

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. 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 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: August 1st 2014
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: RESTAURANT WINE
If alteration, describe nature of alteration: VPGRADE TO FULL LOUGR
Previous or current use of the location: RESTAURANT
Corporation and trade name of current license: ALEPPO SUDER LLC dba SLIDERS
APPLICANT:
Premise address: 64 + EAST II STREET, NEW YORK NY 10004
Premise address: 647 EAST 11th STREET, NEW YORK NY 10009 Cross streets: 11th STREET BETWEEN AVENUE B AND AVENUE C
Name of applicant and all principals: ALEPPO SLIDER LLC
HAZM ALIESSA
Trade name (DBA): SLIDER'S

Revised: February 2014

PREMISE: Type of building and number of floors: RESIDENTIAL & COMMERCIAL - 6 FLOORS
Type of building and number of floors: NESTBETOTING 7 COMMENCIAL OF LECONS
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 for any back or side yard use? Yes No What is maximum NUMBER of people permitted?
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): C2 - COMMERCIAL * RESIDENTIAL (MIXED USE)
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) Sunday - Wednesday 1/Am - 1Am Thursday - Saturday - 11Am - 3Am
Number of tables? Number of seats at tables? 38
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): BAY 12 SeA13
Does premise have a full kitchen 🗹 Yes 🗖 No?
Does it have a food preparation area? Yes No (If any, show on diagram)
ls food available for sale? ✓ Yes □ No If yes, describe type of food and submit a menu
What are the hours kitchen will be open? <u>VP TO ONE HOUR BEFORE CLOSING</u>
Will a manager or principal always be on site? We Yes I No If yes, which? MANAGER.
How many employees will there be?
Do you have or plan to install French doors accordion doors or windows?
Will there be TVs/monitors? ▼Yes □ No (If Yes, how many?)
Will premise have music? ₩ Yes □ No

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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:
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?
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.")
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?
APPLICANT HISTORY:
Has this corporation or any principal been licensed previously? Yes INo If yes, please indicate name of establishment: Heppo Slider, LLC Albla Slider Address: 1947 FAST 1HGCA
If we snlease indicate name of establishment: Aleppo Slider LLC Albla Slider
Address: 1047 EAST 1HGCT Community Board # 3
Dates of operation:
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? W Yes No If Yes, please
attach evolunation of evnerience 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.
or rectangle and an electronic and descented, a diff.
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

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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.

	CATION:
Но	w many licensed establishments are within 1 block?
Ho	w many On-Premise (OP) liquor licenses are within 500 feet?
Is j	oremise within 200 feet of any school or place of worship? 🗖 Yes 🏙 No
Ple imi out lice	MMUNITY OUTREACH: lase see the Community Board website to find block associations or tenant associations in the mediate vicinity of your location for community outreach. Applicants are encouraged to reach to community groups. Also use provided petitions, which clearly state the name, address, ense for which you are applying, and the hours and method of operation of your establishment at top of each page. (Attach additional sheets of paper as necessary).
me	e are including the following questions to be able to prepare stipulations and have the eting be faster and more efficient. Please answer per your business plan; do not plan to gotiate at the meeting.
	☐ I agree to close any doors and windows at 10:00 P.M. every night?
2.	☑ 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
3.	1 will play ambient recorded background music only.
4.	will not apply for an alteration to the method of operation agreed to by this stipulation without first coming before CB 3.
5.	\square I will not seek a change in class to a full on-premise liquor license. Or \square my business plan is to seek an upgrade at a later date.
	I will not participate in pub crawls or have party buses come to my establishment.
7.	I will not have a happy hour. Or Happy hour will end by Bon
8.	I will not have wait lines outside. If There will be a staff person outside to monitor sidewalk crowds and ensure no loitering.
9.	☒ Residents may contact the manager/owner at the following phone number. Any complaints will be addressed immediately and I will revisit the above-stated method of operation if necessary in order to minimize my establishment's impact on my neighbors.

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