

THE CITY OF NEW YORK MANHATTAN COMMUNITY BOARD 3

59 East 4th Street - New York, NY 10003 Phone (212) 533-5300 www.cb3manhattan.org - mn03@cb.nyc.gov

Andrea Gordillo, Board Chair

Susan Stetzer, District Manager

| ī | JU | I-CHAI LU | | , as a qualified repr | esentative of | Arping Restau | rant 6688 Inc |
|------|------|--------------------------|--|--|--|--|--|
| loca | ted | at | 45 Divisio | n Street | , New York | , NY agree to the follow | ing stipulations: |
| | | | erate a full-service resta | urant, specifically a (typ | e of restaurant)_ | CHINESE REST | AURANT |
| | X | Kitchen | open and serving food | every night during all ho | ours of operation. | | |
| 2. | MAG | n 8.30 A | operation will be: M-9:00PM ; Tue M-9:00PM ; Fri _ | 8:30AM-9:00PM CLOSD | ; Wed <u>8:30A</u> _; Sat <u>8:30AM</u> - | M-9:00PM ; Sun | 3:30AM-9:00PM |
| l ui | | | | | | | ss at specified closing hour |
| 3. | out | door dini | ng by 10:00 p.m. all day | roadbed dining as allow s and not have any mus approved outdoor spac | sic, speakers or tv | monitors. I will not have | orogram but will close all e commercial use of |
| 4. | at : | l0:00 p.m ying, inclu | . every night or when a | ade doors and windows mplified sound is DJs, live music and live | windows or when | except my entrance do | de with no open doors or or will close by 10:00 p.m. ng, including but not limite sical performances. |
| 5. | | | | ☑ promoted events, ☑ private parties per | | ich a cover fee is charge | ed, 🗵 scheduled |
| 5. | X | I will pla | y ambient recorded ba | ckground music only | 1 number of T | /s. | |
| - | | I will no | | to the method of oper | ation or for any pl | nysical alterations of an | nature without first |
| 3. | X | I will no | t seek a change in class | to a full on-premises lic | uor license witho | ut first obtaining appro | val from CB 3. |
|). | X | I will no | t apply for an upgrade t | to a full on-premises liqu | uor license for at l | east one year after my | perations begin. |
| 0. | X | I will no | t participate in pub crav | wls or have party buses | come to my estab | lishment. | |
| 1. | X | I will no | t have unlimited drink s | specials, including boozy | brunches, with fo | ood. | |
| 2. | | | | drink specials with or w indicate one | | | appy hour and it will |
| 13. | X | I will no | t have wait lines outsid | e. 🗵 I will have a staff p | erson responsible | e for ensuring no loiteri | ng, noise or crowds outside |
| 4. | X | I will co | nspicuously post this st | ipulation form beside m | y liquor license in | side of my business. | |
| 15. | rev | Residen | ts may contact the man | nager/owner at the num operation if necessary i | ber below. Any c n order to minimi | omplaints will be addre ze my establishment's i | ssed immediately. I will mpact on my neighbors. |
| Va | me: | JUI- | CHAI LU | | Phone | Number: 212-966-6 | 588 |
| 16. | | will: | | | | | |
| | _ | | | | | | (10.0) |
| h | ereb | 4. | hat the information pr | ovided above is truthfu | ıl and accurate ba | | belief. |
| X | | ee 1 | al war | | | 02/27/2024 | |
| Sig | ned | | 46 | Tal 2-2.1 | | Dated | |
| Sw | orn | to this | 27 day of/ | Ceb. 2024 | | | DAOJIE JIANG PUBLIC, STATE OF NEW YORK |
| Sw | orn | to this | day of | -cb. evay | | Notary Pub My Comn | Reg |



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Andrea Gordillo, Board Chair

Susan Stetzer, District Manager

Community Board 3 Liquor License Application Questionnaire for Administrative Approval

| Today's Date: 02/27/2024 | | | | | | |
|--|---|--|--|--|--|--|
| APPLICANT | | | | | | |
| 1. | | | | | | |
| | Name of applicant and principle(s): ARPING RESTAURANT 6688 INC, JUI-CHAI LU | | | | | |
| 2. | Premise address: 45 DIVISION STREET, NEW YORK NY 10002 Cross streets: | | | | | |
| 3. | | | | | | |
| 4. | Trade name (DBA): | | | | | |
| 5. | Check which you are applying to: ☑ New liquor license ☐ 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: RESTAURANT WINE | | | | | |
| | Previous or current use of the location: RESTAURANT | | | | | |
| | . Corporation and trade name of current location: ARPING RESTAURANT 45 INC. | | | | | |
| | 1. Type of building and number of floors: MIXED USE BUILDING, 3 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? EATING & DRINKING | | | | | |
| 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): C6-1 | | | | | |
| 15. | How many licensed establishments are within 1 block? 4 | | | | | |
| 16. | . How many On-Premise (OP) liquor licenses are within 500 feet? 1 | | | | | |
| 17. | . Is premise within 200 feet of any school or place of worship? ☑ Yes ☐ No | | | | | |
| | | | | | | |
| | OPOSED METHOD OF OPERATION DECORDED MUSIC | | | | | |
| | Describe your method of operation: RECORDED MUSIC | | | | | |
| | .9. 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: 6 DAYS PER WEEK, MON-THUR, SAT-SUN, 8:30AM-9:00PM | | | | | |
| 22. | . Total number of table: 10 23. Total number of seats: 45 | | | | | |
| 24. How many stand-up bars / bar seats are located on the premise? 0 | | | | | | |
| | (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.) | | | | | |

