



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

Jamie Rogers, Board Chair

Susan Stetzer, District Manager

Community Board 3 Liquor License Stipulations for Administrative Approval

I, WARAKORN SIRITIPAKUL, qualified representative of HUB THAI CORP.
located at 105 AVENUE A, STORE, New York, NY, agree to the following stipulations:

- 1. [X] I will operate a full-service restaurant, specifically a (type of restaurant), THAI
[X] Kitchen open and serving food every night during all hours of operation.
2. My hours of operation will be:
Mon 12pm-11pm; Tue 12pm-11pm; Wed 12pm-11pm;
Thu 12pm-11pm; Fri 12pm-11pm; Sat 12pm-11pm; Sun 12pm-11pm;
(I understand opening is "no later than" specified opening hour, & all patrons are to be cleared from business at specified closing hour.)
3. [X] I will not use outdoor space for commercial use.
4. [ ] I will operate my sidewalk cafe no later than
5. [ ] I will employ a doorman/security personnel on the following days:
6. [ ] I will or have already installed soundproofing.
7. [X] I will close any front or rear facade doors and windows at 10:00 P.M. every night or when amplified sound is playing, including but not limited to DJs, live music and live nonmusical performances.
[ ] I will have a closed fixed facade with no open doors or windows except my entrance door will close by 10:00 P.M. or when amplified sound is playing, including but not limited to DJs, live music and live nonmusical performances.
8. I will not have [X] DJs, [X] live music, [X] promoted events, [X] any event at which a cover fee is charged, [X] scheduled performances, [ ] more than \_\_\_ DJs/ promoted events per \_\_\_, [ ] more than \_\_\_ private parties per \_\_\_
9. [X] I will play ambient recorded background music only.
10. [X] I will not apply for an alteration to the method of operation agreed to by this stipulation without first coming before CB 3.
11. [X] I will not seek a change in class to a full on-premise liquor license without first obtaining approval from CB 3.
12. [X] I will not participate in pub crawls or have party buses come to my establishment.
13. [X] I will not have unlimited drink specials with food.
14. [X] I will not have a happy hour OR [ ] I will have happy hour and it will end by \_\_\_
15. [X] I will not have wait lines outside. [ ] I will have a staff person responsible for ensuring no loitering, noise or crowds outside.
16. [X] I will conspicuously post this stipulation form beside my liquor license inside of my business.
17. [X] Residents may contact the manager/owner at the number below. Any complaints will be addressed immediately. I will revisit the above-stated method of operation if necessary in order to minimize my establishment's impact on my neighbors.

Name: WARAKORN SIRITIPAKUL Phone Number: (646) 243-8178

18. [ ] I will: \_\_\_\_\_

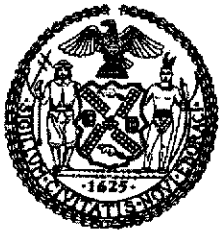
I hereby certify that the information provided above is truthful and accurate based upon my personal belief.

Signed [Signature]

Sworn to this 17th day of March 2017

Dated 3/17/2017
JOEL A. SILBERMAN

Notary Public, State of New York
No. 02SI6248163
Qualified in New York City
Commission Expires Oct 3, 2018



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**Community Board 3 Liquor License Application Questionnaire**

Today's Date: MARCH 21, 2017

**APPLICANT**

1. Name of applicant and principle(s): HUB THAI CORP. C/O WARAKORN SIRITIPAKUL
2. Premise address: 105 AVENUE A, NEW YOK, NY 10009
3. Cross streets: 6TH AND 7TH STREETS
4. Trade name (DBA): \_\_\_\_\_
5. Check which you are applying to:  New liquor licence  Alteration of an existing license  Sale of assets
6. If alteration, describe nature of alteration: N/A
7. Is location currently licensed?  Yes  No
8. Type of license: BEER AND WINE
9. Previous or current use of the location: THAI RESTAURANT
10. Corporation and trade name of current location: MINI THAI CAFE
11. Type of building and number of floors: MIXED - STREET LEVEL STORE AND 6 FLOORS APTS. A
12. Does premise have a valid Certificate of Occupancy and all appropriate permits, including for any back or side yard use?  Yes  No **12a.** What is the permitted occupancy indoors and outdoors? 75
13. Do you plan to apply for Public Assembly permit?  Yes  No
14. What is the zoning designation (check zoning using map: <http://gis.nyc.gov/doitt/nycitymap/> - please give specific zoning designation, such as R8 or C2): R7A
15. How many licensed establishments are within 1 block? 7
16. How many On-Premise (OP) liquor licenses are within 500 feet? 7
17. Is premise within 200 feet of any school or place of worship?  Yes  No

**PROPOSED METHOD OF OPERATION**

18. Describe your method of operation: THAI RESTUARANT ON EAT IN OR TAKE OUT
19. Will any other business besides food or alcohol service be conducted at premise?  Yes  No
20. If yes, please describe what type: \_\_\_\_\_
21. What are the proposed days/hours of operation (specify days/hours each day and hours of outdoor space if applicable):  
12PM-11PM 7 DAYS
22. Total number of table: 25
23. Total number of seats: 2

24. How many stand-up bars/ bar seats are located on the premise? 1 (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.)
25. Describe all bars (length, shape, and location): RECTANGLE - 4 FEET LONG - 2 SEATS
26. Does premise have a full kitchen?  Yes  No
27. What are the hours kitchen will be open? 12PM-11PM - 7 DAYS
28. What type of food is available for sale? THAI FOOD
29. Will a manager or principal always be on site?  Yes  No If yes, which? \_\_\_\_\_
30. How many employees will there be? 3
31. Do you have or plan to install  French doors  accordion doors or  windows?
32. Will there be TVs/monitors?  Yes  No (If Yes, how many?) 1
33. Will premise have music?  Yes  No 33a. If Yes, what type of music?  Live Music  Juke box  
 DJ  Tapes/CDs/iPod
34. If other type, please describe: N/A
35. What will be the music volume?  Background (quiet)  Entertainment level
36. Please describe your sound system: STEREO
37. Will you host any promoted events, scheduled performances or any event at which a cover fee is charged?  Yes  No
38. If Yes, what type of events or performances are proposed and how often? \_\_\_\_\_
39. How do you plan to manage vehicular traffic and crowds on the sidewalk caused by your establishment? MANAGER PRESENTLY WILL MONITOR BUT BECAUSE OF NATURE OF BUSINESS THERE
40. Will there be security personnel?  Yes  No 40a. If Yes, how many and when? \_\_\_\_\_
41. How do you plan to manage noise inside and outside your business so neighbors will not be affected? SEE 39
42. Do you have sound proofing installed?  Yes  No 43. If not, do you plan to install sound-proofing?  Yes  No

**APPLICANT HISTORY**

44. Has this corporation or any principal been licensed previously?  Yes  No If yes, please indicate name of establishment(s): \_\_\_\_\_
45. Address: \_\_\_\_\_ 47. Community Board # \_\_\_\_\_
46. Dates of operation: \_\_\_\_\_
47. Has any principal had work experience similar to the proposed business?  Yes  No If yes, explanation of experience or resume.
48. Does any principal have other businesses in this area?  Yes  No If yes, give trade name and describe type of business: \_\_\_\_\_
49. 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.

**COMMUNITY OUTREACH**

Please see the Community Board website to find block associations or tenant associations in the immediate vicinity of your location for community outreach. Applicants are encouraged to reach out to community groups.

