

1 **Business License & Permits Committee**

**Item #: 02**

2

3 February 3, 2016

4

5 Julie Menin

6 Commissioner

7 Department of Consumer Affairs

8 42 Broadway

9 New York, NY 10004

10

11 **Re: Tor Restaurant LLC**  
12 **d/b/a Meme Mediterranean**  
13 *607 10<sup>th</sup> Avenue (43/44)*  
14 *Tables: 8/16 seats*

15

16

17 Dear Chairman Rosen:

18

19 Manhattan Community Board 4 (MCB4) recommends **denial** of a new Unenclosed Sidewalk Cafe  
20 License application for Meme Mediterranean – 607 10<sup>th</sup> Avenue (43/44), **unless** the attached  
21 stipulations, agreed to by the applicant, are part of the method of operation for this establishment with 8  
22 tables and 16 seats.

23

24 Sincerely,

25

26

27

28

Delores Rubin  
Chair

Burt Lazarin  
Co-Chair  
Business License & Permits  
Committee

Frank Holozubiec  
Co-Chair  
Business License & Permits  
Committee

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30

# Manhattan Community Board 4

# Liquor License Stipulations Application

(All Fields Must Be Completed)

<b>CORPORATION NAME</b>		<b>DOING BUSINESS AS (DBA)</b>	
Tor Restaurant LLC		Meme Mediterranean	
<b>STREET ADDRESS</b>		<b>CROSS STREETS</b>	<b>ZIP CODE</b>
607 Tenth Avenue		West 43rd & 44th Streets	10036
<b>OWNER</b> <i>(Attach a list of all the people that will be associated listed with the license)</i>	<b>NAME:</b> Yakov Cohen	<b>ATTORNEY/ REPRESENTAIVE</b>	<b>NAME:</b> Robert S Bookman
	<b>PHONE:</b> 917-945-2327		<b>PHONE:</b> 212-513-1988
	<b>EMAIL:</b> jacobcohen581@gmail.com		<b>EMAIL:</b> rbookman@pandblegal.com
<b>MANAGER</b>	<b>NAME:</b> Zion Alon Cohen	<b>LANDLORD</b>	<b>NAME:</b> Rudolf Brilliant Alonzo
	<b>PHONE:</b> 917-609-4474		<b>PHONE:</b> 917-971-6127
	<b>EMAIL:</b> mememediterranean@gmail.com		<b>EMAIL:</b>
<b>APPLICATION TYPE</b> (Check One) <i>N/A - An Application for an Unenclosed Sidewalk Cafe</i>			
<input type="radio"/> <b>New</b>	Has applicant owned or managed a similar business?		<input type="checkbox"/> YES <input type="checkbox"/> NO
	What is/was the name and address of establishment?		
	What were the dates applicant was involved with this former premise?		
<input type="radio"/> <b>Transfer</b>	What is the prior license # and expiration date?		
	Is applicant making any alterations or operational changes?		<input type="checkbox"/> YES <input type="checkbox"/> NO
	<i>If alterations or operational changes are being made, please describe/list all changes.</i>		
<input checked="" type="radio"/> <b>Alteration</b>	What is the current license # and expiration date?		
	<i>Please list/describe the nature of all the changes and attach the plans:</i> <b>ADD SIDEWALK CAFE</b>		
<b>METHOD OF OPERATION</b> <i>N/A - An Application for an Unenclosed Sidewalk Cafe</i>			
<b>TYPE OF ALCOHOL</b>	<input type="radio"/> Liquor/Wine/Beer <input type="radio"/> Beer <input type="radio"/> Wine & Beer		
<b>ESTABLISHMENT TYPE</b>	<input type="radio"/> Restaurant <input type="radio"/> Cabaret <input type="radio"/> Night Club <input type="radio"/> Hotel <input type="radio"/> Bar/Tavern <input type="radio"/> Catering Establishment <input type="radio"/> Adult Entertainment <input type="radio"/> Wine Bar <input type="radio"/> Dance Club <input type="radio"/> Sports Bar <input type="radio"/> Club (Fraternal Organization – Members Only)		
Has applicant/owner filed with the SLA? If yes, when? If no, when do you plan to file?		<input type="checkbox"/> YES	<input type="checkbox"/> NO
Is the 500 Foot Rule applicable? If yes, please attach a diagram of the On-Premise liquor license establishments within a 500 ft. radius of your establishment and the Public Interest Statement.		<input type="checkbox"/> YES	<input type="checkbox"/> NO
Is the 200 Foot Rule applicable? If yes, please attach a diagram of the schools and houses of worship that trigger the rule.		<input type="checkbox"/> YES	<input type="checkbox"/> NO
Has applicant/owner(s) read MCB4 Policy Regarding Concentration and Location of Alcoholic-Serving Establishments?		<input type="checkbox"/> YES	<input type="checkbox"/> NO

**OPERATIONAL DETAILS** (\*Closing time will be when establishment is vacated of all patrons ) **Sidewalk Cafe Hours Only**

HOURS* <i>(Indoor Only)</i>		MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY
	Operation	12pm-12am	12pm-12am	12pm-12am	12pm-12am	12pm-12am	10am-12am	10am-11pm
	Kitchen							
	Music							
If you plan to have music, what type(s)? (Circle all that apply)		BACKGROUND		LIVE MUSIC	DJ	JUKE BOX	KARAOKE	

**OCCUPANCY**

	Capacity (Certificate of Occupancy)	Maximum # of Persons You Anticipate Occupying Premises (Including Employees)	Number of Tables	Number of Seats	Number of Service Only Bars	Number of Stand-Up Bars	Number of Seats at Stand-Up Bar
<b>INSIDE</b>							
<b>OUTSIDE</b> <i>(Other than sidewalk café)</i>							
<b>SIDEWALK CAFÉ</b>	16	16	8	16			

How many floors are there? What is the capacity for each floor?	<b>1 plus basement for storage</b>		
How frequently will the owner(s) be at the establishment?			
Will you be applying or intending to apply for a cabaret license with DCA? If yes, will there be dancing?	YES	<input checked="" type="radio"/>	
Will applicant have bottle or table service for beverage alcohol?	YES	<input checked="" type="radio"/>	
Will you be hosting private, promotional or corporate events?	YES	<input checked="" type="radio"/>	
Will outside promoters be used on a regular basis? If yes please describe.	YES	<input checked="" type="radio"/>	
Will you have a security plan? If, yes please attach.	YES	<input checked="" type="radio"/>	
Will security plan be implemented?	YES	NO	N/A
Will State certified security personnel be used?	YES	NO	N/A
Will New York Nightlife Association and NYPD Best Practices be followed?	YES	NO	N/A
Will applicant be using delivery bicycles? If yes, how many?	YES	<input checked="" type="radio"/>	
Will delivery bicycles be clearly marked with the name of the restaurant and will staff wear attire clearly noting name as described by NYC Law?	YES	NO	N/A
Where will delivery bicycles be stored during the day when not in use?	N/A		

**LOCATION & ZONING**

Is this a Special District? If yes, is it Clinton, West Chelsea or Hudson Yards?	<input checked="" type="radio"/>	NO	Clinton
Does the building have a Certificate of Occupancy ("C of O") or a letter of no objection?	<input checked="" type="radio"/>	NO	
Is a Public Assembly permit required?	YES	<input checked="" type="radio"/>	
Are your plans filed with DOB?	YES	NO	

**Community Notification/Relations**

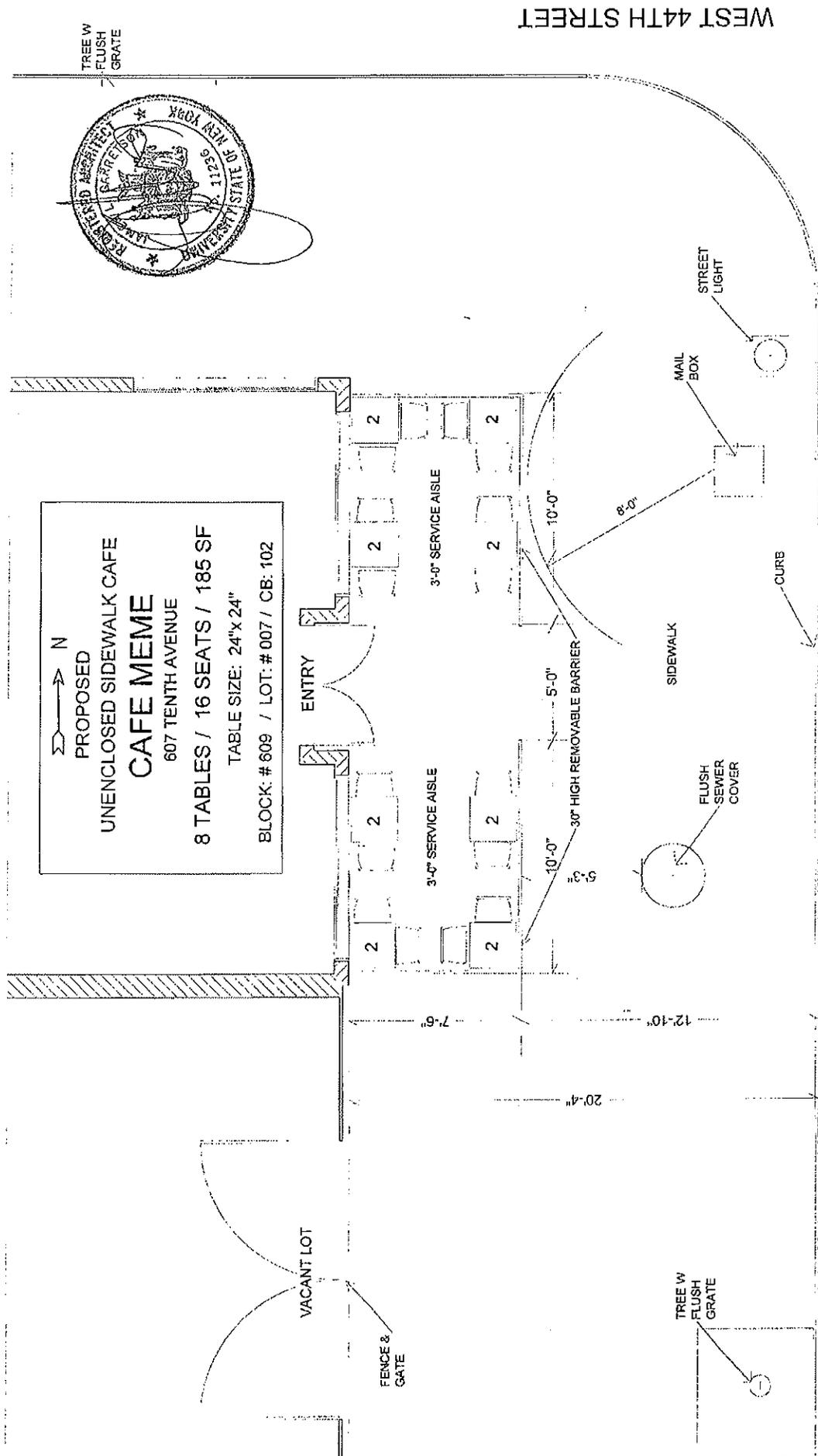
<b>NOTIFICATION:</b> List all block associations; tenant associations, co-op boards or condo boards of residential buildings; and community groups that applicant has notified regarding its application. For each please list both the organization and individual you contacted	# 1	
	# 2	
	# 3	
	# 4	
	# 5	
Please provide dates when applicant met with the groups listed above.		
Who was your contact person at each group you met with?		
When did applicant post the notice that was provided?		
Where did applicant post the notice that was provided?		
Will applicant provide owner cell phone number to neighbors and respond to complaints that arise? Please provide number in space provided.	YES	NO
Will applicant inform the Community Board office of its job openings and/or provide a hyperlink to applicants jobs webpage?	YES	NO

<b>BUILDING DESIGN</b>				<b>N/A</b>		
State the name and type of business previously located in the space.						
Has a liquor-licensed establishment previously occupied this space at any time? If yes, please provide the name of the business.				YES	NO	
Do you plan any changes to the existing façade? If yes, please describe.				YES	NO	
Will applicant have a vestibule within the establishment?				YES	NO	
Will applicant use a storm enclosure?				YES	NO	
Will applicant not place any items or obstructions on the sidewalk, for example, sandwich boards, sidewalk signs, freestanding menus and plants, as per the law?				YES	NO	
Will applicant comply with the NYC noise code?				YES	NO	
Will the establishment have any of the following: (circle all that apply)				<b>FRENCH DOORS</b>	<b>GARAGE DOORS</b>	<b>WINDOWS THAT CAN BE OPENED</b>
Will applicant close all windows, French doors, garage doors when any music or amplified sound (including televisions) is played inside the establishment?				YES	NO	
Will applicant close all windows, French doors, garage doors by 11 PM Friday and Saturday and 10 PM on all other days even if no music or amplified sound is played inside the establishment?				YES	NO	
Has applicant obtained an acoustical report from a certified sound engineer to assess potential noise disturbance to the neighboring residents and buildings?				YES	NO	
Will applicant follow the recommendations of a certified sound engineer to mitigate potential noise disturbance to the neighboring residents and buildings, including placing speakers on the floor of the establishment?				YES	NO	
Will the kitchen exhaust system extend to the roof?				YES	NO	
Will the establishment have an illuminated sign?				YES	NO	
Will the establishment have a canopy extending over the sidewalk?				YES	NO	
Where will the air conditioner be located? What type is it?						
When was the air conditioner installed?						

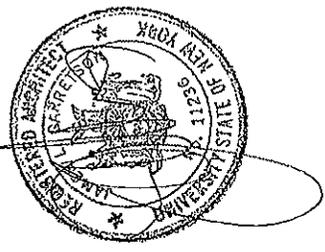
<b>OUTDOOR ITEMS - OTHER THEN SIDEWALK CAFÉ</b>		<b>N/A</b>	
Has the applicant/owner(s) read MCB 4 Rear Yard Rooftop Policy?	YES	NO	
Will applicant use any outdoor spaces: rooftop, rear yard, patio, porch, balcony, pavilion, tents, deck or gazebo? If yes, which one(s)?	YES	NO	
Are the floorplans for the outdoor space(s) included?	YES	NO	
Will applicant close and vacate the outdoor space(s) by 11PM on Friday & Saturday and 10 PM on all other days?	YES	NO	
Will the service and consumption of alcohol in any outdoor space only be via seated food service?	YES	NO	
Will applicant not allow standing space for patrons to drink or smoke in any outdoor space(s)?	YES	NO	
Will there be no amplified music, as per the law?	YES	NO	
If amplified sound is played inside the establishment, will windows and doors be closed?	YES	NO	
Will applicant agree to post signs outside asking customers to respect the neighbors'?	YES	NO	
Will applicant agree to train staff to encourage a peaceful environment?	YES	NO	
Will applicant provide effective sound control (landscaping enclosure, soundproofing tenants apartments)	YES	NO	
Will there be a lighting plan that allows safe usage of the outdoor space without disrupting neighbors?	YES	NO	

## OUTDOOR ITEMS – SIDEWALK CAFÉ

Has the applicant/owner(s) read MCB4 Sidewalk Café Policy?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	
Will applicant be applying for a sidewalk café now or in the future?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	
Is applicant in this application seeking to include a sidewalk café in its liquor license?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	
If yes, has applicant submitted an application and plans to NYC Dept. of Consumer Affairs? Please attach application and plans.	<input checked="" type="radio"/> YES	<input type="radio"/> NO	
Will applicant close and vacate the sidewalk café by 11 PM on Friday & Saturday and 10 PM on all other days?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	yes g.c
Will applicant be serving alcohol in the sidewalk café? If so, will you have waiter service?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	
Will the café have a 3 ft. wide serving aisle running the entire length of the sidewalk cafe?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	
Will applicant mark the perimeter of the café on the sidewalk?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	
Will the service and consumption of alcohol in the sidewalk café only be via seated food service?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	
Will the sidewalk café not provide standing space for drinking or smoking?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	
Will applicant use any portable natural gas heaters? If so, do you have the requisite approvals from DOB & the Fire Department?	YES	<input checked="" type="radio"/> NO	
Will applicant have a lighting plan that will allow safe usage of the outdoor space without disrupting neighbors?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	
Will all furniture, plants and barricades be stored inside between the evening closing hours and the morning opening hours?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	
Will all furniture be stored inside between December 21 <sup>st</sup> and March 21 <sup>st</sup> , and any other day when it rains or snows?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	
Will applicant use umbrellas?	YES	<input checked="" type="radio"/> NO	
If construction or construction protection has reduced the sidewalk width, will applicant always maintain an 8 foot clear path of sidewalk between the perimeter of the café and the closes obstruction including construction barricades?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	



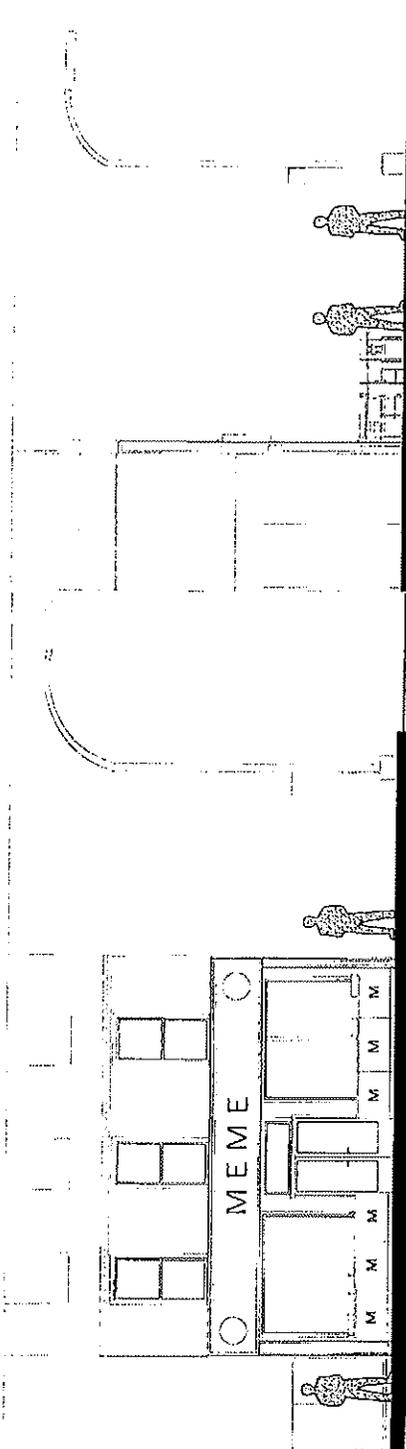
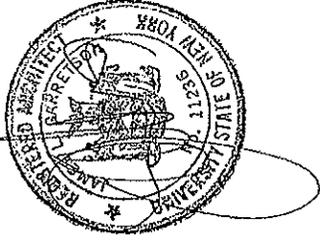
N  
 PROPOSED  
 UNENCLOSED SIDEWALK CAFE  
**CAFE MEME**  
 607 TENTH AVENUE  
 8 TABLES / 16 SEATS / 185 SF  
 TABLE SIZE: 24"X24"  
 BLOCK: # 609 / LOT: # 007 / CB: 102



