

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

Αl	lysha	Lewis-Co	leman,	Board	Chair
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Susan Stetzer, District Manager

	Community Board 3 Liquor License Stipulations for Ac	Iministrative Approval
l, _	, <u>Lu Dong</u> , as a qualified representative of <u>Q</u>	IYI LLC
loca	ocated at _112 First Avenue, New York, New York 10009	New York, NY agree to the following stipulations:
1.	 I will operate a full-service restaurant, specifically a (type of restaurant) _ 区 Kitchen open and serving food every night during all hours of operation. 	
2.	2. My hours of operation will be:	
	Mon 11:30am-12:00am; Tue 11:30am-12:00am; Wed 11:30a	m-12:00am;
	Thu 11:30am-12:00am ; Fri 11:30am-12:00am ; Sat 11:30am-	12:00am ; Sun11:30am-12:00am .
(I u	I understand opening is no later than specified opening hour & all patrons are to b	
3.	3. 🗵 I will not use outdoor space for commercial use.	
4.	1. 🗗 I will operate my sidewalk café no later than N/A	fi.
5.	5. \square I will employ a doorman/security personnel on the following days: N/A	
6.		
7.	at 10:00 P.M. every night or when amplified sound is windows e playing, including but not limited to DJs, live music and live or when an	nave a closed fixed façade with no open doors or except my entrance door will close by 10:00 P.M. mplified sound is playing, including but not limited music and live nonmusical performances.
8.	B. I will not have ⊠ DJs, ⊠ live music, ⊠ promoted events, ⊠ any event at whice performances, □ more than DJs/ promoted events per, □ more	
9.	9. 🗵 I will play ambient recorded background music only.	
10.	.0. I will not apply for an alteration to the method of operation or for any phy coming before CB 3.	sical alterations of any nature without first
11.	1. 🗗 I will not seek a change in class to a full on-premise liquor license without	first obtaining approval from CB 3.
12.	2. 🗵 I will not participate in pub crawls or have party buses come to my establis	shment.
13.	3. 🗵 I will not have unlimited drink specials, including boozy brunches, with foo	od.
14.	4. D I will not have a happy hour or drink specials with or without time limitation end by	ons $\underline{\mathit{OR}} \; \square$ I will have happy hour and it will
15.	.5. ⊠ I will not have wait lines outside. □ I will have a staff person responsible f	or ensuring no loitering, noise or crowds outside.
16.	6. 🗵 I will conspicuously post this stipulation form beside my liquor license inside	de of my business.
	7. In Residents may contact the manager/owner at the number below. Any conceptibility revisit the above-stated method of operation if necessary in order to minimize plane: Louk Dog Phone No.	my establishment's impact on my neighbors.
	8. □ I will:	<u> </u>
	hereby certify that the information provided above is truthful and accurate base	ed upon my personal belief.
Sign	worn to this 18 ⁷ day of 5 une 2018	Dated Speed
	JOSEPH ADRIEN HAMEL	Notary Public

NOTARY PUBLIC-STATE OF NEW YORK

No. 02HA6362668

Qualified in Queens County

My Commission Expires 08-07-2021



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

	Today's Date: June 19, 2018
	<u>APPLICANT</u>
1.	Name of applicant and principle(s): QIYI LLC
2.	Premise address: 112 First Avenue, New York, NY 10009
3.	Cross streets: East 6th Street & East 7th Street
4.	Trade name (DBA): Hunan Slurp
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:
7.	Is location currently licensed? Yes No
8.	Type of license: N/A
9.	Previous or current use of the location: Previous use- Imagine Bar & Grill - serial # 1173042
10.	Corporation and trade name of current location:
11.	Type of building and number of floors: Multi-unit- 5 floors
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? Pending
13.	Do you plan to apply for Public Assembly permit? Yes XNo
14.	What is the zoning designation (check zoning usingmap: http://gis.nyc.gov/doitt/nycitymap/ -please give specific zoning
	designation, such as R8 or C2): R7A with C2-5 overlay
15.	How many licensed establishments are within 1 block? See attached proximity report
16.	How many On-Premise (OP) liquor licenses are within 500 feet? 32
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: Restaurant with full kitchen
19.	Will any other business besidesfoodor alcohol service beconducted at premise? Yes X NO
	If yes, please describe what type: N/A
21.	What are the proposed days/hours of operation (specify days/hours each day and hours of outdoor space if applicable: Monday-Sunday 11:30a-12a 22. Total number of table:15 23. Total number of seats:48

