(\mathbb{N} \) \(\mathbb{N} \) 10038 \(\mathbb{C} \) Community Board \(\mathbb{H} \) 3 Dates of operation: \(\mathbb{O} \) 20/08/11 If you answered "Yes" to the above question, please provide a letter from the community	Do you have or plan to install ■ French doors □ accordion doors or □ windows?n/a
Will premise have music?	Will you agree to close any doors and windows at 10:00 P.M. every night? 🗖 Yes 🗖 No
If Yes, what type of music? Live musician DJ DJ Luke box Tapes/CDs/iPod If other type, please describe What will be the music volume? B Background (quiet) Entertainment level Please describe your sound system: 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? n/a How do you plan to manage vehicular traffic and crowds on the sidewalk caused by your establishment? Please attach plans. 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. Do you have or plan to install sound-proofing? n/a APPLICANT HISTORY: Has this corporation or any principal been licensed previously? Yes No If yes, please indicate name of establishment: One East Broadway Restaurant Inc. Address: 1 East Broadway, New York, NY 10038 Community Board # 3 Dates of operation: 02/08/11 If you answered "Yes" to the above question, please provide a letter from the community	Will there be TVs/monitors? Yes □ No (If Yes, how many?) 1
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If you answered "Yes" to the above question, please provide a letter from the community	Address: 1 East Broadway, New York, NY 10038 Community Board # 3
	Dates of operation: 02/08/11
board indicating history of complaints or other comments.	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	Has any principal had work experience similar to the proposed business? □ Yes ☑ No If Yes, please
attach explanation of experience or resume.	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.
LOCATION:
How many licensed establishments are within 1 block?2
How many licensed establishments are within 500 feet?
Is premise within a 500 foot radius of 3 or more establishments with OP licenses? ☐ Yes ☒ No
How many Oп-Premise (OP) liquor licenses are within 500 feet? <u>О</u>
Is premise within 200 feet of any school or place of worship? ■ Yes ☑ No
If there is a school or place of worship within 200 feet of your premise on the same block, submit a
block plot diagram or area map showing its location in proximity to your premise and indicate the
distance and name and address of the school or house of worship.
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

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).

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.