WEST 44TH STREET

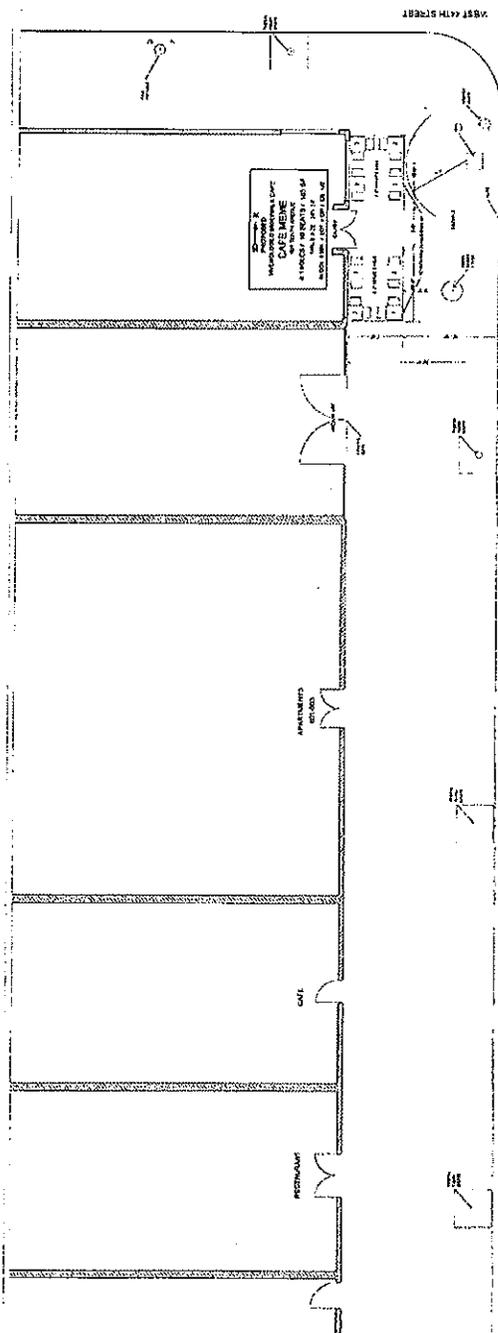
**SITE PLAN**  
 SCALE: 1/4" = 1'-0"

		<b>CAFE MEME</b> 607 10th AVENUE, NYC	DATE: 12/22/15 REVISED:	<h1>1</h1>
	<b>JAMES GARRETSON AIA ARCHITECT</b> 184 WEST 70TH STREET, SUITE 8L, NEW YORK, NY 10024 212-316-3882 FAX 212-318-9413	<b>PROPOSED SIDEWALK CAFE</b>		



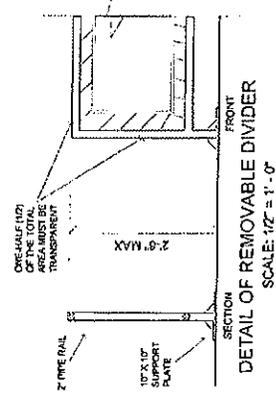
ELEVATION / SECTION  
SCALE: 1/8" = 1'-0"

SCALE: 1/8" = 1'-0"



EXENDED SITE PLAN  
SCALE: 1/16" = 1'-0"

SCALE: 1/16" = 1'-0"



DETAIL OF REMOVABLE DIVIDER  
SCALE: 1/2" = 1'-0"

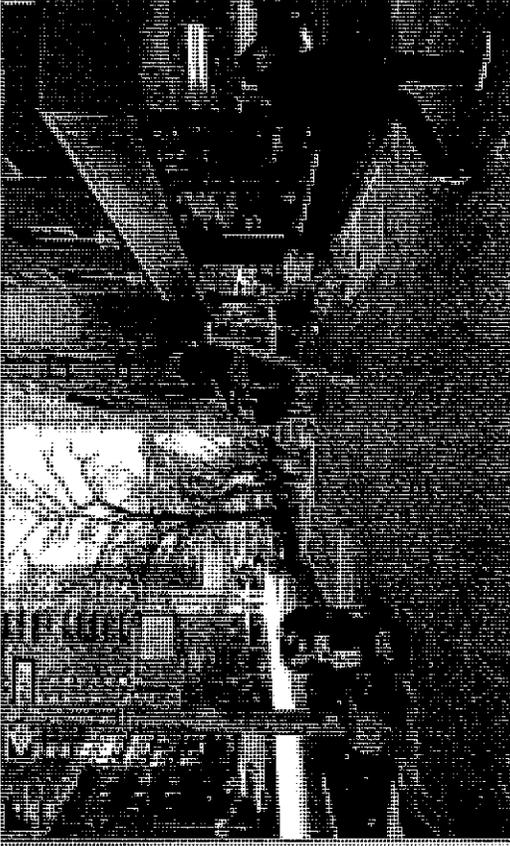
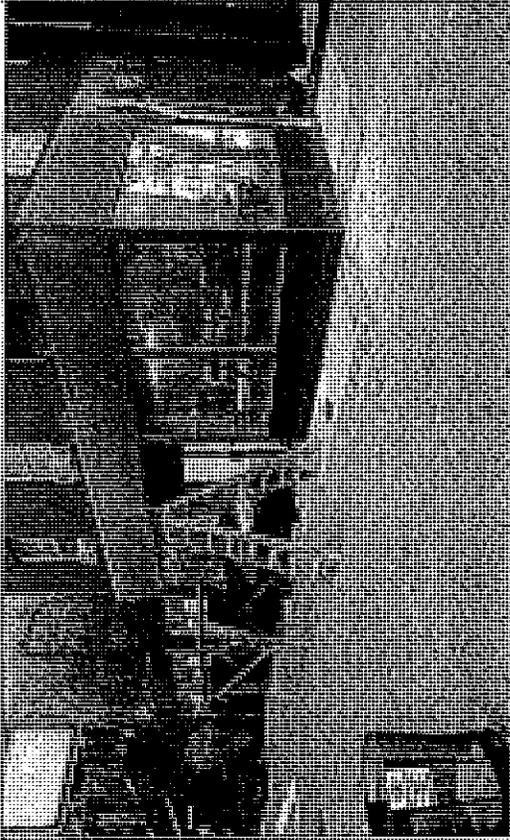
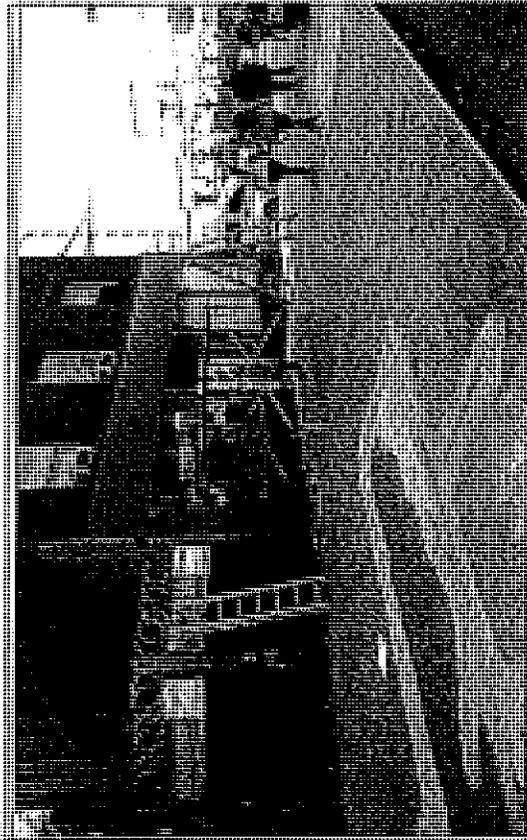
N  
 PROPOSED SIDEWALK CAFE  
 10TH AVENUE  
 WEST 44TH STREET

JAMES GARRETSON AIA ARCHITECT  
 154 WEST 70TH STREET, SUITE 5B, NEW YORK, NY 10024  
 212-316-5892 FAX: 212-316-5819

PROPOSED  
 SIDEWALK CAFE

CAFE MEME  
 607 10th AVENUE, NYC

DATE: 12/23/15  
 REVISED:



**SITE  
PHOTOS**



**JAMES O'NEILL/STONER AND ASSOCIATES**  
 ARCHITECT  
 100 WEST 42ND STREET, 10TH FLOOR  
 NEW YORK, NY 10018

**PROPOSED  
SIDEWALK CAFE**

**CAFE MEME**  
 607 100th AVENUE, NYC

**DATE: 08/08/10**  
**REVISION:**

1 **Business License & Permits Committee**

Item #: 03

2  
3 February 3, 2016

4  
5 Vincent G. Bradley  
6 Chairman  
7 New York State Liquor Authority  
8 80 S. Swan Street, 9<sup>th</sup> Floor  
9 Albany, New York 12210

10  
11 **Re: Top Brass LLC**  
12 *290 8<sup>th</sup> Avenue (24/25)*

13  
14 Dear Chairman Bradley:

15  
16 Manhattan Community Board 4 (MCB4) recommends **denial** of a new On-Premise Liquor License  
17 application for Top Brass LLC – 290 8<sup>th</sup> Avenue (24/25), **unless** the attached stipulations, agreed to and  
18 signed by the applicant, are part of the method of operation for this establishment with a capacity of 285,  
19 36 tables, 118 seats and 1 stand-up bar with 18 seats.

20  
21 Sincerely,

22  
23  
24 Delores Rubin  
Chair

Burt Lazarin  
Co-Chair  
Business License & Permits  
Committee

Frank Holozubiec  
Co-Chair  
Business License & Permits  
Committee

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**Manhattan Community Board 4**  
(All Fields Must Be Completed)

Liquor License Stipulations Application

CORPORATION NAME Top Brss LLC		DOING BUSINESS AS (SDBA)	
STREET ADDRESS 290 8th Avenue New York, NY		CROSS STREETS 24th And 25th	CITY/ZIP 10036
OWNER <i>(Attach a list of all the people that will be associated/listed with the license)</i>	NAME Victor Guadagnino, MD	NAME Neil M. Visoky, Esq.	
	PHONE 718344-7732	PHONE 718 720-7600	
	EMAIL	EMAIL abclaw@aol.com	
MANAGER	NAME JUVENTINO AVLIA	NAME 290 Eighth Ave LLC Shelley Kaufman	
	PHONE 718-360-8469	PHONE 212 682 7250	
	EMAIL WWW.JUVENTINO NYC.COM	EMAIL ikcpapc@aol.com	
APPLICATION TYPE			
<input checked="" type="radio"/> New	Has applicant owned or managed a similar business?		YES NO
	What is/was the name and address of establishment?		
	What were the dates applicant was involved with this former premise?		
<input type="radio"/> Transfer	What is the prior license # and expiration date?		
	Is applicant making any alterations or operational changes?		YES NO
	If alterations or operational changes are being made, please describe/list all changes.		
<input type="radio"/> Alteration	What is the current license # and expiration date?		
	Please list/describe the nature of all the changes and attach the plans:		
METHOD OF OPERATION			
TYPE OF ALCOHOL	<input checked="" type="checkbox"/> Liquor/Wine/Beer <input type="checkbox"/> Beer <input type="checkbox"/> Wine & Beer		
ESTABLISHMENT TYPE	<input checked="" type="checkbox"/> Restaurant <input type="checkbox"/> Cabaret <input type="checkbox"/> Night Club <input type="checkbox"/> Hotel <input type="checkbox"/> Bar/Tavern <input type="checkbox"/> Catering Establishment <input type="checkbox"/> Adult Entertainment <input type="checkbox"/> Wine Bar <input type="checkbox"/> Dance Club <input type="checkbox"/> Sports Bar <input type="checkbox"/> Club (Fraternal Organization - Members Only)		
Is the 500 Foot Rule applicable? If yes, please attach a diagram of the establishments within 500 ft. of your primary entrance and the Public Interest Statement.	YES NO		
Is the 200 Foot Rule applicable? If yes, please attach a diagram of the schools and houses of worship that trigger the rule.	YES NO		
Has applicant/owner(s) read MCB4 Policy Regarding Concentration and Location of Alcoholic-Serving Establishments?	YES NO		

**OPERATIONAL DETAILS** (Please print and fill in when establishing a record of hours of operation)

		MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY
HOURS* (Indoor Only)	Operation	9-12	9-12	9-12	9-1am	9-1am	9-1am	9-12
	Kitchen	11-12	11-12	11-12	11-1am	11-1am	9-1am	9-12
	Music	11-12	11-12	11-12	11-1am	11-1am	9-1am	9-12

If you plan to have music, what type(s)? (Check all that apply)

<input checked="" type="checkbox"/> BACKGROUND	<input checked="" type="checkbox"/> LIVE MUSIC	<input type="checkbox"/> DJ	<input type="checkbox"/> MUSIC BOX	<input type="checkbox"/> KARAOKE
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	Capacity of Seating (Indoor/Outdoor)	Maximum Number of Seating (Indoor/Outdoor)	Number of Tables	Number of Bars	Number of Servers On Duty	Number of Employees (Indoor/Outdoor)	Number of Employees (Indoor/Outdoor)
INSIDE	285	175	36	118	0	1	18
OUTSIDE (Other than sidewalk cafe)	n/a						
SIDEWALK CAFE	n/a						

How many floors are there? What is the capacity for each floor? 2

How frequently will the owner(s) be at the establishment? full time, Hours will vary.

Will you be applying or intending to apply for a cabaret license with DCA? If yes, will there be dancing?	<input checked="" type="checkbox"/>	
Will applicant have bottle or table service for beverage alcohol?	<input checked="" type="checkbox"/>	
Will you be hosting private, promotional or corporate events?	<input checked="" type="checkbox"/>	
Will outside promoters be used on a regular basis? If yes please describe.	<input checked="" type="checkbox"/>	
Will you have a security plan? If, yes please attach.	<input checked="" type="checkbox"/>	
Will security plan be implemented?	<input checked="" type="checkbox"/>	
Will State certified security personnel be used?	<input checked="" type="checkbox"/>	
Will New York Nightlife Association and NYPD Best Practices be followed?	<input checked="" type="checkbox"/>	
Will applicant be using delivery bicycles? If yes, how many?	<input checked="" type="checkbox"/>	
Will delivery bicycles be clearly marked with the name of the restaurant and will staff wear attire clearly noting name as described by NYC Law?	<input checked="" type="checkbox"/>	N/A
Where will delivery bicycles be stored during the day when not in use?	<input checked="" type="checkbox"/>	N/A

*WY*

LOCATION & ZONING		
Is this a Special District? If yes, is it Clinton, West Chelsea or Hudson Yards?	YES	NO
Does the building have a Certificate of Occupancy ("C of O") or a letter of no objection?	YES	NO
Is a Public Assembly permit required?	YES	NO
Are your plans filed with DOB?	YES	NO

Community Notification/Relation		
<b>NOTIFICATION:</b> List all block associations; tenant associations, co-op boards or condo boards of residential buildings; and community groups that applicant has notified regarding its application.	# 1	see attached list of block associations
	# 2	
	# 3	
	# 4	
	# 5	
Please provide dates when applicant met with the groups listed above.	No groups Requested so	
When did applicant post the notice that was provided?	October 6, 2015 and November 16, 2015, Dec. 19, 2015	
Where did applicant post the notice that was provided?	Block and behind the building	
Will applicant provide owner cell phone number to neighbors and respond to complaints that arise? Please provide number in space provided.		917-613-2734
Will applicant inform the Community Board office of its job openings and/or provide a hyperlink to applicant's job openings webpage?		