24.	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 alcholic beverage.)
25.	Describe all bars (length, shape, and location): N/A
26.	Does premise have a full kitchen? X Yes No
27.	What are the hours kitchen will be open? All hours of open operation
28.	What type of food is available for sale? See attached menu
29.	Will a manager or principal always be on site? X Yes No If yes, which?
30.	How many employees will there be? 10
31.	Do you have or plan to install French doors accordion doors or windows?
32.	Will there be TVs/monitors? Yes X No (If Yes, how many?)
	Till premise have music? XYes No 33a. If Yes, what type of music? Live Music
	If other type, please describe:
35.	What will be the music volume? Background (quiet) Entertainment level
36.	Please describe your sound system: Ipod w/ speakers
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? N/A
39.	How do you plan to manage vehicular traffic and crowds on the sidewalk caused by your establishment?
40	A staff person will be responsible for handling and a plan will be developed to prevent loitering while waiting
	Will there be security personnel? Yes X No 40a. If Yes, how many and when? How do you plan to manage noise inside and outside your business so neighbors will not be affected? Background music only
42. D	o you have sound proofing installed? X Yes No 43. If not, do you plan to install sound-proofing? Yes X No
44	APPLICANT HISTORY Has this corporation or any principal been licensed previously? Yes No If yes, please indicate name of
77.	establishment(s):
45.	Address:47. Community Board #
46.	Dates of operation:
	Has any principal had work experience similar to the proposed business? Yes X No If yes, explanation
47.	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: NO
49.	Has any principal had SLA reports or action within the past 3 years? Yes No <i>If yes</i> , attach list of violations and dates of violations and outcomes.
COMMUN	NITY OUTREACH
	e 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.

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	OFFICE USI		
Original	Amended	Date	

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ESTABLISHMENT QUESTIONNAIRE

In this section you must describe the premises to be licensed. Answer ALL questions completely. Please do not answer "see attached" to any question. Any incomplete answer may delay or prevent the processing of the application.

			r photographs may assist yo he end of this application.	u in completing this section
. Zoning				
1a. State what the	area is zoned for:	Mixed		
(i.e Resider	ntial, Business, Mixed)	-		
1b. If applying for VALID CERTIF	an on premises license CATE OF OCCUPANCY	does the premise and ALL approp	s have a oriate permits? Yes	○ No ⑤ Pending
. Premises				
2a. Describe the type premises will be	of building in which the ocated.	Multi Unit		
2b. Is or has the build	ding/proposed premises b	peen known by any	other address? Yes	No
If "yes" please and give deta	. , ,			
If the address	was changed due to a 911	1 update or other go	vernment action, please include a	locumentation for the change.
2c. Is there currently to traffic in alcoho	an active license or has th dic beverages at this locat Cui	tion?		er Licensed ODo Not Know
Name of Licensee:	Imagine Bar & Grill Inc.		License Serial I	Number: 1173042
2d. Are there any dis	ciplinary actions pending	against the applica	nt, current licensee, or prior lice	nsee?
	○Yes	No	ODo not know	
	sciplinary action may de remises has not been lice		n on this application or result in prior use?	n the disapproval.
				×
2f. Is any other floor of	or area of the building cur	rently licensed?	○Yes	
Name of Licensee:			License Serial N	Number:

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3. Premises (Interior):					
3a. List the total number of floors of the	business establishment to be licensed, includ	ding the basement: 2			
 List the floor(s) where the proposed located (i.e. basement, ground floor, 	premises will be 2nd & 3rd floor, etc.) Ground floor & basem	ent			
3c. Where is the alcohol stored? Locked	storage in the basement				
3d. Is there interior access to any other fl If yes, show the means of access on the	oor(s) or area(s) that will not be part of the p ne interior diagram(s).	remises to be licensed? Yes No			
3e. Are the premises to be licensed divid the applicant does not have exclusiv Example: hallways, stairwells, common	ed in any way, by a public or private passage re possession and control? on areas, etc.	eway, etc., over which Yes No			
If YES, describe:					
3f. How many public restrooms? If less t the two(2) restroom rule in writing. S	han two(2) public restrooms you must reque how restrooms on diagram.	est a waiver of 1			
3g. List the maximum occupancy of the p	premises: 74				
3h. Number of tables? 15 3i. Nu	umber of seats at tables? 48 3j. Num	ber of seats at bar or counter?			
4. BARS:					
4a. How many customer bars are located	on the premises? (where patrons may order,	purchase, or receive alcoholic beverages.) 0			
4b. How many service bars*? (A service bar is for wait staff use exclusively.)					
4c. Describe each bar in the fields below					
Bar 1	Bar 2	Bar 3			
Bar Type	Bar Type	Bar Type			
Length	Length	Length			
Shape	Shape	Shape			
Bar 4	Bar 5	Bar 6			
Bar Type	Bar Type	Bar Type			
Length	Length	Length			
Shape	Shape	Shape			

Attach additional sheets if there are more than 6 bars.

