



THE CITY OF NEW YORK  
 MANHATTAN COMMUNITY BOARD 3  
 59 East 4th Street - New York, NY 10003  
 Phone (212) 533-5300  
 www.cb3manhattan.org - info@cb3manhattan.org

Alysha Lewis-Coleman, 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.
- 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 proposed location. Petition must give proposed hours and method of operation. For example: restaurant, sports bar, combination restaurant/bar. (petition provided)
- Notice of proposed business to block or tenant association if one exists. You can find community groups and contact information on the CB 3 website:  
[http://www.nyc.gov/html/mancb3/html/communitygroups/community\\_group\\_listings.shtml](http://www.nyc.gov/html/mancb3/html/communitygroups/community_group_listings.shtml)
- 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.

Check which you are applying for:

- new liquor license       alteration of an existing liquor license       corporate change

Check if either of these apply:

- sale of assets       upgrade (change of class) of an existing liquor license

Today's Date: May 14, 2018

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.

Is location currently licensed?  Yes  No    Type of license: \_\_\_\_\_

If alteration, describe nature of alteration: \_\_\_\_\_

Previous or current use of the location: Restaurant

Corporation and trade name of current license: Bare City Two LLC

**APPLICANT:**

Premise address: 85 Second Avenue

Cross streets: Corner of Second Avenue

Name of applicant and all principals: NAI TAPAS RESTAURANT CORP  
Ruben Rodriguez

Trade name (DBA): NAI TAPAS

**PREMISE:**

Type of building and number of floors: 5 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: Sidewalk cafe

Does premise have a valid Certificate of Occupancy and all appropriate permits, including for any  
back or side yard use?  Yes  No What is maximum NUMBER of people permitted? 144

Do you plan to apply for Public Assembly permit?  Yes  No

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):  
R 7A C2-5

**PROPOSED METHOD OF OPERATION:**

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) MON-THURS 11:30 AM - 11:00 PM; Friday 11:30 AM - 12 AM  
SAT 11 AM - 12 AM SUN 11:00 AM - 10 PM

Number of tables? 35 Total number of seats? 111

How many stand-up bars/ bar seats are located on the premise? 1/5

(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): Approx 13'; straight - 1st floor rear

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?  Yes  No If yes, describe type of food and submit a menu

Spanish Tapes

What are the hours kitchen will be open? To within 1 hour of closing

Will a manager or principal always be on site?  Yes  No If yes, which? \_\_\_\_\_

How many employees will there be? 20-25

Do you have or plan to install  French doors  accordion doors or  windows? (currently exists)

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: Pandora with small speakers

Will you host any promoted events, scheduled performances or any event at which a cover fee is charged? If Yes, what type of events or performances are proposed and how often? NO

How do you plan to manage vehicular traffic and crowds on the sidewalk caused by your establishment? Please attach plans. (Please do not answer "we do not anticipate congestion.")

ONE EMPLOYEE WILL BE DESIGNATED TO INSURE THAT CROWDS DO NOT CONGREGATE ON THE SIDEWALK

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. Interior - noise will be carefully monitored and only true background music, that does not interfere with conversation, will be played; Exterior:

Do you have sound proofing installed?  Yes  No

If not, do you plan to install sound-proofing?  Yes  No

one employee will be designated to insure the front of the premises do not become noisy.

**APPLICANT HISTORY:**

Has this corporation or any principal been licensed previously?  Yes  No

If yes, please indicate name of establishment: NAI TAPAS LLC

Address: 174 First Ave, NYC NY Community Board # 3

Dates of operation: 2010 - 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. SEE ABOVE

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? TO BE PROVIDED

How many On-Premise (OP) liquor licenses are within 500 feet? 11

Is premise within 200 feet of any school or place of worship?  Yes  No

**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. Also 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).

*We are including the following questions to be able to prepare stipulations and have the meeting be faster and more efficient. Please answer per your business plan; do not plan to negotiate at the meeting.*

1.  I will operate a full-service restaurant, specifically a (type of restaurant) Spanish  
Tapas, with a kitchen open and serving food during all hours of operation OR  I have less than full-service kitchen but will serve food all hours of operation.
2.  I will close any front or rear façade 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.
3.  I will not have  DJs,  live music,  promoted events,  any event at which a cover fee is charged,  scheduled performances,  more than \_\_\_ DJs / promoted events per \_\_\_,  more than \_\_\_ private parties per \_\_\_\_\_.
4.  I will play ambient recorded background music only.
5.  I will not apply for an alteration to the method of operation or for any physical alterations of any nature without first coming before CB 3.
6.  I will not seek a change in class to a full on-premise liquor license without first obtaining approval from CB 3.
7.  I will not participate in pub crawls or have party buses come to my establishment.
8.  I will not have a happy hour or drink specials with or without time restrictions OR  I will have happy hour and it will end by 7 pm.
9.  I will not have wait lines outside.  I will have a staff person responsible for ensuring no loitering, noise or crowds outside.
10.  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.