BUILDING DESIGN			
Will applicant have a vestibule within the establishment?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Will applicant use a storm enclosure?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Will applicant not place any items or obstructions on the sidewalk, for example, sandwich boards, sidewalk signs, freestanding menus and plants?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Will applicant comply with the NYC noise code?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Will the establishment have any of the following: (check all that apply) <i>N/A</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Will applicant close all windows, French doors, and garage doors when any music or amplified sound (including televisions) is played?	<input type="checkbox"/>	<input type="checkbox"/>	<i>N/A</i>
Will applicant close all windows, French doors, garage doors by 11 PM Friday and Saturday and 10 PM on all other days, even if no music or amplified sound is played?	<input type="checkbox"/>	<input type="checkbox"/>	<i>N/A</i>
Has applicant obtained an acoustical report from a certified sound engineer to assess potential noise disturbance to the neighboring residents and buildings?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Will applicant follow the recommendations of a certified sound engineer to mitigate potential noise disturbance to the neighboring residents and buildings, including placing speakers on the floor of the establishment?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Will the kitchen exhaust system extend to the roof?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Will the establishment have an illuminated sign?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Will the establishment have a canopy extending over the sidewalk?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Where will the air conditioner be located? What type is it?	<i>Central AC Unit on Roof</i>		
When was the air conditioner installed?	<i>Approx 15 yrs Ago</i>		

OUTDOOR SPACE OTHER THAN SIDE PATIO		
Has the applicant/owner(s) read MCB 4 Rear Yard Rooftop Policy?	YES	NO
Will applicant use any outdoor spaces: rooftop, rear yard, patio, porch, balcony, pavilion, tents, deck or gazebo? If yes, which one(s)?	YES	NO
Are the floorplans for the outdoor space(s) included?	YES	NO
Will applicant close and vacate the outdoor space(s) by 11PM on Friday & Saturday and 10 PM on all other days?	YES	NO
Will the service and consumption of alcohol in any outdoor space only be via seated food service?	YES	NO
Will applicant not allow standing space for patrons to drink or smoke in any outdoor space(s)?	YES	NO
Will there be no amplified music, as per the law?	YES	NO
If amplified sound is played inside the establishment, will windows and doors be closed?	YES	NO
Will applicant agree to post signs outside asking customers to respect the neighbors'?	YES	NO
Will applicant agree to train staff to encourage a peaceful environment?	YES	NO
Will applicant provide effective sound control (landscaping enclosure, soundproofing tenants apartments)	YES	NO
Will there be a lighting plan that allows safe usage of the outdoor space without disrupting neighbors?	YES	NO

*[Handwritten signature]*

OUTDOOR SPACE		
Has the applicant/owner(s) read MCB4 Sidewalk Café Policy?	YES	NO
Will applicant be applying for a sidewalk café now or in the future?	YES	NO
Is applicant in this application seeking to include a sidewalk café in its liquor license?	YES	NO
If yes, has applicant submitted an application and plans to NYC Dept. of Consumer Affairs? Please attach application and plans.	YES	NO
Will applicant close and vacate the sidewalk café by 11 PM on Friday & Saturday and 10 PM on all other days?	YES	NO
Will applicant be serving alcohol in the sidewalk café? If so, will you have waiter service?	YES	NO
Will the café have a 3 ft. wide serving aisle running the entire length of the sidewalk café?	YES	NO
Will applicant mark the perimeter of the café on the sidewalk?	YES	NO
Will the service and consumption of alcohol in the sidewalk café only be via seated food service?	YES	NO
Will the sidewalk café not provide standing space for drinking or smoking?	YES	NO
Will applicant use any portable natural gas heaters? If so, do you have the requisite approvals from DOB & the Fire Department?	YES	NO
Will applicant have a lighting plan that will allow safe usage of the outdoor space without disrupting neighbors?	YES	NO
Will all furniture, plants and barricades be stored inside between the evening closing hours and the morning opening hours?	YES	NO
Will all furniture be stored inside between December 21 <sup>st</sup> and March 21 <sup>st</sup> , and any other day when it rains or snows?	YES	NO
Will applicant not use umbrellas?	YES	NO
If construction or construction protection has reduced the sidewalk width, will applicant always maintain an 8-foot clear path of sidewalk between the perimeter of the café and the closes obstruction including construction barricades?	YES	NO

NA

Photo is included towards End of Stipulation

\* Please see ATTACHED Interior Diagram  
Prepared by LANDRESS SIMON

Basement Diagram Included AND  
Photo Included of Basement  
which has kitchen, Offices,  
Bathroom and Utilities, storage

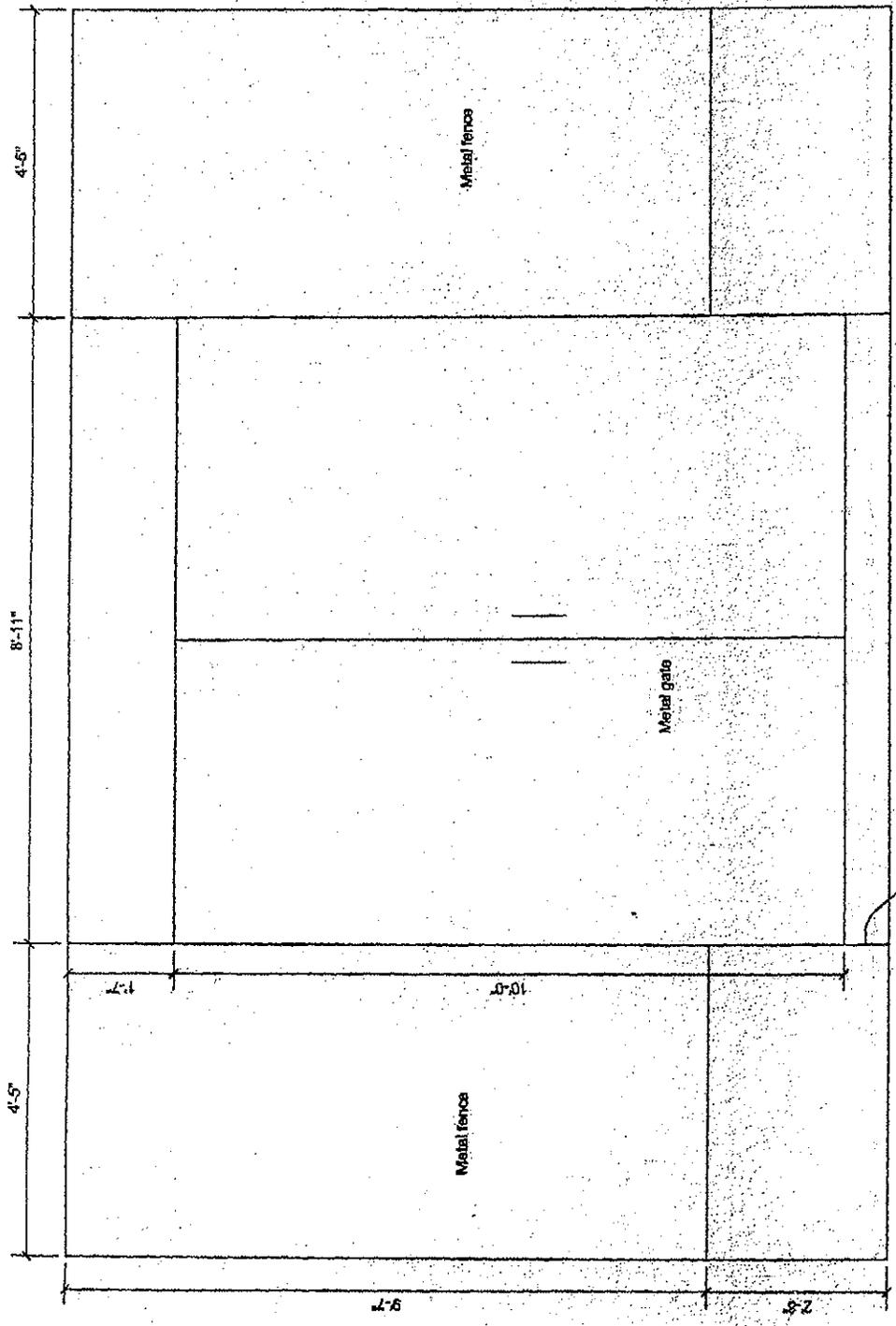
~~SECRET~~

- THERE WILL BE NO MORE THAN THREE LIVE MUSICIANS AT ANY TIME.
- APPLICANTS ACKNOWLEDGE THAT APPLICABLE ZONING DOES NOT PERMIT ENTERTAINMENT AT THIS LOCATION.
- APPLICANTS WILL MINIMIZE TIME GARBAGE IS LEFT BY THE ESTABLISHMENT.

- WILL IMPLEMENT ALL RECOMMENDATIONS OF 1/4/12 ACQUISITION ~~REPORT~~ REPORT
- PER ACQUISITION REPORT, ALL <sup>FOUND LEVEL</sup> ~~RECOMMENDATIONS~~ WILL BE KEPT BELOW 90 dBC.
- WILL HAVE ACQUISITION TO ~~ACQUISITION~~ CERTIFY THAT ALL RECOMMENDATIONS OF ACQUISITION REPORT HAVE BEEN IMPLEMENTED. COPY OF THIS CERTIFICATION WILL BE SUBMITTED TO BOARD OFFICE.
- NO USE OF SOUND EQUIPMENT OR SOUND SYSTEMS FOR AUGMENTATION/AMPLIFICATION PURPOSES.

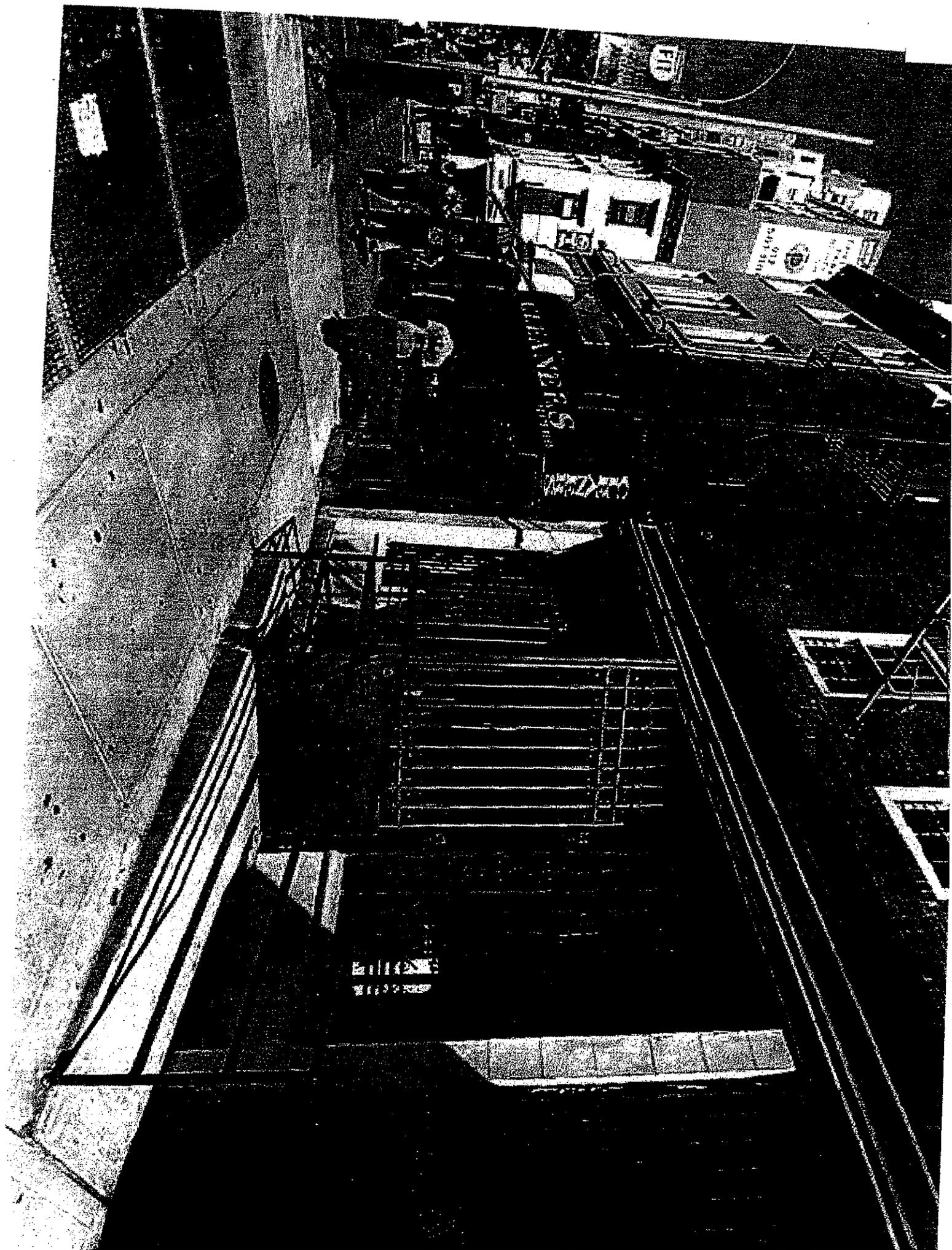


FRONT ELEVATION  
290 8th Avenue  
New York, NY  
September 17, 2015  
NOT TO SCALE









~Raw Bar~

---

Seafood Tower \$79/Royal \$119

Lobster, Mussels, Oysters, Jonah Crab, Clams, Prawns, Mignonette, Cocktail Sauce, Marie Rose

Iced Oysters on a Half Shell \$3.50/each

Grapefruit & Pink Peppercorn Mignonette

American Harvest Mussels \$10/dozen

Thai Green Curry Sauce

Little Neck Clams \$1.50/each

Jumbo Shrimp Cocktail \$20

House Made Cocktail Sauce

Maine Lobster \$29

Marie Rose Sauce

Jonah Crab Claws \$20

Mustard Aioli

~Cold Appetizers~

---

Beef Carpaccio \$17

Horseradish, Hon Shemeji, Pickled Squash, Pumpkin Seed

House Cured Salmon \$15

Trout Roe, Avocado, Citrus, Radish

Baby Beet Salad \$16

Brown Butter Lebne, Roasted Pear, Hazelnut

Kale & Pickled Apple Salad \$14

Parsnip, Walnuts, Mustard Vinaigrette

Duck Confit Salad \$17

Poached Egg, Smoked Bacon, Cranberries, Pecans

Charcuterie Board \$25

Chefs Selections of Cured Meats, Mousses & Pates

~Hot Appetizers~

---

Butternut Squash Bisque \$12

Maple Crème Fraiche, Pumpkin Seeds, Chives

Charred Portuguese Octopus \$17

Cannellini Beans, Piperade, Chorizo

American Harvest Mussels \$15

Nueske Bacon, Coconut Curry Broth, Cilantro

Berkshire Pork Belly \$17

Puy Lentils, Apple, Pickled Pepper Relish

Sea Scallops \$19

Parsnip, Leek, Pear, Prosciutto

~Compositions~

---

12oz Dry Aged NY Strip \$44  
Pomme Puree, Wild Mushrooms, Au Poivre

Braised Short Rib \$32  
Farro Butternut Squash, Hazelnut, Cranberry Jus

Niemen Ranch Pork Chop \$38  
Creamy Polenta, Broccolini, Cherry Pepper Jus

Long Island Duck Breast \$32  
Sweet Potato, Red Cabbage, Quince, Natural Jus

Wild Striped Bass \$29  
Herbed Chowder, Little Neck Clams, Parsnip, Pearl Onion

Scottish Salmon \$26  
Romanesco, Lacinato Kale, Olive Tapenade

Butternut Squash Risotto \$24  
Oyster Mushroom, Sage, Truffle

~Sides~

---

Truffle Polenta \$13  
Wild Mushroom, Madeira

Cauliflower \$10  
Golden Raisins, Grapes, Caper Vinaigrette

Crispy Brussels Sprouts \$10  
Honey, Chinese Mustard, Peanuts, Mint

Pomme Puree \$10  
Chives

Creamed Kale \$10  
Asiago, Nutmeg

Kennebec Fries \$10  
Malt Aioli

1 **Business License & Permits Committee**

Item #: 04

2  
3 February 3, 2016

4  
5 Vincent G. Bradley  
6 Chairman  
7 New York State Liquor Authority  
8 80 S. Swan Street, 9<sup>th</sup> Floor  
9 Albany, New York 12210

10  
11 **Re: Pad Thai Asian Kitchen Inc.**  
12 **d/b/a Pad Thai**  
13 *409 8<sup>th</sup> Avenue (30/31)*

14  
15 Dear Chairman Bradley:

16  
17 Manhattan Community Board 4 (MCB4) recommends **denial** of a transfer of a Wine & Beer License  
18 application for Pad Thai Asian Kitchen Inc d/b/a Pad Thai – 409 8<sup>th</sup> Avenue (30/31), **unless** the attached  
19 stipulations, agreed to and signed by the applicant, are part of the method of operation for this  
20 establishment with a capacity of under 80, 12 tables, 44 seats.

21  
22 Sincerely,

23  
24  
25 Delores Rubin  
Chair

Burt Lazarin  
Co-Chair  
Business License & Permits  
Committee

Frank Holozubiec  
Co-Chair  
Business License & Permits  
Committee

26  
27

# Manhattan Community Board 4

(All Fields Must Be Completed)

## Liquor License Stipulations Application

<b>CORPORATION NAME</b>		<b>DOING BUSINESS AS (DBA)</b>	
PAD THAI ASIAN KITCHEN INC		PAD THAI	
<b>STREET ADDRESS</b>		<b>CROSS STREETS</b>	<b>ZIP CODE</b>
409 8TH AVE		W 30TH ST & W 31ST ST	
<b>OWNER</b> <small>(Attach a list of all the people that will be associated listed with the license)</small>	<b>NAME:</b> RONG CAO	<b>ATTORNEY/ REPRESENTATIVE</b>	<b>NAME:</b> YING XU
	<b>PHONE:</b> 718-313-7351		<b>PHONE:</b> 718-697-9925
	<b>EMAIL:</b> RONCHAW@YAHOO.COM		<b>EMAIL:</b> YXLAMCO@GMAIL.COM
<b>MANAGER</b>	<b>NAME:</b>	<b>LANDLORD</b>	<b>NAME:</b> RIGGIO REALTY CORP
	<b>PHONE:</b>		<b>PHONE:</b> 212-594-8939
	<b>EMAIL:</b>		<b>EMAIL:</b>
<b>APPLICATION TYPE (Check One)</b>			
<input type="radio"/> <b>New</b>	Has applicant owned or managed a similar business?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
	What is/was the name and address of establishment?		
	What were the dates applicant was involved with this former premise?		
<input checked="" type="radio"/> <b>Transfer</b>	What is the prior license # and expiration date?	Serial#1151751, Expiration Date:06/30/2017	
	Is applicant making any alterations or operational changes?	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO
	If alterations or operational changes are being made, please describe/list all changes.		
<input type="radio"/> <b>Alteration</b>	What is the current license # and expiration date?		
	Please list/describe the nature of all the changes and attach the plans:		
<b>METHOD OF OPERATION</b>			
<b>TYPE OF ALCOHOL</b>	<input type="radio"/> Liquor/Wine/Beer <input type="radio"/> Beer <input checked="" type="radio"/> Wine & Beer		
<b>ESTABLISHMENT TYPE</b>	<input checked="" type="radio"/> Restaurant <input type="radio"/> Cabaret <input type="radio"/> Night Club <input type="radio"/> Hotel <input type="radio"/> Bar/Tavern <input type="radio"/> Catering Establishment  <input type="radio"/> Adult Entertainment <input type="radio"/> Wine Bar <input type="radio"/> Dance Club <input type="radio"/> Sports Bar <input type="radio"/> Club (Fraternal Organization – Members Only)		
Has applicant/owner filed with the SLA? If yes, when? If no, when do you plan to file?	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	After obtained approval from board meeting
Is the 500 Foot Rule applicable? If yes, please attach a diagram of the On-Premise liquor license establishments within a 500 ft. radius of your establishment and the Public Interest Statement.	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	
Is the 200 Foot Rule applicable? If yes, please attach a diagram of the schools and houses of worship that trigger the rule.	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	
Has applicant/owner(s) read MCB4 Policy Regarding Concentration and Location of Alcoholic-Serving Establishments?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	

**OPERATIONAL DETAILS** (\*Closing time will be when establishment is vacated of all patrons)

HOURS (Indoor Only)		MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY
	Operation	11:00am-11:00pm	11:00am-11:00pm	11:00am-11:00pm	11:00am-11:00pm	11:00am-11:00pm	11:00am-11:00pm	11:00am-11:00pm
	Kitchen	11:00am-11:00pm	11:00am-11:00pm	11:00am-11:00pm	11:00am-11:00pm	11:00am-11:00pm	12:00am-11:00pm	12:00am-11:00pm
	Music	11:00am-10:00pm	11:00am-10:00pm	11:00am-10:00pm	11:00am-10:00pm	11:00am-10:00pm	12:00am-10:00pm	12:00am-10:00pm
If you plan to have music, what type(s)? (Circle all that apply)			<input checked="" type="checkbox"/> BACKGROUND	<input type="checkbox"/> LIVE MUSIC	<input type="checkbox"/> DJ	<input type="checkbox"/> JUKE BOX	<input type="checkbox"/> KARAOKE	