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5. KITCHEN					
5a. Does premises have	\mathbf{e} a full kitchen? \mathbf{e} $\mathbf{\gamma}_{\epsilon}$	es (No			
	nave a food preparation	- T	○ No		
		0 133	on the Interior Diagram).	
			OURS OF OPERATION; S		
5b. Is a chef/cook emp					
If YES, list hours of day	chef/cook will devote	to the premises:	ll hours of open operatio	n	
6. HOTEL or BED & BR	EAKFAST				
6a. How many floors?					
6b. How many guest ro	ooms?				
6c. For Hotels Only: Is t	here a public restauran	t on the Hotel Prem	nises? OYes ONo		
7. OUTDOOR AREAS					
7a. Are there any outsi	de areas used for the sa	le or consumption	of alcoholic beverages?	○ Yes ● No	
7b. Check all types that (There must be dire Show access on dia	ct access from the inter	ior of the premises	to any outdoor area(s) th	at you wish to license.	
○ Sidewalk Car		O Patio	O Porch	Gazebo	
Rooftop		Balcony	Pavilion	→ Tent	
Other (descr	ibe):				
7c. Is the outdoor area or private passageway does not have exclusive it divided?	or area that the applica	int			
7d. How is the outdoor	area(s) contained? Che	ck all that apply an	d show enclosure on diag	gram.	
Fencing	O Wall	Shrubbery	Roping	Stanchions	
Other (desc	ribe):				
7e. Is a permit required	by locality for outside a	area(s)? Yes	○ No		

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METHOD OF OPERATION

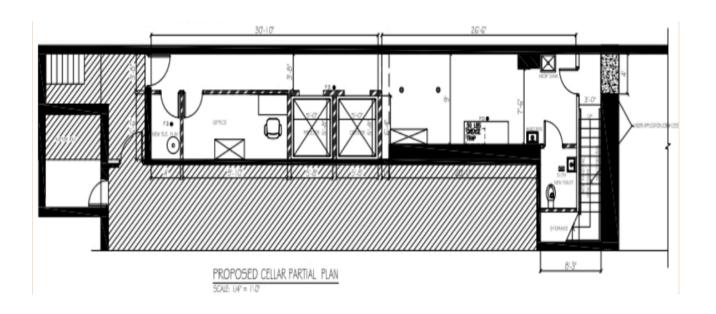
This form satisfies Section 110 of the ABC Law requiring that a statement be submitted indicating the type of establishment operated at the premises.

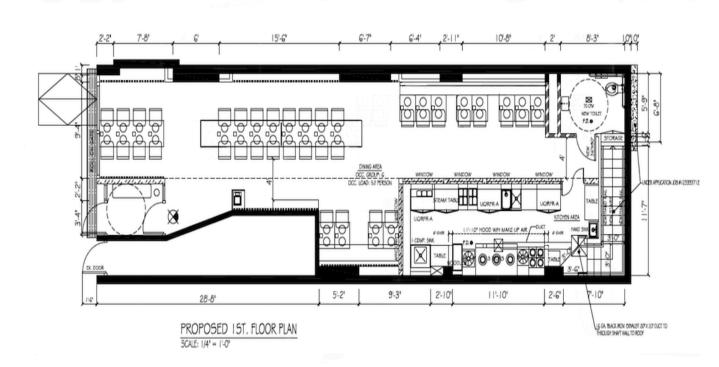
and type of obtaining the promotes.
The information provided in this section will be the method of operation you are approved for and will be binding. Should you wish to deviate from this method of operation in any way, you must first apply for and receive permission from the Authority.
1a. Select the type(s) of alcohol you intend to serve at the premises:
Beer & Cider Wine, Beer & Cider Liquor, Wine, Beer & Cider
1b. Type of Establishment: Restaurant (Full Kitchen & Full Menu required
2. Will any other business be conducted at the premises? if " yes"provide details below or on a separate sheet: Yes No
2a. If the premises is not a catering establishment, will the premises periodically close to host private events? Yes No
2b. If "yes" how frequently?
3. Will premises have music? Yes No
3a. If "yes" check all that apply: RECORDED DJ JUKE BOX KARAOKE
○ LIVE MUSIC (Give details: i.e. rock bands, acoustic, jazz, etc.):
3b. Will the premises use the services of an Event Promoter?: Yes No
4. Will the premises permit dancing? Yes No
4a. If "yes", does your municipality require a "cabaret" or other permit granting permission for dancing? Yes* No
* If a permit is required, submit a copy of the permit. A copy must be submitted prior to issuance of the license.
4b. If dancing is permitted, who will be permitted to dance? OPatrons Employees for entertainment OBoth
4c. If YES, will there be exotic dancing including, but not limited to, topless entertainment, pole dancing and/or lap dancing? Yes No
5. Will there be topless entertainment? Yes No
6. Will the business employ a manager? Yes No
6a. If "no" will principal(s) manage? Yes No
7. How many employees? (Excluding principals and security personnel.) 10
7a. If answer is zero employees ("0"), then provide an explanation below:

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8. NYS Law requires busin	nesses to carry	y workers' compensat	ion and disability insurance.	
If applied for and pendir	ng, please indic	cate.		
8a. Workers' Compensa	ation Carrier Na	ame and Policy Numbe	r: Hartford Ins Co of the Midwest-	Policy # 76 WEG AB4LW5
8b. Disability Insurance	Carrier Name	and Policy Number:	Hartford Life & Accident- Policy	#LNY786879
<u>Certificate of Attesta</u> from t	<u>tion of Exemp</u> he NYS Worke	<u>tion from NYS Worke</u> ers' Compensation Boa	r Disability Benefits Insurance cors' Compensation and/or Disabil ard. The application is available contact them by phone at: (877	<u>ity Benefits Insurance Coverage</u> on their website:
9. Will there be security pe	rsonnel be used	d at the premises?	Yes No 9a. If YES, how	w many?
9b. If "yes" provide your business by the NYS I through which the sect	Department of	State Division of Lice	loyer Unique Identification Nunsing Services or the name of the	imber assigned to the ne security company
				ordance with NYS Security Guard
Regis	tration Guideli	ines. Please contact th	e NYS Department of State to obt	tain information.
over the licensed premises. handle unruly patrons, alter The Applicant is operat issues will arise. Notwit employees will be TIPS	How you will recations, etc., to ing a full-servic hstanding, the trained, and as f alcohol. Unru	monitor alcohol sales; por prevent the premises ce, Chinese restaurant verowners, or a trained shock for proper identificated by patrons and those e	licensed. Clearly describe how your content sales to minors and sales to from becoming disorderly? Includivith early closing hours, and it is not if supervisor, will be on-premisestion prior to serving alcohol to patingaging in altercations will be ask	o intoxicated persons. How will you e additional sheets if necessary. ot anticipated that security during all hours of operation. All rons. Visibly intoxicated patrons
			istent with the information p m for Providing 30-Day Adva	provided to the municipality of inced Notice ?

ALCOHOLIC BEVERAGES MAY ONLY BE CONSUMED, SOLD OR GIVEN AWAY DURING THE HOURS APPROVED BY THE COUNTY WHERE THE PREMISES IS LOCATED UNLESS FURTHER RESTRICTED BY THE AUTHORITY

 $A\ list\ of\ county\ closing\ hours\ is\ available\ at\ the\ following\ link: \\ \underline{http://www.sla.ny.gov/provisions-for-county-closing-hours}$















Hunan Slurp Menu

Cold Dish

Cherry Tomato \$8 Marinated in plum sauce 话梅糖渍圣女果

Chicken Feet \$9 Braised and tossed in chili oil 风味凤爪

Cucumber \$6 Smashed salad with garlic vinaigrette 蒜汁拍黄瓜

Spare Rib \$12 Sweet and sour 糖醋小排

Edamame \$6 Tossed in spicy garlic sauce 风味毛豆

Daikon \$6 Diced and pickled, hot and sour 秘制萝卜丁

Lettuce \$9 Rolled in cucumber with sesame sauce 芝麻酱生菜卷

Hunan Salad \$10 Grilled pepper and eggplant, preserved duck egg, soy sauce and sesame oil dressing 擂辣椒皮蛋茄子