Revised: December 2019

| 25. | Describe all bars (length, shape, and location): 0 | | | | | | |
|------------|--|--|--|--|--|--|--|
| 26. | Does premise have a full kitchen? ☑ Yes ☐ No | | | | | | |
| 27. | What are the hours kitchen will be open? 8:30AM-9:00PM | | | | | | |
| | What type of food is available for sale? CHINESE FOOD | | | | | | |
| 29. | Will a manager or principal always be on site? ☑ Yes ☐ No If yes, which? PRINCIPAL | | | | | | |
| | How many employees will there be? 5 | | | | | | |
| 31. | . Do you have or plan to install? ☐ French doors ☐ accordion doors ☐ 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 ☐ Jukebox ☐ DJ ☑ Tapes / CDs / iPod | | | | | | |
| 34. | If other type, please describe: | | | | | | |
| 35. | 5. What will be the music volume? ⊠ Background (quiet) □ Entertainment level | | | | | | |
| 36. | 5. Please describe your sound system: | | | | | | |
| 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? Kindly Direct and arrange people to a spacey area and do not block the sidewalk | | | | | | |
| 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? Kindly ask customers to lower volume inside and outside of the business so neighbors will not be affected | | | | | | |
| 42. | 2. Do you have sound proofing installed? ☐ Yes ☒ No | | | | | | |
| | 3. If not, do you plan to install sound-proofing? ☐ Yes ☒ No | | | | | | |
| | | | | | | | |
| <u>API</u> | PLICANT HISTORY | | | | | | |
| 44. | Has this corporation or any principal been licensed previously? ☐ Yes ☒ No ☐ If yes, please indicate name | | | | | | |
| | of establishment(s): | | | | | | |
| | Address: 45a. 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 business in the area? \square Yes \boxtimes No \square 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.

ATTENTION RESIDENTS & NEIGHBORS

ARPING RESTAURANT 6688 INC.

Company/DBA Name and Contact Number for Questions

plans to open a

RESTAURANT

(Please choose) Bar/Restaurant/Club and indicate if there will be a Sidewalk Café or Backyard Garden

at the following location

45 DIVISION STREET, NEW YORK NY 10002

Building Number and Street Name (Address)

This establishment is seeking a license to serve

BEER & WINE

Beer & Wine or Beer

JUI-CHAI LU, 212-966-6688

Applicant Contact Information

Contact the Applicant or COMMUNITY BOARD 3
With any questions or concerns.
mn03@cb.nyc.gov - www.cb3manhattan.org

ATTENTION RESIDENTS & NEIGHBORS 第 3 社區居民 請注意

公司名字(Company) and/和 聯繫人的資料 (Contact Info)

ARPING RESTAURANT 6688 INC., / JUI-CHAI LU, 212-966-6688

Plans to open a (以上的店主想要在第3社區申請生意相關牌照擴展生意)

RESTAURANT

(請選擇/please choose)

酒吧 (Bar)/餐館 (Restaurant) 戶外咖啡 (Sidewalk Café) or 或者 後院花園咖啡(Backyard Use)

45 DIVISION STREET, NEW YORK NY 10002

Address/生意地址

seeking a license to serve(以上的店主想要請以下相關酒牌照)

BEER & WINE

(請選擇/please choose)

啤酒和酒牌照 (Beer & Wine) or/或者 啤酒牌照 (Beer) or/或者 酒和烈酒牌照 (Wine & Liquor)

如有任何疑問或關注,請聯繫申請者或第三社區委員會 mn03@cb.nyc.gov - www.cb3manhattan.org

NEIGHBORING RESIDENTS VECINOS DE LA COMUNIDAD

Company Name/ Contact Info

Nombre de la Compañía/el teléfono de contacto

Plans to open a:

Planifique abrir un/una:

(Please choose) Bar/Restaurant sidewalk café/backyard use

(Favor de escoger) una Barra/un Restaurante un café de acera o un patio de atrás

address

dirección

Seeking a license to serve

En buscada de una licencia para servir:

Beer & Wine or Beer/Wine & Liquor

Cerveza y vino o cerveza/vino y bebidas alcohólicas

At COMMUNITY BOARD 3 SLA & DCA Licensing Committee Meeting En la JUNTA COMUNITARIA 3 La reunión del Comité de Licencias del SLA y del DCA

Si hay preguntas o inquietudes, favor de comuníquese con el solicitante o la Junta Comunitaria 3. mn03@cb.nyc.gov - www.cb3manhattan.org