**OCCUPANCY**

	Capacity (Certificate of Occupancy)	Maximum # of Persons You Anticipate Occupying Premises (Including Employees)	Number of Tables	Number of Seats	Number of Service Only Bars	Number of Stand-Up Bars	Number of Seats at Stand-Up Bar
<b>INSIDE</b>	80	50	12	44	N/A	N/A	N/A
<b>OUTSIDE</b> (Other than sidewalk café)	N/A						
<b>SIDEWALK CAFE</b>	N/A						

How many floors are there? What is the capacity for each floor?	Use 1st fl only with maximum 80 persons allowed	
How frequently will the owner(s) be at the establishment?	Everyday	
Will you be applying or intending to apply for a cabaret license with DCA? If yes, will there be dancing?	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>
Will applicant have bottle or table service for beverage alcohol?	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>
Will you be hosting private; promotional or corporate events?	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>
Will outside promoters be used on a regular basis? If yes please describe.	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>
Will you have a security plan? If, yes please attach.	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>
Will security plan be implemented?	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>
Will State certified security personnel be used?	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>
Will New York Nightlife Association and NYPD Best Practices be followed?	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>
Will applicant be using delivery bicycles? If yes, how many?	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>
Will delivery bicycles be clearly marked with the name of the restaurant and will staff wear attire clearly noting name as described by NYC Law?	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>
Where will delivery bicycles be stored during the day when not in use?	In the rear storage area	

LOCATION & ZONING			
Is this a Special District? If yes, is it Clinton, West Chelsea or Hudson Yards?	YES	<input checked="" type="checkbox"/> NO	
Does the building have a Certificate of Occupancy ("C of O") or a letter of no objection?	<input checked="" type="checkbox"/> YES	NO	
Is a Public Assembly permit required?	YES	<input checked="" type="checkbox"/> NO	
Are your plans filed with DOB?	<input checked="" type="checkbox"/> YES	NO	

Community Notification/Relations			
<b>NOTIFICATION:</b> List all block associations; tenant associations, co-op boards or condo boards of residential buildings; and community groups that applicant has notified regarding its application. For each please list both the organization and individual you contacted	# 1	mcgee79@aol.com, emailed notification on 12/22/2015	
	# 2	kathleentreat123@gmail.com, emailed notification on 12/22/2015	
	# 3		
	# 4		
	# 5		
Please provide dates when applicant met with the groups listed above.		Still waiting	
Who was your contact person at each group you met with?			
When did applicant post the notice that was provided?		12/28/2015	
Where did applicant post the notice that was provided?		On the entrance door	
Will applicant provide owner cell phone number to neighbors and respond to complaints that arise? Please provide number in space provided.		<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO 718-313-7351
Will applicant inform the Community Board office of its job openings and/or provide a hyperlink to applicants jobs webpage?		<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO

<b>BUILDING DESIGN</b>			
State the name and type of business previously located in the space.	PAD THAI 8TH AVE INC (restaurant)		
Has a liquor-licensed establishment previously occupied this space at any time? If yes, please provide the name of the business.	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>	PAD THAI 8TH AVE INC
Do you plan any changes to the existing façade? If yes, please describe.	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>	
Will applicant have a vestibule within the establishment?	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>	
Will applicant use a storm enclosure?	<del>YES</del>	NO <input checked="" type="checkbox"/>	<i>[Signature]</i>
Will applicant not place any items or obstructions on the sidewalk, for example, sandwich boards, sidewalk signs, freestanding menus and plants, as per the law?	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>	
Will applicant comply with the NYC noise code?	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>	
Will the establishment have any of the following: (circle all that apply)	FRENCH DOORS	GARAGE DOORS	WINDOWS THAT CAN BE OPENED
Will applicant close all windows, French doors, garage doors when any music or amplified sound (including televisions) is played inside the establishment?	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>	
Will applicant close all windows, French doors, garage doors by 11 PM Friday and Saturday and 10 PM on all other days even if no music or amplified sound is played inside the establishment?	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>	
Has applicant obtained an acoustical report from a certified sound engineer to assess potential noise disturbance to the neighboring residents and buildings?	YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>	
Will applicant follow the recommendations of a certified sound engineer to mitigate potential noise disturbance to the neighboring residents and buildings, including placing speakers on the floor of the establishment?	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>	
Will the kitchen exhaust system extend to the roof?	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>	
Will the establishment have an illuminated sign?	YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>	
Will the establishment have a canopy extending over the sidewalk?	YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>	
Where will the air conditioner be located? What type is it?	On the roof, central AC		
When was the air conditioner installed?	Not clear, installed by previous owner		

<b>OUTDOOR ITEMS - OTHER THEN SIDEWALK CAFÉ</b>			
Has the applicant/owner(s) read MCB 4 Rear Yard Rooftop Policy?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	
Will applicant use any outdoor spaces: rooftop, rear yard, patio, porch, balcony, pavilion, tents, deck or gazebo? If yes, which one(s)?	<input checked="" type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	
Are the floorplans for the outdoor space(s) included?	<input checked="" type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	
Will applicant close and vacate the outdoor space(s) by 11PM on Friday & Saturday and 10 PM on all other days?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	
Will the service and consumption of alcohol in any outdoor space only be via seated food service?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	No outdoor space is in use
Will applicant not allow standing space for patrons to drink or smoke in any outdoor space(s)?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	
Will there be no amplified music, as per the law?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	
If amplified sound is played inside the establishment, will windows and doors be closed?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	No amplified music would be played
Will applicant agree to post signs outside asking customers to respect the neighbors'?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	
Will applicant agree to train staff to encourage a peaceful environment?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	
Will applicant provide effective sound control (landscaping enclosure, soundproofing tenants apartments)	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	
Will there be a lighting plan that allows safe usage of the outdoor space without disrupting neighbors?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	

## OUTDOOR ITEMS – SIDEWALK CAFÉ

Has the applicant/owner(s) read MCB4 Sidewalk Café Policy?	YES	NO	
Will applicant be applying for a sidewalk café now or in the future?	YES	NO	
Is applicant in this application seeking to include a sidewalk café in its liquor license?	YES	NO	
If yes, has applicant submitted an application and plans to NYC Dept. of Consumer Affairs? Please attach application and plans.	YES	NO	
Will applicant close and vacate the sidewalk café by 11 PM on Friday & Saturday and 10 PM on all other days?	YES	NO	
Will applicant be serving alcohol in the sidewalk café? If so, will you have waiter service?	YES	NO	
Will the café have a 3 ft. wide serving aisle running the entire length of the sidewalk cafe?	YES	NO	
Will applicant mark the perimeter of the café on the sidewalk?	YES	NO	
Will the service and consumption of alcohol in the sidewalk café only be via seated food service?	YES	NO	
Will the sidewalk café not provide standing space for drinking or smoking?	YES	NO	
Will applicant use any portable natural gas heaters? If so, do you have the requisite approvals from DOB & the Fire Department?	YES	NO	
Will applicant have a lighting plan that will allow safe usage of the outdoor space without disrupting neighbors?	YES	NO	
Will all furniture, plants and barricades be stored inside between the evening closing hours and the morning opening hours?	YES	NO	
Will all furniture be stored inside between December 21 <sup>st</sup> and March 21 <sup>st</sup> , and any other day when it rains or snows?	YES	NO	
Will applicant use umbrellas?	YES	NO	
If construction or construction protection has reduced the sidewalk width, will applicant always maintain an 8 foot clear path of sidewalk between the perimeter of the café and the closes obstruction including construction barricades?	YES	NO	

SHIRAZI SAKI (1981)

TRAI

SHIRAZI SAKI (1981)

JAPANESE

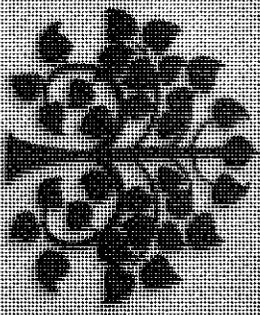
SHIRAZI SAKI (1981)

SHIRAZI SAKI (1981)

SHIRAZI SAKI (1981)

SHIRAZI SAKI (1981)

PAID TO THE ORDER OF THE  
INTERNATIONAL BANKING CORPORATION



INTERNATIONAL BANKING CORPORATION

SHIRAZI SAKI (1981)

1. The first part of the document discusses the importance of maintaining accurate records of all transactions. It emphasizes that every entry should be supported by proper documentation and that the books should be balanced regularly.

2. The second part of the document details the various methods used to collect and analyze data. It describes how different types of information are gathered and how they are processed to identify trends and patterns.

3. The third part of the document focuses on the application of statistical techniques to the collected data. It explains how these methods are used to test hypotheses and draw conclusions from the results.

4. The fourth part of the document discusses the challenges and limitations of the current research. It identifies areas where further investigation is needed and suggests potential future directions for the study.

5. The fifth part of the document provides a summary of the findings and conclusions. It highlights the key results of the study and discusses their implications for the field.

6. The sixth part of the document contains a list of references and a list of figures. The references cite the works of other researchers in the field, and the figures provide visual representations of the data.

7. The seventh part of the document is a list of appendices. These appendices contain supplementary information that is too detailed to include in the main text, such as raw data and detailed calculations.

8. The eighth part of the document is a list of tables. These tables provide a structured way to present data and are often used to compare different groups or conditions.

9. The ninth part of the document is a list of figures. These figures are visual representations of the data and are used to illustrate trends and patterns.

10. The tenth part of the document is a list of tables. These tables provide a structured way to present data and are often used to compare different groups or conditions.

**APPENDIX A**

**TABLE 1**

**TABLE 2**

**TABLE 3**

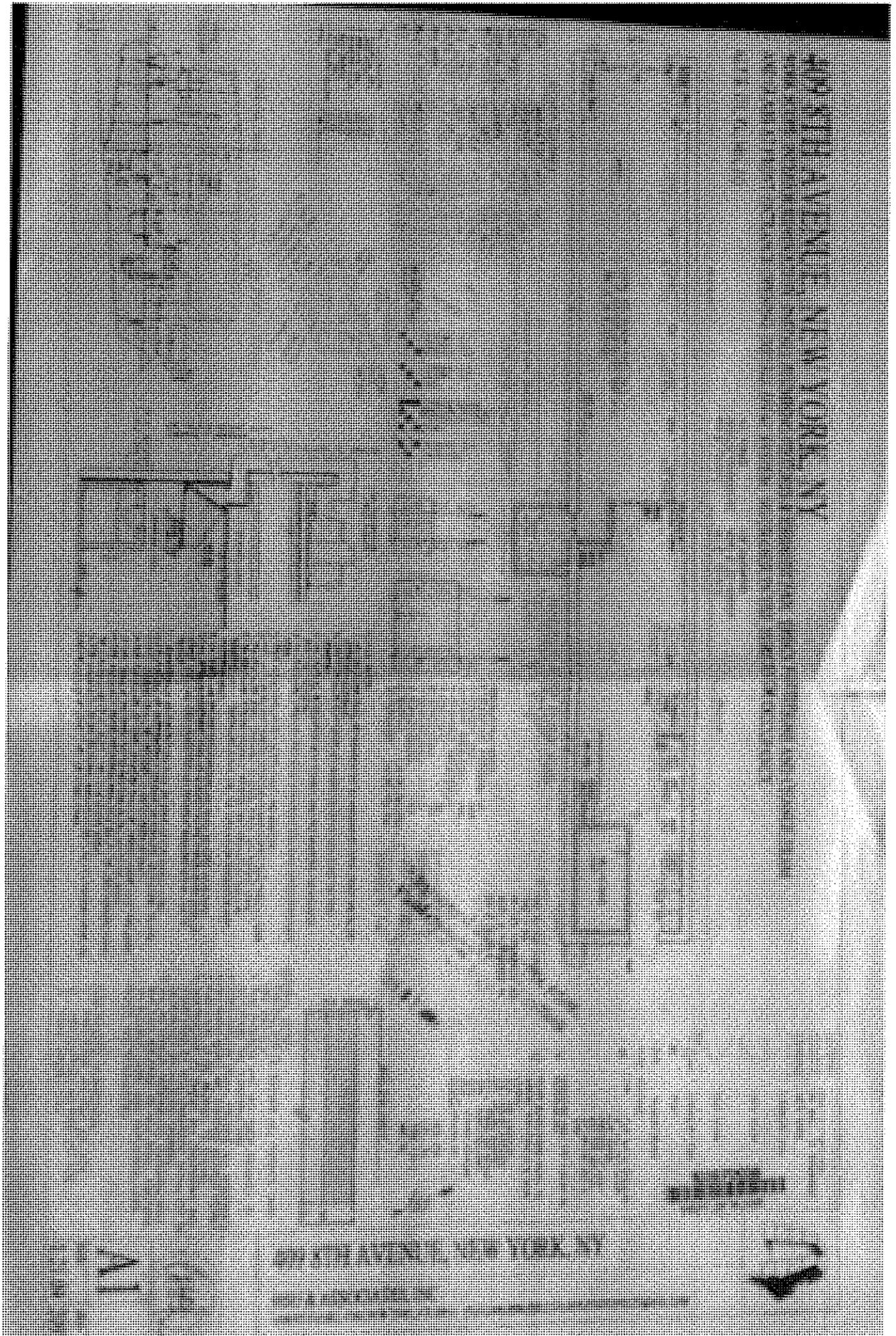
**TABLE 4**

**TABLE 5**

**TABLE 6**

**TABLE 7**

**TABLE 8**



1 **Business License & Permits Committee**

Item #: 05

2  
3 February 3, 2016

4  
5 Vincent G. Bradley  
6 Chairman  
7 New York State Liquor Authority  
8 80 S. Swan Street, 9<sup>th</sup> Floor  
9 Albany, New York 12210

10  
11 **Re: Hell's Kitchen Sat & Pepper Inc.**  
12 **d/b/a 44 ½**  
13 *626 10<sup>th</sup> Avenue (44/45)*

14  
15 Dear Chairman Bradley:

16  
17 Manhattan Community Board 4 (MCB4) recommends **denial** of a transfer of an On-Premise Liquor  
18 License application for Hell's Kitchen Sat & Pepper Inc. d/b/a 44 ½ – 626 10<sup>th</sup> Avenue (44/45), **unless**  
19 the attached stipulations, agreed to and signed by the applicant, are part of the method of operation for  
20 this establishment with a capacity of under 72, 17 tables, 47 seats, 1 stand-up bar with 10 seats; rear  
21 yard: 11 tables and 22 seats; sidewalk café: 8 seats.

22  
23 Sincerely,

24  
25  
26 Delores Rubin  
Chair

Burt Lazarin  
Co-Chair  
Business License & Permits  
Committee

Frank Holozubiec  
Co-Chair  
Business License & Permits  
Committee

27  
28

# Manhattan Community Board 4

# Liquor License Stipulations Application

(All Fields Must Be Completed)

<b>CORPORATION NAME</b>		<b>DOING BUSINESS AS (DBA)</b>	
Hell's Kitchen Salt & Pepper Inc.		44 1/2	
<b>STREET ADDRESS</b>		<b>CROSS STREETS</b>	<b>ZIP CODE</b>
626 10th Avenue, New York, NY 10036		West 44th and West 45th	10036
<b>OWNER</b> <i>(Attach a list of all the people that will be associated/listed with the license)</i>	<b>NAME:</b> Boris Brodsky	<b>ATTORNEY/ REPRESENTATIVE</b>	<b>NAME:</b> Thomas j. McCallenm Esq. Carreas & McCallen PLLC
	<b>PHONE:</b> 917-414-8344		<b>PHONE:</b> 212-732-3640
	<b>EMAIL:</b> boris@lizfields.com		<b>EMAIL:</b> sla@carrerasmccallen.com
<b>MANAGER</b>	<b>NAME:</b>	<b>LANDLORD</b>	<b>NAME:</b> Emmut Properties
	<b>PHONE:</b>		<b>PHONE:</b> 212-489-5559
	<b>EMAIL:</b>		<b>EMAIL:</b>
<b>APPLICATION TYPE (Check One)</b>			
<input type="radio"/> <b>New</b>	Has applicant owned or managed a similar business?	<b>YES</b>	<b>NO</b>
	What is/was the name and address of establishment?		
	What were the dates applicant was involved with this former premise?		
<input checked="" type="radio"/> <b>Transfer</b>	What is the prior license # and expiration date?	1158874	
	Is applicant making any alterations or operational changes?	<b>YES</b>	<b>NO</b> No
	<i>If alterations or operational changes are being made, please describe/list all changes.</i>		
<input type="radio"/> <b>Alteration</b>	What is the current license # and expiration date?		
	<i>Please list/describe the nature of all the changes and attach the plans:</i>		
<b>METHOD OF OPERATION</b>			
<b>TYPE OF ALCOHOL</b>	<input checked="" type="radio"/> Liquor/Wine/Beer <input type="radio"/> Beer <input type="radio"/> Wine & Beer		
<b>ESTABLISHMENT TYPE</b>	<input checked="" type="radio"/> Restaurant <input type="radio"/> Cabaret <input type="radio"/> Night Club <input type="radio"/> Hotel <input type="radio"/> Bar/Tavern <input type="radio"/> Catering Establishment  <input type="radio"/> Adult Entertainment <input type="radio"/> Wine Bar <input type="radio"/> Dance Club <input type="radio"/> Sports Bar <input type="radio"/> Club (Fraternal Organization – Members Only)		
Has applicant/owner filed with the SLA? If yes, when? If no, when do you plan to file?	<b>YES</b>	<b>NO</b>	No
Is the 500 Foot Rule applicable? If yes, please attach a diagram of the On-Premise liquor license establishments within a 500 ft. radius of your establishment and the Public Interest Statement.	<b>YES</b>	<b>NO</b>	Yes
Is the 200 Foot Rule applicable? If yes, please attach a diagram of the schools and houses of worship that trigger the rule.	<b>YES</b>	<b>NO</b>	No
Has applicant/owner(s) read MCB4 Policy Regarding Concentration and Location of Alcoholic-Serving Establishments?	<b>YES</b>	<b>NO</b>	Yes

**OPERATIONAL DETAILS** (\*Closing time will be when establishment is vacated of all patrons)

HOURS* <i>(Indoor Only)</i>		MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY
	Operation	11:00 AM - 12:00 AM	11:00 AM - 12:00 AM	11:00 AM - 12:00 AM	11:00 AM - 01:00 AM	11:00 AM - 01:00 AM	11:00 AM - 01:00 AM	11:00 AM - 12:00 AM
	Kitchen	10:00 AM - 12:00 AM	10:00 AM - 12:00 AM	10:00 AM - 12:00 AM	10:00 AM - 12:00 AM	10:00 AM - 12:00 AM	10:00 AM - 12:00 AM	10:00 AM - 12:00 AM
	Music	Ambient, recorded music - 10:00 AM til 12:00 AM during operating hours						

If you plan to have music, what type(s)? (Circle all that apply)

BACKGROUND   
  LIVE MUSIC   
  DJ   
  JUKE BOX   
  KARAOKE

**OCCUPANCY**

	Capacity (Certificate of Occupancy)	Maximum # of Persons You Anticipate Occupying Premises (Including Employees)	Number of Tables	Number of Seats	Number of Service Only Bars	Number of Stand-Up Bars	Number of Seats at Stand-Up Bar
<b>INSIDE</b>	72	72	17	47	None	1	10
<b>OUTSIDE</b> <i>(Other than sidewalk café)</i>	<del>None</del>		11	22			
<b>SIDEWALK CAFE</b>	8	8					

How many floors are there? What is the capacity for each floor?