Hot Plates

Cabbage \$12 Stir fried with garlic and sun-dried chili 干锅手撕包菜

Seasonal Vegetables \$16 Stir fried with seasonal vegetables 时令蔬菜

Fish Fillet \$18
With pickled cabbage in fish broth/
steamed in chef's special chili sauce
酸菜鱼片/
秘制剁椒鱼片

Frog \$20 Stir fried with red pepper 香辣跳跳蛙

Pig Trotter \$18 Braised and stir fried 小炒蹄花

Chicken \$18 Stir-fried with young ginger 仔姜炒土鸡

Smoked Pork \$12 Stir fried with smoked bean curd 香干炒腊肉

Spare Rib \$16 Stir fried in black bean sauce 豆豉排骨

Skewed Beef \$12 w/cumin 牙签牛肉

Hunan Charcuterie \$16

Braised beef shank, beef tripe, pig's ear, pig's tongue and tofu 卤水拼盘

Pepper \$12 Grilled and stuffed with minced pork and sticky rice 炭烧夫子辣椒

Hunan "Donut" \$6 Scallion rice and flour dough 油圈子

Mifen/Rice noodle

Fish Fillet \$28
Fresh fish fillet, seafood mushroom, seasonal green 鲜鱼片米粉

Hometown Lu Fen \$18 Sliced beef, char su, peanut, cucumber, bean curd, crispy soy bean 家乡卤粉

Beef \$18 Braised beef, daikon, half egg 红烧牛肉米粉

String Bean \$16
Pickled, diced and stir fried with minced pork and chili
酸豆角米粉

Pork Shank \$22 Bone marrow, Tonkotsu-style broth 筒子骨粉

Pig Trotter \$18 Stew with soy bean, celery and chili 香辣猪蹄粉

Three Delicacies \$19
Oyster mushroom, pork slice, egg

三鲜米粉

Pepper & Pork \$19 Stir fried 农家小炒肉米粉

Vegetarian \$18 Seasonal vegetable, Kombu broth 素粉

Egg \$2
Soft boiled and marinated in chef's special sauce
Poached
Fried
卤蛋/水煮蛋/荷包蛋

Dessert

Traditional Sweet Soup \$6
Mung bean, pearl barley, rock sugar 薏仁绿豆汤

Almond Jelly \$8 Almond and milk in jelly 杏仁豆腐

Ice Cream \$5 特色冰淇淋

Hunan Baba \$8 糖油粑粑

112 1 Ave, New York, NY, 10009

* This report is for informational purposes only in aid of identifying establishments potentially subject to 500 and 200 foot rules. Distances are approximated using industry standard GIS techniques and do not reflect actual distances between points of entry. The NYS Liquor Authority makes no representation as to the accuracy of the information and disclaims any liability for errors.

Closest Liquor Stores

Name	Address	Approx. Distance
EAST VILLAGE WINES & SPIRITS INC	138 1ST AVE	455 ft
WINESHOP LLC	438 A E 9TH ST	765 ft
SAKAYA INC	324 E 9TH STREET (WEST STORE)	825 ft
S & P LIQUOR & WINE CORP	89 2ND AVE	905 ft
JCCSM INC	45 1ST AVE	935 ft
NIZGA CORP	58 AVENUE A	940 ft
MIAT LIQUORS INC	166 2ND AVE	1195 ft

Churches within 500 Feet

Name	Approx. Distance
Community Synagogue Max D Raiskin Center	500 ft
Saint Mark's Evangelical Lutheran Church	500 ft

Schools within 500 Feet

ame	Address	Approx. Distance	
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On-Premise Licenses within 750 Feet

Name	Address	Approx. Distance
JUSTIFIED LLC	102 1ST AVENUE	105 ft
INSIANG LLC	111 1ST AVE	125 ft
MOLINERO LLC	107 1ST AVE	140 ft
SADA TWO LLC	105 1ST AVE	140 ft
HOUSE OF HEALTH HEALING AND HAPPINESS	405 E 6TH ST	145 ft
INC, THE		
FTCCM LLC	103 1ST AVE	145 ft
GETURDUN EZ LLC	120 1/2 1ST AVENUE	150 ft
UMM HOSPITALITY INC	99 1ST AVE	170 ft
W C O U RADIO INC	115 1ST AVENUE	170 ft
YORI NYC CORP	119 1ST AVE	195 ft
EDWIN & NEAL'S LLC	345 E 6TH ST	215 ft
1465 CDM INCORPORATED	126 1ST AVENUE	220 ft
FIGARO VILLAGGIO INC	344 E 6TH ST	235 ft
PARMYS KABOB AND GRILL INC	125 127 1ST AVE	245 ft
MARRY THE KETCHUP INC	95 1ST AVE	255 ft