Two

How frequently will the owner(s) be at the establishment?

Fulltime, throughout operating hours

Will you be applying or intending to apply for a cabaret license with DCA? If yes, will there be dancing?	YES	NO	No
Will applicant have bottle or table service for beverage alcohol?	YES	NO	No
Will you be hosting private, promotional or corporate events?	YES	NO	No
Will outside promoters be used on a regular basis? If yes please describe.	YES	NO	No
Will you have a security plan? If, yes please attach.	YES	NO	No
Will security plan be implemented?	YES	NO	No
Will State certified security personnel be used?	YES	NO	No
Will New York Nightlife Association and NYPD Best Practices be followed?	YES	NO	No
Will applicant be using delivery bicycles? If yes, how many?	YES	NO	No
Will delivery bicycles be clearly marked with the name of the restaurant and will staff wear attire clearly noting name as described by NYC Law?	YES	NO	N/A
Where will delivery bicycles be stored during the day when not in use?	N/A		

## LOCATION & ZONING

Is this a Special District? If yes, is it Clinton, West Chelsea or Hudson Yards?	YES	NO	No
Does the building have a Certificate of Occupancy ("C of O") or a letter of no objection?	YES	NO	Yes
Is a Public Assembly permit required?	YES	NO	No
Are your plans filed with DOB?	YES	NO	No

## Community Notification/Relations

<b>NOTIFICATION:</b> List all block associations; tenant associations, co-op boards or condo boards of residential buildings; and community groups that applicant has notified regarding its application. For each please list both the organization and individual you contacted	# 1	None	
	# 2		
	# 3		
	# 4		
	# 5		
Please provide dates when applicant met with the groups listed above.	N/A		
Who was your contact person at each group you met with?	N/A		
When did applicant post the notice that was provided?	N/A		
Where did applicant post the notice that was provided?	N/A		
Will applicant provide owner cell phone number to neighbors and respond to complaints that arise? Please provide number in space provided.	YES	NO	Yes - 917-414-8344
Will applicant inform the Community Board office of its job openings and/or provide a hyperlink to applicants jobs webpage?	YES	NO	Yes

<b>BUILDING DESIGN</b>			
State the name and type of business previously located in the space.	Hell's Kitchen Cream & Sugar Inc. - Full service Restaurant		
Has a liquor-licensed establishment previously occupied this space at any time? If yes, please provide the name of the business.	YES	NO	Yes, Hell's Kitchen Cream & Sugar Inc.
Do you plan any changes to the existing façade? If yes, please describe.	YES	NO	No
Will applicant have a vestibule within the establishment?	YES	NO	No
Will applicant use a storm enclosure?	YES	NO	Yes
Will applicant not place any items or obstructions on the sidewalk, for example, sandwich boards, sidewalk signs, freestanding menus and plants, as per the law?	YES	NO	Yes
Will applicant comply with the NYC noise code?	YES	NO	Yes
Will the establishment have any of the following: (circle all that apply)	<b>FRENCH DOORS</b>		<b>GARAGE DOORS</b>
			<b>WINDOWS THAT CAN BE OPENED</b>
Will applicant close all windows, French doors, garage doors when any music or amplified sound (including televisions) is played inside the establishment?	YES	NO	N/A
Will applicant close all windows, French doors, garage doors by 11 PM Friday and Saturday and 10 PM on all other days even if no music or amplified sound is played inside the establishment?	YES	NO	N/A
Has applicant obtained an acoustical report from a certified sound engineer to assess potential noise disturbance to the neighboring residents and buildings?	YES	NO	No
Will applicant follow the recommendations of a certified sound engineer to mitigate potential noise disturbance to the neighboring residents and buildings, including placing speakers on the floor of the establishment?	YES	NO	N/A
Will the kitchen exhaust system extend to the roof?	YES	NO	Yes
Will the establishment have an illuminated sign?	YES	NO	Yes
Will the establishment have a canopy extending over the sidewalk?	YES	NO	No
Where will the air conditioner be located? What type is it?	Backyard - control, roof		
When was the air conditioner installed?	Ten (10) years		

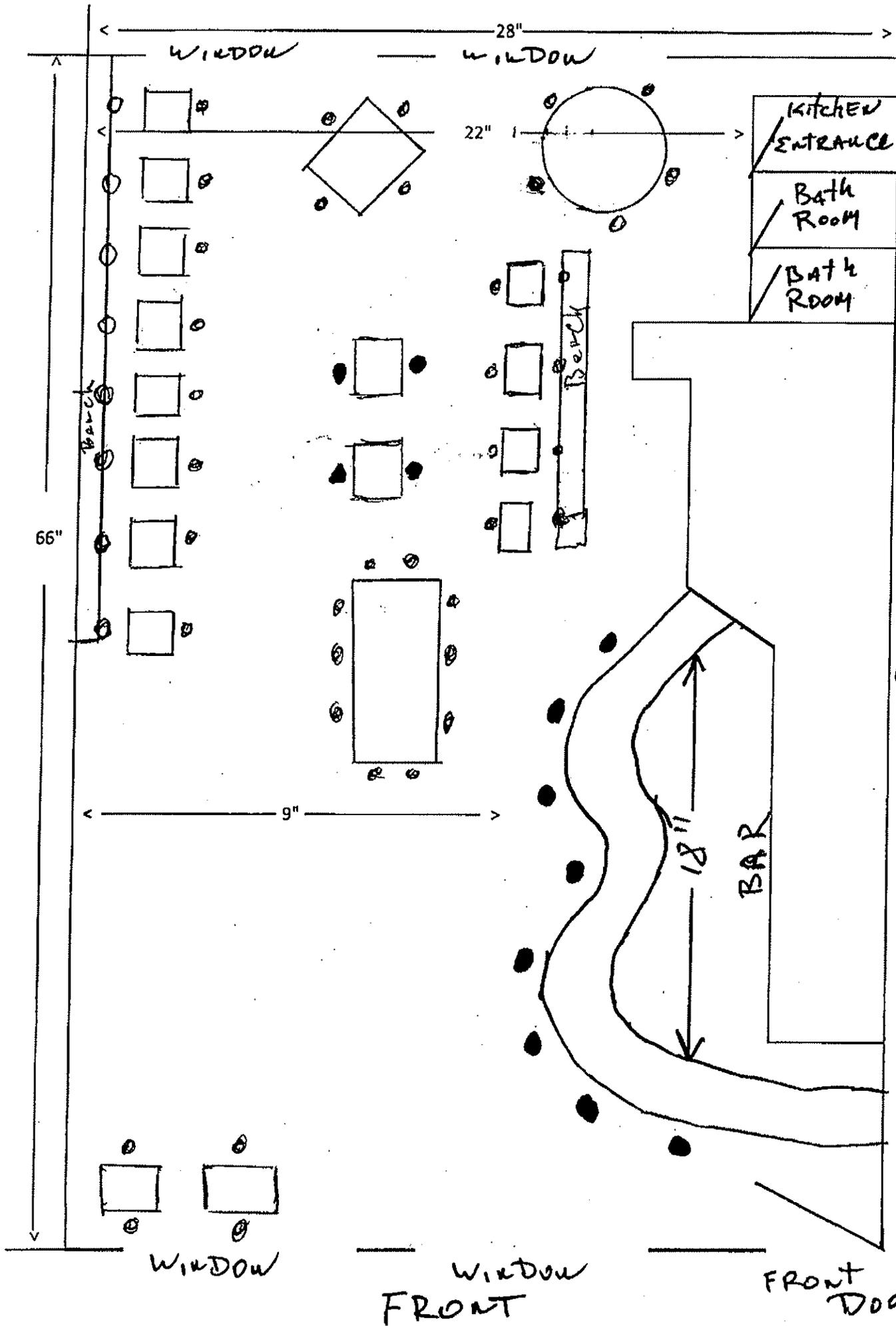
<b>OUTDOOR ITEMS - OTHER THEN SIDEWALK CAFÉ</b>			
Has the applicant/owner(s) read MCB 4 Rear Yard Rooftop Policy?	YES	NO	Yes
Will applicant use any outdoor spaces: rooftop, rear yard, patio, porch, balcony, pavilion, tents, deck or gazebo? If yes, which one(s)?	YES	NO	Yes
Are the floorplans for the outdoor space(s) included?	YES	NO	Yes
Will applicant close and vacate the outdoor space(s) by 11PM on Friday & Saturday and 10 PM on all other days?	YES	NO	Yes
Will the service and consumption of alcohol in any outdoor space only be via seated food service?	YES	NO	Yes
Will applicant not allow standing space for patrons to drink or smoke in any outdoor space(s)?	YES	NO	Yes
Will there be no amplified music, as per the law?	YES	NO	Yes
If amplified sound is played inside the establishment, will windows and doors be closed?	YES	NO	Yes
Will applicant agree to post signs outside asking customers to respect the neighbors'?	YES	NO	Yes
Will applicant agree to train staff to encourage a peaceful environment?	YES	NO	Yes
Will applicant provide effective sound control (landscaping enclosure, soundproofing tenants apartments)	YES	NO	Yes
Will there be a lighting plan that allows safe usage of the outdoor space without disrupting neighbors?	YES	NO	Yes

<b>OUTDOOR ITEMS – SIDEWALK CAFÉ</b>			
Has the applicant/owner(s) read MCB4 Sidewalk Café Policy?	YES	NO	Yes
Will applicant be applying for a sidewalk café now or in the future?	YES	NO	Yes, Existing
Is applicant in this application seeking to include a sidewalk café in its liquor license?	YES	NO	Yes
If yes, has applicant submitted an application and plans to NYC Dept. of Consumer Affairs? Please attach application and plans.	YES	NO	Yes, Approved
Will applicant close and vacate the sidewalk café by 11 PM on Friday & Saturday and 10 PM on all other days?	YES	NO	Yes
Will applicant be serving alcohol in the sidewalk café? If so, will you have waiter service?	YES	NO	Yes
Will the café have a 3 ft. wide serving aisle running the entire length of the sidewalk cafe?	YES	NO	Yes
Will applicant mark the perimeter of the café on the sidewalk?	YES	NO	Yes
Will the service and consumption of alcohol in the sidewalk café only be via seated food service?	YES	NO	Yes
Will the sidewalk café not provide standing space for drinking or smoking?	YES	NO	Yes
Will applicant use any portable natural gas heaters? If so, do you have the requisite approvals from DOB & the Fire Department?	YES	NO	No
Will applicant have a lighting plan that will allow safe usage of the outdoor space without disrupting neighbors?	YES	NO	Yes
Will all furniture, plants and barricades be stored inside between the evening closing hours and the morning opening hours?	YES	NO	Yes
Will all furniture be stored inside between December 21 <sup>st</sup> and March 21 <sup>st</sup> , and any other day when it rains or snows?	YES	NO	Yes
Will applicant use umbrellas?	YES	NO	No
If construction or construction protection has reduced the sidewalk width, will applicant always maintain an 8 foot clear path of sidewalk between the perimeter of the café and the closes obstruction including construction barricades?	YES	NO	Yes

**ADDITIONAL STIPULATIONS: (Office Use Only)**

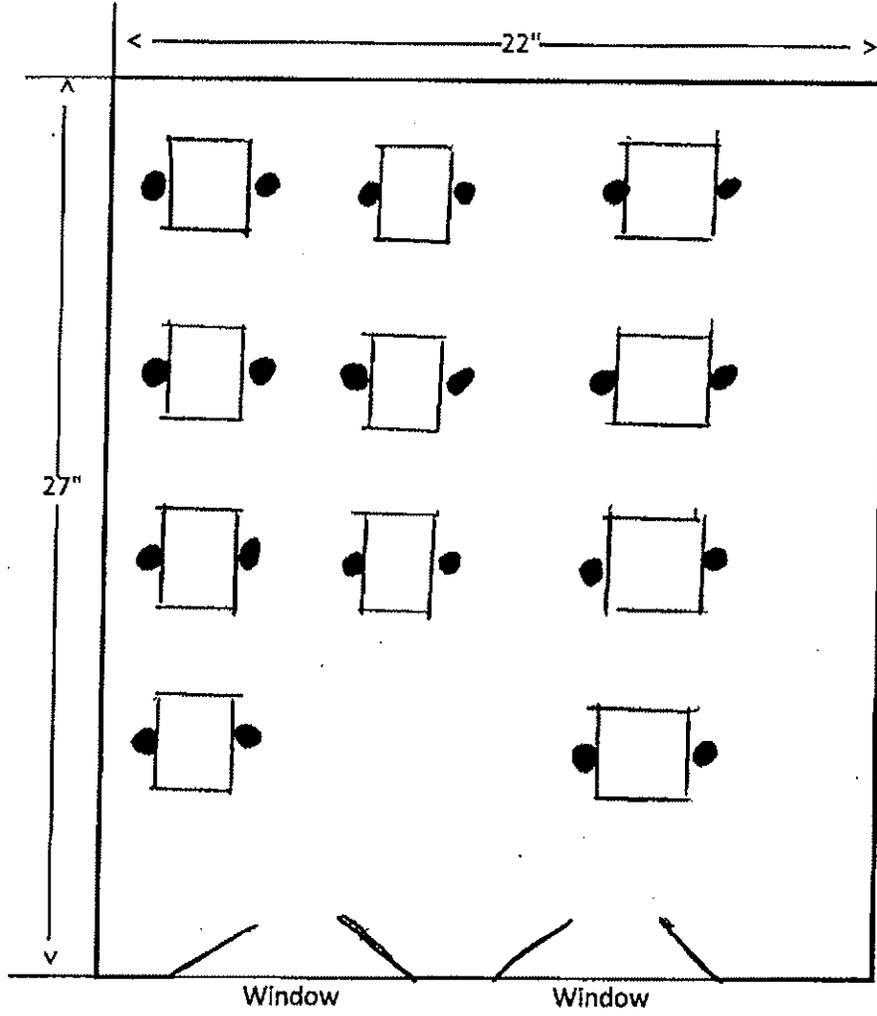
- Any storm enclosure will extend no more than 18 inches from the building facade
- All sidewalk cafe tables & chairs will be moved inside nightly. All planters will be moved against the building
- In months when sidewalk cafe is not in active use, all sidewalk cafe furniture including planters, will be removed from sidewalk

*To the extent any additional stipulation on pages 7 and 8 of this application conflicts with any response on pages 1 – 6 of this application, the stipulations on pages 7 and 8 control.*



Main Room

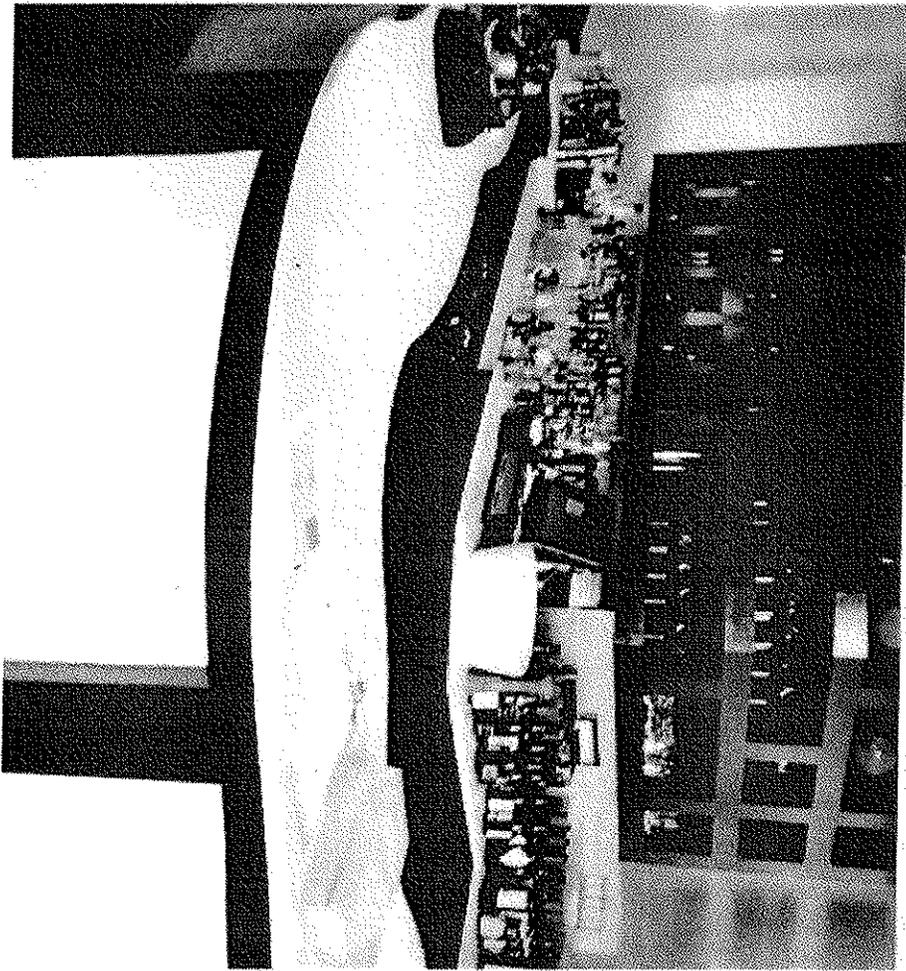
Back Yard Patio











1 **Business License & Permits Committee**

Item #: 06

2  
3 February 3, 2016

4  
5 Vincent G. Bradley  
6 Chairman  
7 New York State Liquor Authority  
8 80 S. Swan Street, 9<sup>th</sup> Floor  
9 Albany, New York 12210

10  
11 **Re: BKUK 6 Corp.**  
12 **d/b/a Gallo Nero**  
13 *400-402 West 44<sup>th</sup> Street a/k/a 621 9<sup>th</sup> Avenue*  
14

15 Dear Chairman Bradley:

16  
17 Manhattan Community Board 4 (MCB4) recommends **denial** of a transfer On-Premise Liquor License  
18 application for BKUK 6 Corp. d/b/a Gallo Nero – 400-402 W 44<sup>th</sup> Street a/k/a 621 9<sup>th</sup> Avenue, **unless**  
19 the attached stipulations, agreed to and signed by the applicant, are part of the method of operation for  
20 this establishment with a capacity of 60, 17 tables, 40 seats and a stand-up bar with 4 seats.  
21

22 Sincerely,

23  
24  
25 Delores Rubin  
Chair

Burt Lazarin  
Co-Chair  
Business License & Permits  
Committee

Frank Holozubiec  
Co-Chair  
Business License & Permits  
Committee

26  
27

# Manhattan Community Board 4

(All Fields Must Be Completed)

# Liquor License Stipulations Application

<b>CORPORATION NAME</b>		<b>DOING BUSINESS AS (DBA)</b>	
BKUK 6 Corp.		Gallo Nero	
<b>STREET ADDRESS</b>		<b>CROSS STREETS</b>	<b>ZIP CODE</b>
400 - 402 West 44th Street a/k/a 621 Ninth Ave		9th Avenue & 10th Avenue	10036
<b>OWNER</b> <small>(Attach a list of all the people that will be associated/listed with the license)</small>	<b>NAME:</b>	Besim Kukaj	<b>NAME:</b> Rosa M Sanchez (representative)
	<b>PHONE:</b>	201 962 0270	<b>PHONE:</b> 646 619 1166
	<b>EMAIL:</b>	bkukgroup@yahoo.com	<b>EMAIL:</b> rosa@rosamsanchez.com
<b>MANAGER</b>	<b>NAME:</b>		<b>NAME:</b> Ninth Avenue Realty LLC Beach Lane Mgmt
	<b>PHONE:</b>		<b>PHONE:</b> 212 647 0974
	<b>EMAIL:</b>		<b>EMAIL:</b>
<b>ATTORNEY/ REPRESENTATIVE</b>			
<b>LANDLORD</b>			
<b>APPLICATION TYPE (Check One)</b>			
<input type="radio"/> New	Has applicant owned or managed a similar business?		<input type="checkbox"/> YES <input type="checkbox"/> NO
	What is/was the name and address of establishment?		
	What were the dates applicant was involved with this former premise?		
<input checked="" type="radio"/> Transfer	What is the prior license # and expiration date?		Gallo Nero W 44th Inc.
	Is applicant making any alterations or operational changes?		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
	If alterations or operational changes are being made, please describe/list all changes.		
<input type="radio"/> Alteration	What is the current license # and expiration date?		
	Please list/describe the nature of all the changes and attach the plans.		
<b>METHOD OF OPERATION</b>			
<b>TYPE OF ALCOHOL</b>	<input checked="" type="checkbox"/> Liquor/Wine/Beer <input type="checkbox"/> Beer <input type="checkbox"/> Wine & Beer		
<b>ESTABLISHMENT TYPE</b>	<input checked="" type="checkbox"/> Restaurant <input type="checkbox"/> Cabaret <input type="checkbox"/> Night Club <input type="checkbox"/> Hotel <input type="checkbox"/> Bar/Tavern <input type="checkbox"/> Catering Establishment <input type="checkbox"/> Adult Entertainment <input type="checkbox"/> Wine Bar <input type="checkbox"/> Dance Club <input type="checkbox"/> Sports Bar <input type="checkbox"/> Club (Fraternal Organization - Members Only)		
Has applicant/owner filed with the SLA? If yes, when? If no, when do you plan to file?		<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO
Is the 500 Foot Rule applicable? If yes, please attach a diagram of the On-Premise liquor license establishments within a 500 ft. radius of your establishment and the Public Interest Statement.		<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
Is the 200 Foot Rule applicable? If yes, please attach a diagram of the schools and houses of worship that trigger the rule.		<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO
Has applicant/owner(s) read MCB4 Policy Regarding Concentration and Location of Alcoholic-Serving Establishments?		<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO

**OPERATIONAL DETAILS** (\*Glosing time will be when establishment is vacated of all patrons)

HOURS* (Indoor Only)		MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY
	Operation	11 a.m.-11 p.m.						
	Kitchen	11 a.m.-10 p.m.						
	Music	11 a.m.-11 p.m.						

If you plan to have music, what type(s)? (Circle all that apply)

BACKGROUND     LIVE MUSIC     DJ     JUKE BOX     KARAOKE

**OCCUPANCY**

	Capacity (Certificate of Occupancy)	Maximum # of Persons You Anticipate Occupying Premises (Including Employees)	Number of Tables	Number of Seats	Number of Service Only Bars	Number of Stand-Up Bars	Number of Seats at Stand-Up Bar
INSIDE	60	60	17	40	0	1	4
OUTSIDE (Other than sidewalk café)	0						
SIDEWALK CAFÉ	0						

How many floors are there? What is the capacity for each floor?      ground floor and basement

How frequently will the owner(s) be at the establishment?      hours will vary between locations -- will be at premises daily

Will you be applying or intending to apply for a cabaret license with DCA? If yes, will there be dancing?	YES	<del>NO</del>	
Will applicant have bottle or table service for beverage alcohol?	YES	<del>NO</del>	
Will you be hosting private; promotional or corporate events?	YES	<del>NO</del>	
Will outside promoters be used on a regular basis? If yes please describe.	YES	<del>NO</del>	
Will you have a security plan? If, yes please attach.	YES	<del>NO</del>	
Will security plan be implemented?	YES	<del>NO</del>	
Will State certified security personnel be used?	YES	<del>NO</del>	
Will New York Nightlife Association and NYPD Best Practices be followed?	<del>YES</del>	NO	
Will applicant be using delivery bicycles? If yes, how many?	<del>YES</del>	NO	1-2
Will delivery bicycles be clearly marked with the name of the restaurant and will staff wear attire clearly noting name as described by NYC Law?	<del>YES</del>	NO	

Where will delivery bicycles be stored during the day when not in use?      inside of the premises (basement)

LOCATION & ZONING			
Is this a Special District? If yes, is it Clinton, West Chelsea or Hudson Yards?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	Clinton
Does the building have a Certificate of Occupancy ("C of O") or a letter of no objection?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	
Is a Public Assembly permit required?	YES	<input checked="" type="checkbox"/> NO	
Are your plans filed with DOB?	YES	<input checked="" type="checkbox"/> NO	

Community Notification/Relations			
<b>NOTIFICATION:</b> List all block associations; tenant associations, co-op boards or condo boards of residential buildings; and community groups that applicant has notified regarding its application. For each please list both the organization and individual you contacted	# 1	West 36th Street Block Association: Frank Sirock at mcgee79@aol.com	
	# 2	- Hell's Kitchen Neighborhood Association (HKNA): Kathleen Treat at kathleentreat123@gmail.com	
	# 3	- West 43rd Street (9/10) Block Association: Eduardo Zeiger at eduardozeiger@compuserve.com	
	# 4	- HKNA: Kathleen Treat at kathleentreat123@gmail.com	
	# 5	- West 44th Street Block Association: Renee & Gordon at twocatsid@worldnet.att.net	
Please provide dates when applicant met with the groups listed above.		all block associations were emailed on December 21, 2015	
Who was your contact person at each group you met with?			
When did applicant post the notice that was provided?		December 16, 2015	
Where did applicant post the notice that was provided?		along 9th Avenue and 10th Avenue on 44th Street	
Will applicant provide owner cell phone number to neighbors and respond to complaints that arise? Please provide number in space provided.		<input checked="" type="checkbox"/> YES	NO 2019620270
Will applicant inform the Community Board office of its job openings and/or provide a hyperlink to applicants jobs webpage?		<input checked="" type="checkbox"/> YES	NO

## BUILDING DESIGN

State the name and type of business previously located in the space.	restaurant Gallo Nero		
Has a liquor-licensed establishment previously occupied this space at any time? If yes, please provide the name of the business.	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	
Do you plan any changes to the existing façade? If yes, please describe.	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	
Will applicant have a vestibule within the establishment?	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	
Will applicant use a storm enclosure?	<input checked="" type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	
Will applicant not place any items or obstructions on the sidewalk, for example, sandwich boards, sidewalk signs, freestanding menus and plants, as per the law?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	
Will applicant comply with the NYC noise code?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	
Will the establishment have any of the following: (circle all that apply)	<input checked="" type="checkbox"/> FRENCH DOORS	<input type="checkbox"/> GARAGE DOORS	<input type="checkbox"/> WINDOWS THAT CAN BE OPENED
Will applicant close all windows, French doors, garage doors when any music or amplified sound (including televisions) is played inside the establishment?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	
Will applicant close all windows, French doors, garage doors by 11 PM Friday and Saturday and 10 PM on all other days even if no music or amplified sound is played inside the establishment?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	
Has applicant obtained an acoustical report from a certified sound engineer to assess potential noise disturbance to the neighboring residents and buildings?	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	n/a
Will applicant follow the recommendations of a certified sound engineer to mitigate potential noise disturbance to the neighboring residents and buildings, including placing speakers on the floor of the establishment?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	n/a
Will the kitchen exhaust system extend to the roof?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	
Will the establishment have an illuminated sign?	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	
Will the establishment have a canopy extending over the sidewalk?	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	
Where will the air conditioner be located? What type is it?			
When was the air conditioner installed?			

<b>OUTDOOR ITEMS - OTHER THEN SIDEWALK CAFÉ</b>		<b>N/A</b>
Has the applicant/owner(s) read MCB 4 Rear Yard Rooftop Policy?	YES	NO
Will applicant use any outdoor spaces: rooftop, rear yard, patio, porch, balcony, pavilion, tents, deck or gazebo? If yes, which one(s)?	YES	NO <span style="float: right;">3</span>
Are the floorplans for the outdoor space(s) included?	YES	NO
Will applicant close and vacate the outdoor space(s) by 11PM on Friday & Saturday and 10 PM on all other days?	YES	NO
Will the service and consumption of alcohol in any outdoor space only be via seated food service?	YES	NO
Will applicant not allow standing space for patrons to drink or smoke in any outdoor space(s)?	YES	NO
Will there be no amplified music, as per the law?	YES	NO
If amplified sound is played inside the establishment, will windows and doors be closed?	YES	NO
Will applicant agree to post signs outside asking customers to respect the neighbors?	YES	NO
Will applicant agree to train staff to encourage a peaceful environment?	YES	NO
Will applicant provide effective sound control (landscaping enclosure, soundproofing tenants apartments)	YES	NO
Will there be a lighting plan that allows safe usage of the outdoor space without disrupting neighbors?	YES	NO

**OUTDOOR ITEMS – SIDEWALK CAFÉ N/A**

Has the applicant/owner(s) read MCB4 Sidewalk Café Policy?	YES	NO	
Will applicant be applying for a sidewalk café now or in the future?	YES	NO	B
Is applicant in this application seeking to include a sidewalk café in its liquor license?	YES	NO	
If yes, has applicant submitted an application and plans to NYC Dept. of Consumer Affairs? Please attach application and plans.	YES	NO	
Will applicant close and vacate the sidewalk café by 11 PM on Friday & Saturday and 10 PM on all other days?	YES	NO	
Will applicant be serving alcohol in the sidewalk café? If so, will you have waiter service?	YES	NO	
Will the café have a 3 ft. wide serving aisle running the entire length of the sidewalk café?	YES	NO	
Will applicant mark the perimeter of the café on the sidewalk?	YES	NO	
Will the service and consumption of alcohol in the sidewalk café only be via seated food service?	YES	NO	
Will the sidewalk café not provide standing space for drinking or smoking?	YES	NO	
Will applicant use any portable natural gas heaters? If so, do you have the requisite approvals from DOB & the Fire Department?	YES	NO	
Will applicant have a lighting plan that will allow safe usage of the outdoor space without disrupting neighbors?	YES	NO	
Will all furniture, plants and barricades be stored inside between the evening closing hours and the morning opening hours?	YES	NO	
Will all furniture be stored inside between December 21 <sup>st</sup> and March 21 <sup>st</sup> , and any other day when it rains or snows?	YES	NO	
Will applicant use umbrellas?	YES	NO	
If construction or construction protection has reduced the sidewalk width, will applicant always maintain an 8 foot clear path of sidewalk between the perimeter of the café and the closes obstruction including construction barricades?	YES	NO	

**ADDITIONAL STIPULATIONS: (Office Use Only)**

- Any storm enclosure will extend no further than 18 inches from the building facade
- Hours of operation: 11 a.m. - 11 p.m. Sunday to Thursday; 11 a.m. - 12 a.m. Friday & Saturday
- Hours of Kitchen: 11 a.m. - 10 p.m. Sunday to Thursday; 11 a.m. - 11 p.m. Friday & Saturday
- Hours of Music: 11 a.m. - 11 p.m. Sunday to Thursday; 11 a.m. - 12 a.m. Friday & Saturday

***To the extent any additional stipulation on pages 7 and 8 of this application conflicts with any response on pages 1 – 6 of this application, the stipulations on pages 7 and 8 control.***

# Lunch & Dinner

## CROSTINI E BRUSCHETTE

- Tomato, Basil, Mozzarella & Goat Cheese 13
- Tapenade of Mixed Olives, Tomato & Mozzarella Cheese 13
- Mixed Vegetables, Radicchio & Mozzarella Cheese 13
- Shrimp, Sun Dried Tomatoes, Pesto & Mozzarella Cheese 14
- Porcini Mushrooms & Provolone Cheese 13
- Grilled Chicken, Roasted Pepper, Pesto & Asiago Cheese 14
- Speck Prosciutto, Tomato & Fontina Cheese 14
- Mixed Sausage, Broccoli & Mozzarella Cheese 13
- Prosciutto San Daniele, Arugula & Buffalo Mozzarella 14
- Trio di Bruschette ~ Fresh Tomatoes, White Beans & Wild mushrooms 13

## SALADS

- Mixed Organic Green Salad with Balsamic Vinaigrette 9
- Traditional Caesar Salad, Croutons & Shaved Parmesan 10
- Tre Colori ~ Arugula, Radicchio & Endive with Lemon Dressing 10
- Roasted Red Beets, Goat Cheese, String Beans & Walnuts with Lemon Dressing 12
- Poached Pears, Frisee, Gorgonzola & Speck with Lime Dressing 12
- Caprese ~ Fresh Buffalo Mozzarella, Ripe Tomatoes & Basil 13
- Endive, Avocado & Shaved Parmesan with Lemon Dressing 13

## TAGLIERI & ANTIPASTI

- Classic Meatballs & Basil in Parsley Tomato Sauce 13
- Steamed Mussels, Croutons & Champagne Sauce 13
- Fried Calamari & Zucchini with Fra' Diavolo Sauce 16
- Affettati Misti con Olive ~ Chef's selection of Four Cured Meats with Olives 16
- Portuguese Octopus, Black Olives, Capers, Potato & Frisee Celery Salad 17
- Prosciutto Mozzarella ~ San Daniele Prosciutto with Buffalo Mozzarella & Peppers 16
- Tagliere di Formaggi ~ Chef's selection of Four Cheeses & Grapes 16

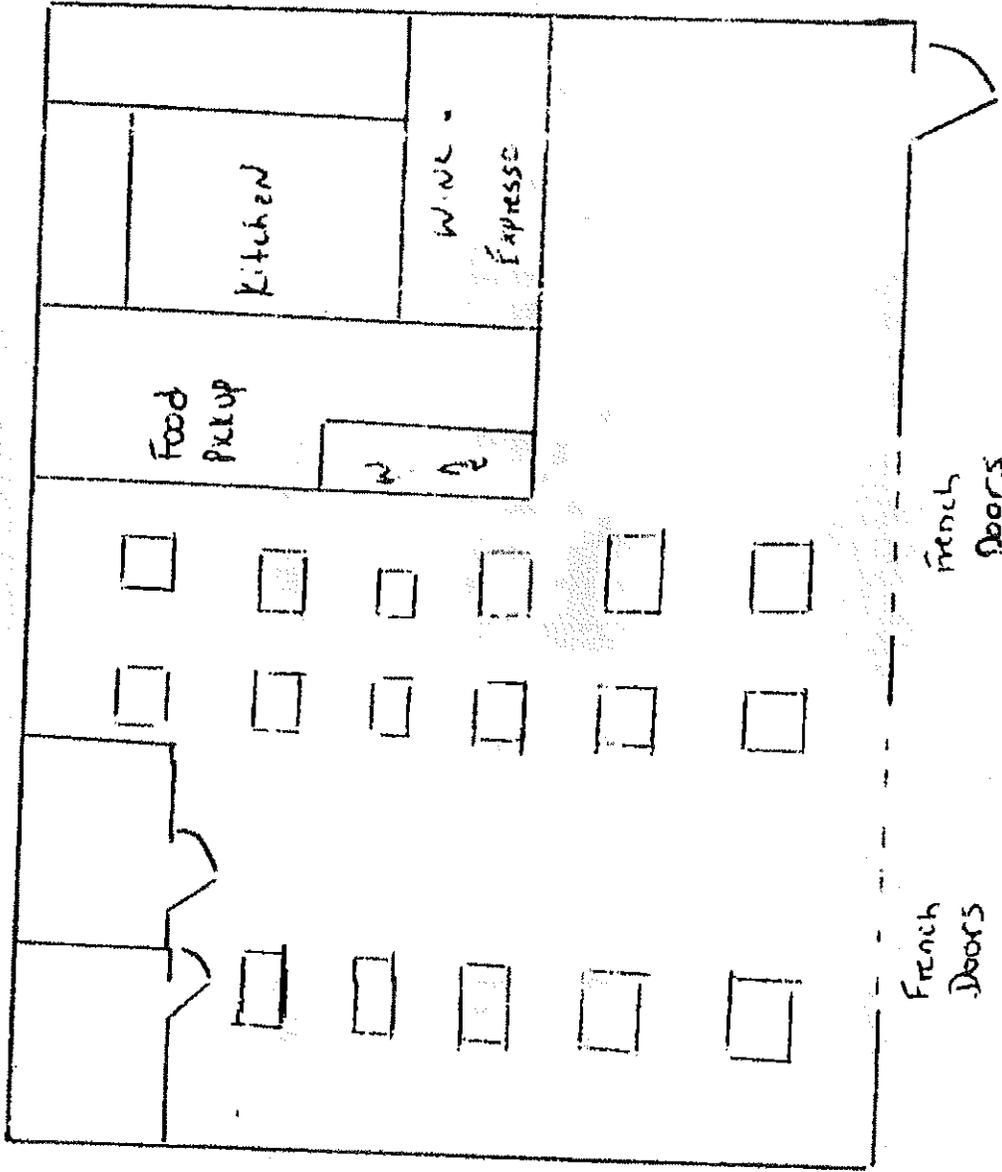
## ENTREES

- Gnocchi, Tomato, Mozzarella & Basil 16
- Spaghetti Alla Carbonara 16
- Baked Meat Tortellini with Green Peas, Mixed Mushrooms & Creamy Sauce 16
- Spinach Ricotta Ravioli & Butter Sage Truffle Oil Sauce 17
- Lasagna 16
- Linguine with Clams & White Wine Parsley Sauce 18
- Risotto with Porcini Mushrooms & Truffle Olive Oil 19
- Grilled Chicken with Lemon, Tomato, Onions & Arugula Salad 17
- Pork Scaloppine Piccata or Saltimbocca with Mashed Potatoes & Spinach 19
- Pollo Arrosto ~ Half Roasted Chicken with Cabbage & Mashed Potatoes 18
- Short Ribs with Braised Cabbage 20
- Stuffed Chicken Breast with Mozzarella & Zucchini Lemon Sauce 21
- Salmon with Garlic Sauteed Spinach, Cabbage & Balsamic Vinegar Reduction 22
- Hanger Steak with Roasted Potatoes & Organic Mixed Salad 24
- Braised Lamb Shank with Wild Rice & Dried Cranberries 25
- Blue Snapper with Broccoli, Sun Dried Tomatoes & Lemon Capers Sauce 23