Name	Address	Approx. Distance
JAMIE COFFEE LLC	81 E 7TH ST	255 ft
BLUE & GOLD BAR INC	79 E 7TH STREET	270 ft
EAST 6TH STREET RESTAURANT GROUP LLC	342 E 6TH ST	275 ft
CHERRY TAVERN INC	441 E 6TH STREET	280 ft
ST MARKS ENTERPRISES INC	132 1ST AVENUE	295 ft
TOMKIN SQUARE KIDS INC	73 75 E 7TH STREET	325 ft
SCHEIB S PLACE INC	80 ST MARKS PLACE	340 ft
CULLEN RESTAURANT INC	118 ST MARKS PLACE	355 ft
SADA THREE LLC	132 ST MARKS PL	400 ft
LITTLE REBEL INC	134 1ST AVE	410 ft
TAQUERIA SAINT MARKS PLACE INC	79 SAINT MARKS PL	415 ft
LITTLE HANDS PLAYCAFE INC	433 E 6TH ST	415 ft
FELLOW TRAVELERS LTD	83 1ST AVENUE	420 ft
BARMAR LLC	77 ST MARKS PLACE	425 ft
75 ST MARKS PLACE LLC	75 ST MARKS PL	435 ft
BIG LEE AND SASHAS INC	140 1ST AVE	470 ft
C & V 77 ENTERPRISES LLC	1475 77 1ST AVENUE	490 ft
BUA NEW YORK LLC	122 SAINT MARKS PLACE	530 ft
CRIF DOGS ENTERPRISES INC	113 ST MARKS PLACE	560 ft
TDDG INC	126 ST MARKS PL	560 ft
BAC 115 CORP	115 ST MARKS PL	580 ft
A H 103 CORP	103 AVENUE A	635 ft
LE MIU CORP	107 AVE A	635 ft
SEVEN A CAFE INC	130 E 7TH STREET	635 ft
MOONWALKERS RESTAURANT CORP	101 AVENUE A	635 ft
NEW STATFORD RESTAURANT INC	121 ST MARKS PLACE	640 ft
YUCA BAR & RESTAURANT INC	111 AVENUE A	640 ft
FUN HAT LLC	308 E 6TH ST	650 ft
THREE BEANS INC	93 AVENUE A	655 ft
IMMIGRANT TAP ROOM INC	341 E 9TH ST	660 ft
IMMIGRANT WINE BAR LLC, THE	341 E 9TH ST	660 ft
119 AVENUE A RESTAURANT CORP	119 AVENUE A	660 ft
BRICKLANE CURRY HOUSE INC	306 308 E 6TH ST	670 ft
CIEN FUEGOS LLC	95 AVENUE A	675 ft
BOGGY DEPOT INC	85 AVENUE A	680 ft
FENIX REST INC	1061 63 1ST AVENUE	680 ft
AVE A KARAOKE CORP	81 AVENUE A	690 ft
EAE CORP	94 96 AVENUE A	690 ft
BYTELOGICS INC	304 E 6TH ST	695 ft
CAFETASIA INC	85 AVENUE A	695 ft
TOZZER LTD	112 AVENUE A	700 ft
LOVE PICIN INC	153 1ST AVENUE	710 ft
CORSICA ENTERTAINMENT INC	505 E 6TH STREET	720 ft

Pending Licenses within 750 Feet

Name Address Approx. Dist	
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Name	Address	Approx. Distance
MOLINERO LLC	107 1ST AVE	125 ft
FIRST HOSPITALITY LLC	105 1ST AVE	145 ft
RIVKA INC	101 ST MARKS PLACE	355 ft
PAPILLES LLC	127 E 7TH ST	485 ft
143 RESTAURANT CORP	143 1ST AVENUE	505 ft
SONS OF BROOKLYN LLC	424 E 9TH ST	595 ft
KING ME KONG LLC	119 SAINT MARKS PL	605 ft

Unmapped licenses within zipcode of report location

NI	A -1-1	
Name	Address	
i tailio	7.444.000	