6ALLO NERO

38'

20'



French  
Doors

French  
Doors

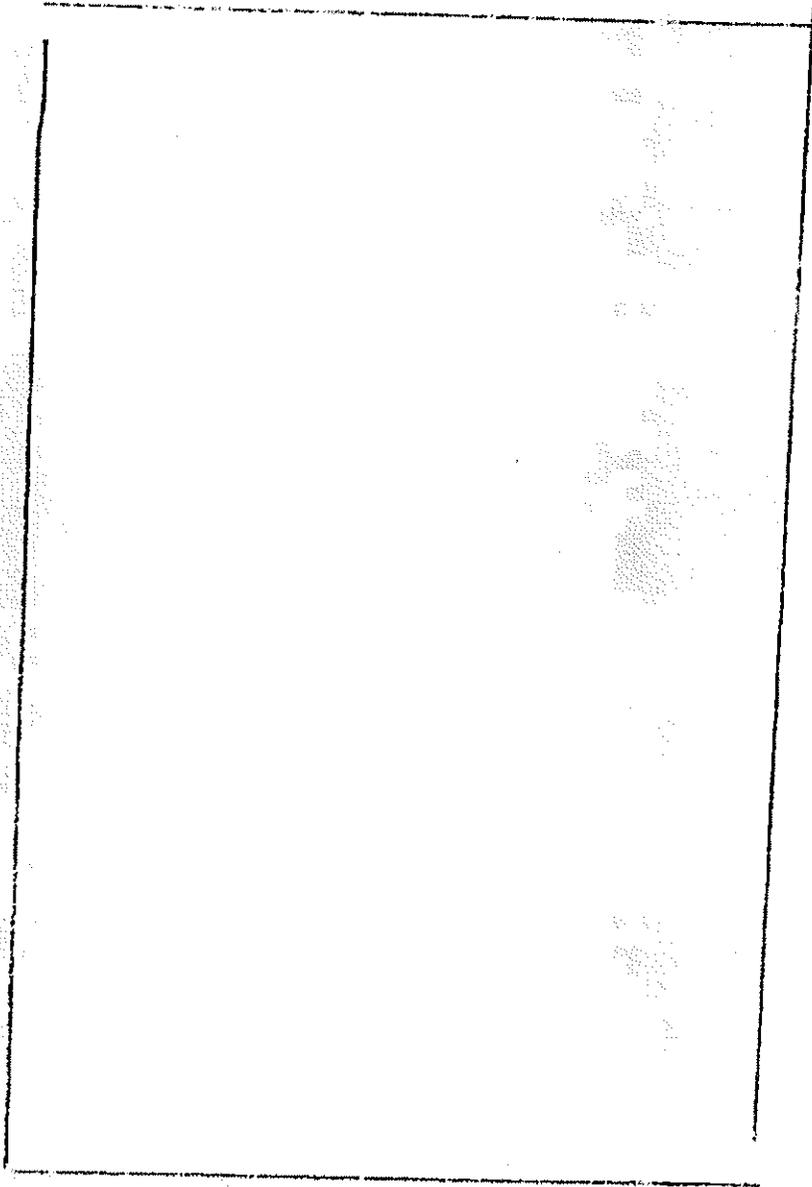
402 West 44th Street

Gallo Nero W44th, Inc.  
D/B/A Gallo Nero  
400-402 West 44th Street  
New York, NY 10036

GALLO NERO

38'

20'



Basement

402 West 44 ST

Gallo Nero W44th, Inc.  
D/B/A Gallo Nero  
400-402 West 44<sup>th</sup> Street  
New York, NY 10036

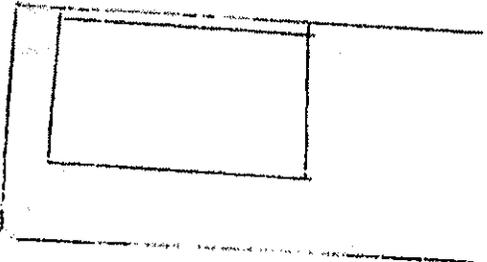
5 Floors  
Above Restaurant

Entrance to Building

402

GALLO NERO  
702 west 44<sup>th</sup> ST.

Entrance to  
restaurant.



Gallo Nero W44th, Inc.  
D/B/A Gallo Nero  
400-402 West 44<sup>th</sup> Street  
New York, NY 10036

1 **Business License & Permits Committee**

Item #: 07

2  
3 February 3, 2016

4  
5 Vincent G. Bradley  
6 Chairman  
7 New York State Liquor Authority  
8 80 S. Swan Street, 9<sup>th</sup> Floor  
9 Albany, New York 12210

10  
11 **Re: The Manhattan Music Group LLC**  
12 **d/b/a Terminal 5**  
13 *610 W 56<sup>th</sup> Street*  
14 *Serial # 1188394*

15  
16 Dear Chairman Bradley:

17  
18 Manhattan Community Board 4 (MCB4) recommends **denial** of an alteration of an On-Premise Liquor  
19 License application for The Manhattan Music Group LLC d/b/a Terminal 5 – 610 W 56<sup>th</sup> Street, **unless**  
20 the attached stipulations, agreed to and signed by the applicant, are part of the method of operation for  
21 this establishment with a capacity of 3988, 0 tables, 392 seats and 5 stand-up bars; rooftop capacity 280  
22 with 5 tables and 30 seats and 1 stand-up bar (included in the above total).  
23

24 Sincerely,

25  
26  
27 Delores Rubin  
Chair

Burt Lazarin  
Co-Chair  
Business License & Permits  
Committee

Frank Holozubiec  
Co-Chair  
Business License & Permits  
Committee

28  
29

# Manhattan Community Board 4

(All Fields Must Be Completed)

## Liquor License Stipulations Application

CORPORATION NAME		DOING BUSINESS AS (DBA)	
The Manhattan Music Group, LLC		Terminal 5	
TYPE OF ADDRESS		CROSS STREETS	ZIP CODE
610 W. 56th Street		11th and 12th Avenues	10019
OWNER	NAME	James Glancy	ATTORNEY/ REPRESENTATIVE NAME
	PHONE	732-727-5030	Robert D. Skene, Esq.
	EMAIL	Lfarina@skenelawfirm.com	732-727-5030
MANAGER	NAME	Hal Gould	LANDLORD NAME
	PHONE	212-582-6600 ext. 101	Manhattan Music Venue, LLC
	EMAIL	hal@terminal5nyc.com	212-582-6600
APPLICATION TYPE (Check One)			
<input type="radio"/> New	Has applicant owned or managed a similar business?		YES NO
	What is/was the name and address of establishment?		
	What were the dates applicant was involved with this former premise?		
<input type="radio"/> Transfer	What is the prior license # and expiration date?		
	Is applicant making any alterations or operational changes?		YES NO
	If alterations or operational changes are being made, please describe/list all changes.		
<input checked="" type="radio"/> Alteration	What is the current license # and expiration date?		1188394 9/30/2017
	Please list/describe the nature of all the changes and attach the plans: one new bar is being added to the premises		
METHOD OF OPERATION			
TYPE OF ALCOHOL	<input checked="" type="radio"/> Liquor/Wine/Beer <input type="radio"/> Beer <input type="radio"/> Wine & Beer		
ESTABLISHMENT TYPE	<input type="radio"/> Restaurant <input checked="" type="radio"/> Cabaret <input type="radio"/> Night Club <input type="radio"/> Hotel <input checked="" type="radio"/> Bar/Tavern <input type="radio"/> Catering Establishment <input type="radio"/> Adult Entertainment <input type="radio"/> Wine Bar <input type="radio"/> Dance Club <input type="radio"/> Sports Bar <input type="radio"/> Club (Fraternal Organization - Members Only)		
Has applicant/owner filed with the SLA? If yes, when? If no, when do you plan to file?	YES	NO	will file after Community Board approves
Is the 500 Foot Rule applicable? If yes, please attach a diagram of the On-Premise liquor license establishments within a 500 ft. radius of your establishment and the Public Interest Statement.	YES	NO	* Only 2 locations within 500 feet -
Is the 200 Foot Rule applicable? If yes, please attach a diagram of the schools and houses of worship that trigger the rule.	YES	NO	
Has applicant/owner(s) read MCB4 Policy Regarding Concentration and Location of Alcoholic-Serving Establishments?	YES	NO	

\*Premises is generally only open for business three days a week, and the three days fluctuate.

OPERATIONAL DETAILS: (Closing time will be when establishment is vacated of all patrons)									
Hours: (Under 24hr)		MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY	
	Operation	7pm-11pm	7pm-11pm	7pm-11pm	7pm-11pm	7pm-11pm	7pm-11pm	7pm-11pm	7pm-11pm
	Kitchen	n/a - premises does not have a full kitchen							
Music	7pm-11pm	7pm-11pm	7pm-11pm	7pm-11pm	7pm-11pm	7pm-11pm	7pm-11pm	7pm-11pm	
If you plan to have music, what type(s)? (Circle all that apply)			BACKGROUND	X LIVE MUSIC	X DJ	JURE BOX	KARAOKE		
OCCUPANCY									
	Capacity (Certificate of Occupancy)	Maximum # of Persons Will Occupy Premises (Including Employees)	Number of Tables	Number of Stags	Number of Seats Only Bar	Number of Seated On Bar	Number of Seats at Stand Up Bar		
INSIDE	3988	3988	0	392	0	5	0		
OUTSIDE (General Stand Up Bar)	280 on roof incl. in total capacity	280	5	30	0	1 (included in the above total)		0	
SIDEWALK Cafe	n/a								
How many floors are there? What is the capacity for each floor?					ground floor - 2,468, 2nd floor - 260 3rd floor - 480 and roof deck - 280				
How frequently will the owner(s) be at the establishment?					Infrequently				
Will you be applying or intending to apply for a cabaret license with DCA? If yes, will there be dancing?					YES	NO			
Will applicant have bottle or table service for beverage alcohol?					YES	NO			
Will you be hosting private, promotional or corporate events?					YES	NO			
Will outside promoters be used on a regular basis? If yes please describe.					YES	NO			
Will you have a security plan? If, yes please attach.					YES	NO	attached.		
Will security plan be implemented?					YES	NO			
Will State certified security personnel be used?					YES	NO			
Will New York Nightlife Association and NYPD Best Practices be followed?					YES	NO			
Will applicant be using delivery bicycles? If yes, how many?					YES	NO			
Will delivery bicycles be clearly marked with the name of the restaurant and will staff wear attire clearly noting name as described by NYC Law?					YES	NO	n/a		
Where will delivery bicycles be stored during the day when not in use?					n/a				

LOCATION & ZONING			
Is this a Special District? If yes, is it Clinton, West Chelsea or Hudson Yards?	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>	
Does the building have a Certificate of Occupancy ("C of O") or a letter of no objection?	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>	
Is a Public Assembly permit required?	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>	
Are your plans filed with DOB?	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>	

Community Notification/Relations			
<b>NOTIFICATION:</b> List all block associations; tenant associations, co-op boards or condo boards of residential buildings; and community groups that applicant has notified regarding its application. For each please list both the organization and individual you contacted	# 1	Manhattan Community Board 4	
	# 2		
	# 3		
	# 4		
	# 5		
Please provide dates when applicant met with the groups listed above.		January 12, 2016 - Community Board 4	
Who was your contact person at each group you met with?		Janine Pretente	
When did applicant post the notice that was provided?		12/10/15	
Where did applicant post the notice that was provided?		near the entrance	
Will applicant provide owner cell phone number to neighbors and respond to complaints that arise? Please provide number in space provided.		YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>
Will applicant inform the Community Board office of its job openings and/or provide a hyperlink to applicants jobs webpage?		YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>

BUILDING DESIGN															
State the name and type of business previously located in the space.	Terminal 5														
Has a liquor-licensed establishment previously occupied this space at any time? If yes, please provide the name of the business.	YES	NO	promise is currently licensed												
Do you plan any changes to the existing façade? If yes, please describe.	YES	NO													
Will applicant have a vestibule within the establishment?	YES	NO													
Will applicant use a storm enclosure?	YES	NO													
Will applicant not place any items or obstructions on the sidewalk, for example, sandwich boards, sidewalk signs, freestanding menus and plants, as per the law?	YES	NO	<i>W/Signs</i>												
Will applicant comply with the NYC noise code?	YES	NO													
Will the establishment have any of the following: (circle all that apply)	<table border="1"> <thead> <tr> <th>FRENCH DOORS</th> <th>GARAGE DOORS</th> <th>WINDOWS THAT CAN BE OPENED</th> </tr> </thead> <tbody> <tr> <td>YES</td> <td>NO</td> <td></td> </tr> <tr> <td>YES</td> <td>NO</td> <td></td> </tr> <tr> <td>YES</td> <td>NO</td> <td></td> </tr> </tbody> </table>			FRENCH DOORS	GARAGE DOORS	WINDOWS THAT CAN BE OPENED	YES	NO		YES	NO		YES	NO	
FRENCH DOORS	GARAGE DOORS	WINDOWS THAT CAN BE OPENED													
YES	NO														
YES	NO														
YES	NO														
Will applicant close all windows, French doors, garage doors when any music or amplified sound (including televisions) is played inside the establishment?	YES	NO	n/a												
Will applicant close all windows, French doors, garage doors by 11 PM Friday and Saturday and 10 PM on all other days even if no music or amplified sound is played inside the establishment?	YES	NO	n/a												
Has applicant obtained an acoustical report from a certified sound engineer to assess potential noise disturbance to the neighboring residents and buildings?	YES	NO	currently facility undergoing alteration												
Will applicant follow the recommendations of a certified sound engineer to mitigate potential noise disturbance to the neighboring residents and buildings, including placing speakers on the floor of the establishment?	YES	NO	n/a												
Will the kitchen exhaust system extend to the roof?	YES	NO	n/a												
Will the establishment have an illuminated sign?	YES	NO	n/a												
Will the establishment have a canopy extending over the sidewalk?	YES	NO	n/a												
Where will the air conditioner be located? What type is it?	on the roof - 7 HVAC units														
When was the air conditioner installed?	unknown														

OUTDOOR SPACES OTHER THAN SIDEWALK CAFE			
Has the applicant/owner(s) read MCB 4 Rear Yard Rooftop Policy?	YES X	NO	
Will applicant use any outdoor spaces: rooftop, rear yard, patio, porch, balcony, pavilion, tents, deck or gazebo? If yes, which one(s)?	YES X	NO	rooftop
Are the floorplans for the outdoor space(s) included?	YES X	NO	
Will applicant close and vacate the outdoor space(s) by 11PM on Friday & Saturday and 10 PM on all other days?	YES X	NO	CB4 stipulation in place re: timing
Will the service and consumption of alcohol in any outdoor space only be via seated food service?	YES X	NO	no change to existing operations
Will applicant not allow standing space for patrons to drink or smoke in any outdoor space(s)?	YES X	NO	no change to existing operations
Will there be no amplified music, as per the law?	YES X	NO	
If amplified sound is played inside the establishment, will windows and doors be closed?	YES X	NO	
Will applicant agree to post signs outside asking customers to respect the neighbors?	YES X	NO	
Will applicant agree to train staff to encourage a peaceful environment?	YES X	NO	
Will applicant provide effective sound control (landscaping enclosure, soundproofing tenants apartments)	YES X	NO	
Will there be a lighting plan that allows safe usage of the outdoor space without disrupting neighbors?	YES X	NO	

OUTDOOR (M/D)MS - SIDEWALK CAFE	n/a - no sidewalk cafe		
Has the applicant/owner(s) read MCB4 Sidewalk Café Policy?	YES	NO	
Will applicant be applying for a sidewalk café now or in the future?	YES	NO	
Is applicant in this application seeking to include a sidewalk café in its liquor license?	YES	NO	
If yes, has applicant submitted an application and plans to NYC Dept. of Consumer Affairs? Please attach application and plans.	YES	NO	
Will applicant close and vacate the sidewalk café by 11 PM on Friday & Saturday and 10 PM on all other days?	YES	NO	
Will applicant be serving alcohol in the sidewalk café? If so, will you have waiter service?	YES	NO	
Will the café have a 3 ft. wide serving aisle running the entire length of the sidewalk cafe?	YES	NO	
Will applicant mark the perimeter of the café on the sidewalk?	YES	NO	
Will the service and consumption of alcohol in the sidewalk café only be via seated food service?	YES	NO	
Will the sidewalk café not provide standing space for drinking or smoking?	YES	NO	
Will applicant use any portable natural gas heaters? If so, do you have the requisite approvals from DOB & the Fire Department?	YES	NO	
Will applicant have a lighting plan that will allow safe usage of the outdoor space without disrupting neighbors?	YES	NO	
Will all furniture, plants and barricades be stored inside between the evening closing hours and the morning opening hours?	YES	NO	
Will all furniture be stored inside between December 21 <sup>st</sup> and March 21 <sup>st</sup> , and any other day when it rains or snows?	YES	NO	
Will applicant use umbrellas?	YES	NO	
If construction or construction protection has reduced the sidewalk width, will applicant always maintain an 8 foot clear path of sidewalk between the perimeter of the café and the closest obstruction including construction barricades?	YES	NO	

**ADDITIONAL STIPULATIONS: (Office Use Only)**

Applicant agrees to continue following stips from 7/22/10 CB4 letter as revised:

- Installation of a decibel limiter on the rooftop with a setting of no higher than 90 decibels
- When amplified music is played on the rooftop, it will only be background music. No live amplified music will be allowed
- The applicant may close at 2 a.m. twenty (20) days per year and 4 a.m. ten (10) days per year. On all other days of the year the applicoant will close no later than 1230 a.m.
- All amplified sound in the outdoor space must cease by 10 p.m. on Sunday through Thursday and 11 p.m. Friday & Saturday

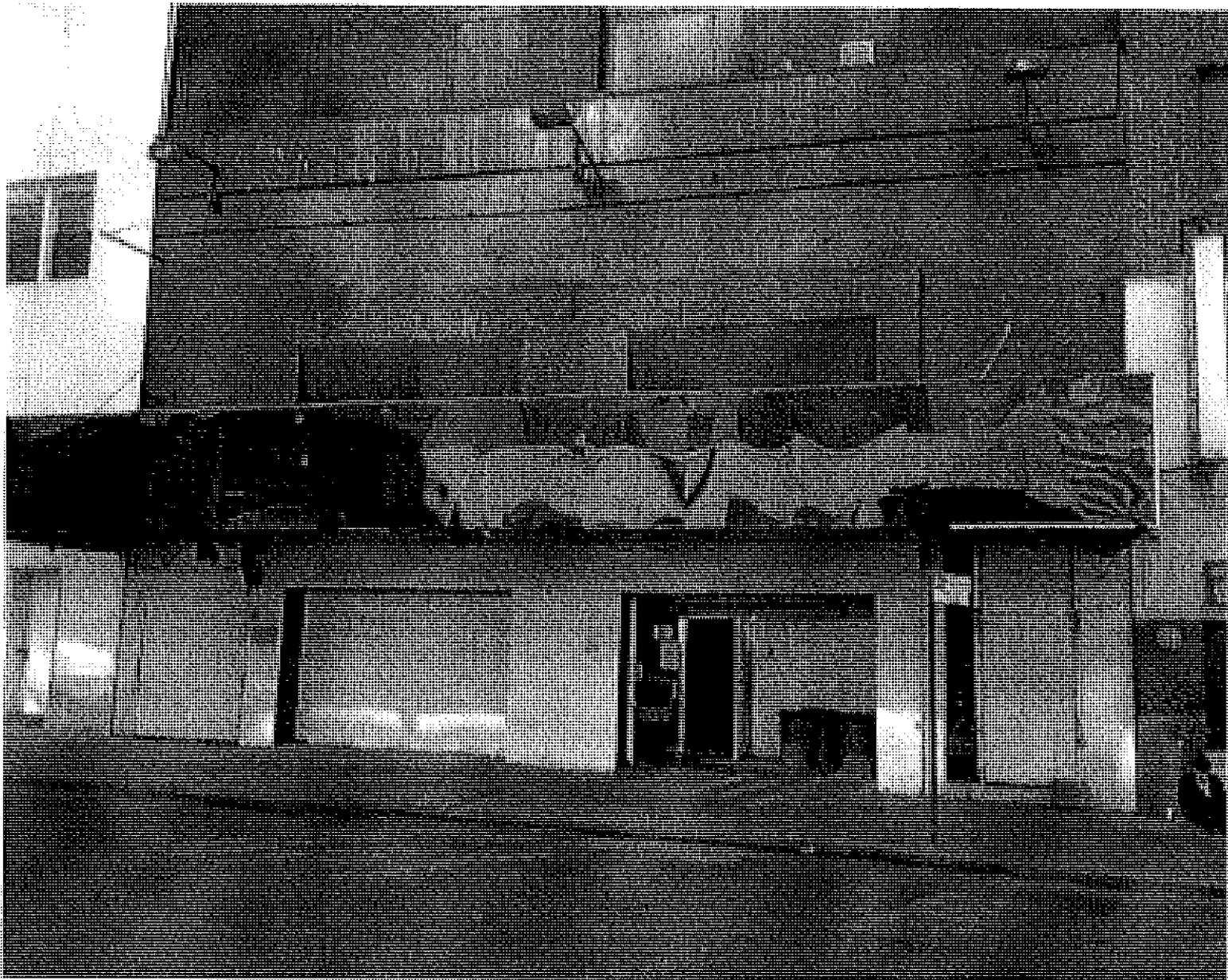
***To the extent any additional stipulation on pages 7 and 8 of this application conflicts with any response on pages 1 – 6 of this application, the stipulations on pages 7 and 8 control.***

## Manhattan Music Group, LLC

### Security Plan

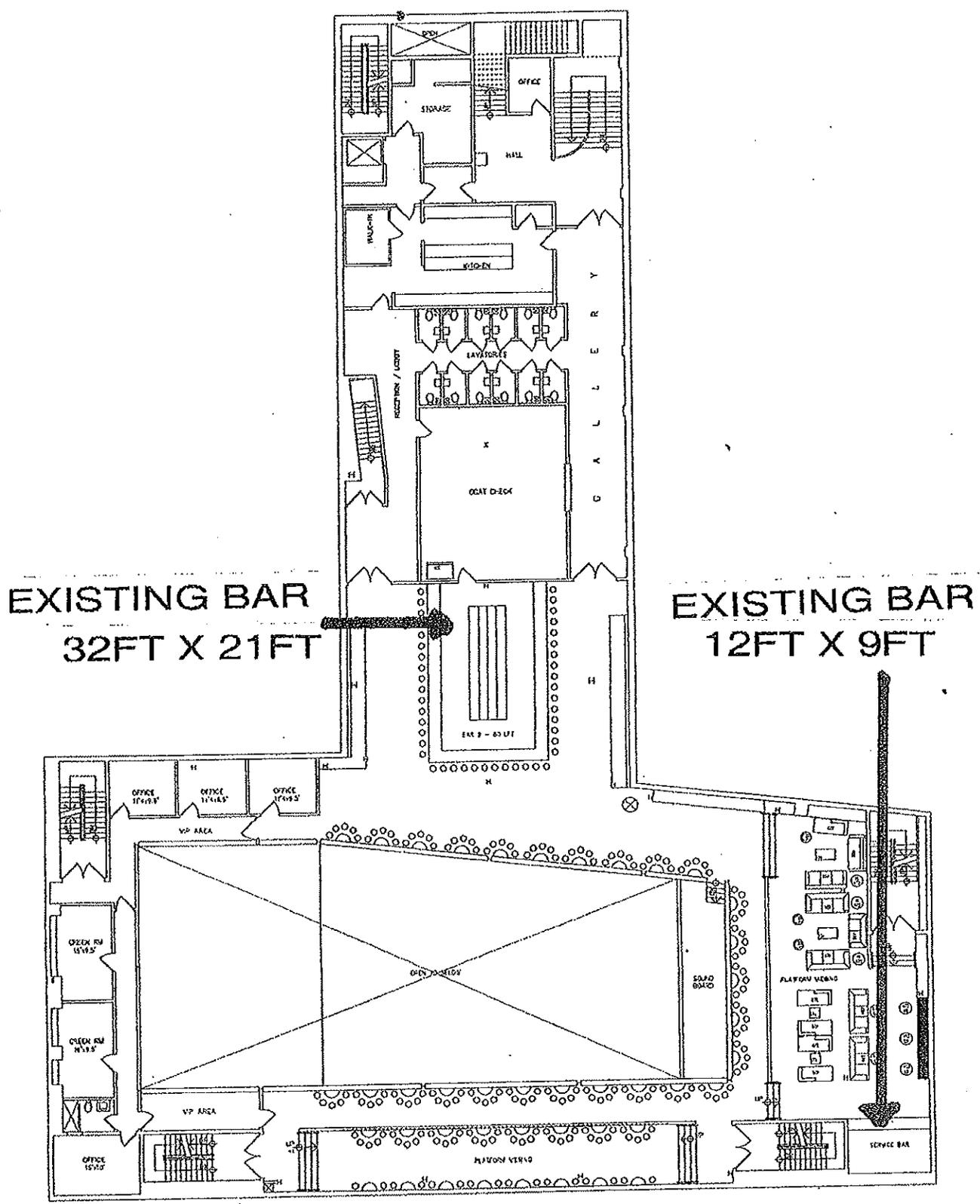
- All patrons entering the venue will have their identification checked by "ID Checkers" provided by The Bowery Presents
- All patrons over the age of 21 will be given a wristband which will be on the security key allowing permission to purchase and consume alcoholic beverages within the venue's lines of alcohol consumption.
- Any patron under the age of 21 found to be in possession of an alcoholic beverage within the venue will be immediately escorted out of the venue.
- Any patron found to be providing a patron under the age of 21 an alcoholic beverage will be immediately escorted out of the venue.
- Security will monitor bar areas to intervene with any patron found to be intoxicated.
- Security will escort intoxicated patrons to the on-site medical staff
- All bar staff are TIPS trained for alcohol service awareness.
- depending on the show we some times go to one drink per 21+ wristband.
- Security will be posted at all exits of the venue and will stop alcoholic beverages from exiting the lines of alcohol consumption

The Manhattan Music Group, LLC  
610 W. 56th St., New York, NY 10019





Manhattan Music Group, LLC  
610 W. 56th St., NY, NY 10019  
Second Floor

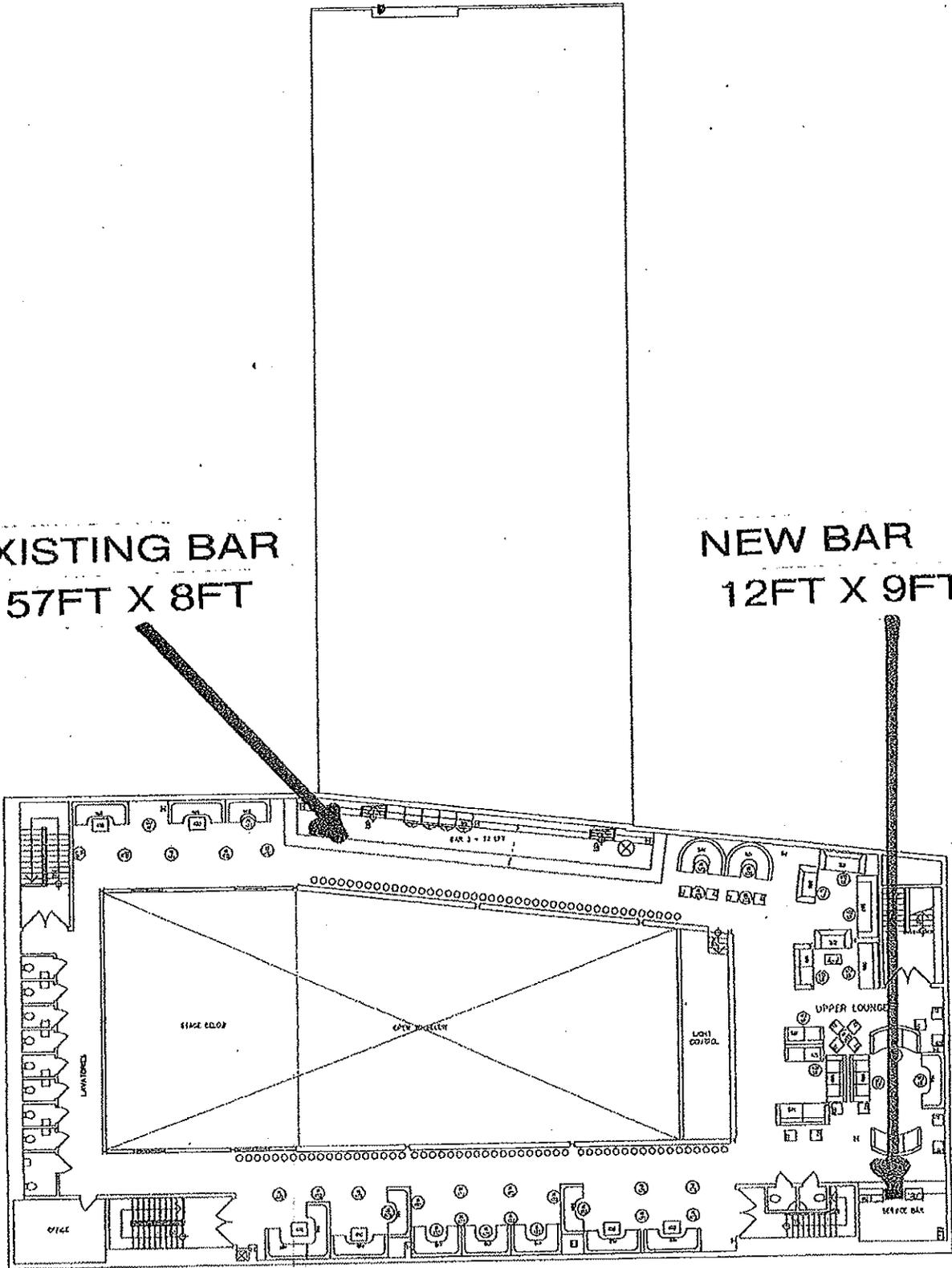


SECOND FLOOR PLAN

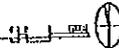
The Manhattan Music Group, LLC  
610 W. 56th St., NY, NY 10019  
Third Floor

EXISTING BAR  
57FT X 8FT

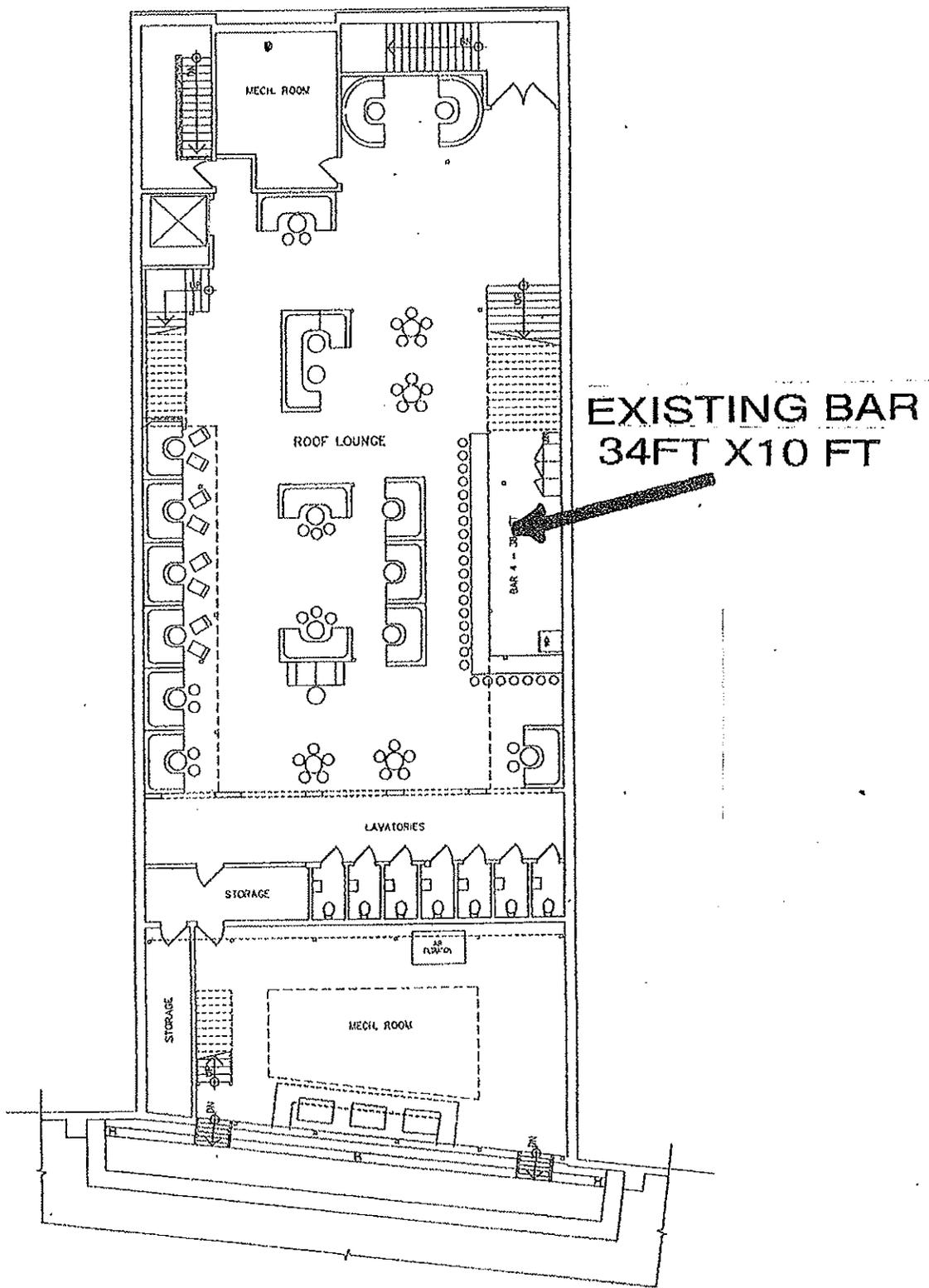
NEW BAR  
12FT X 9FT



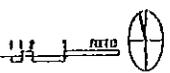
THIRD FLOOR PLAN



112 Manhattan Music Group, LLC  
610 W. 56th St., NY, NY 10019  
Roof top



ROOF LOUNGE PLAN



**Business License & Permits Committee**

February 3, 2016

Vincent G. Bradley  
Chairman  
New York State Liquor Authority  
80 S. Swan Street, 9<sup>th</sup> Floor  
Albany, New York 12210

**Re: Three A Plus Inc.**  
**d/b/a Malibu Diner**  
*163 W 23<sup>rd</sup> Street (6/7)*

Dear Chairman Bradley:

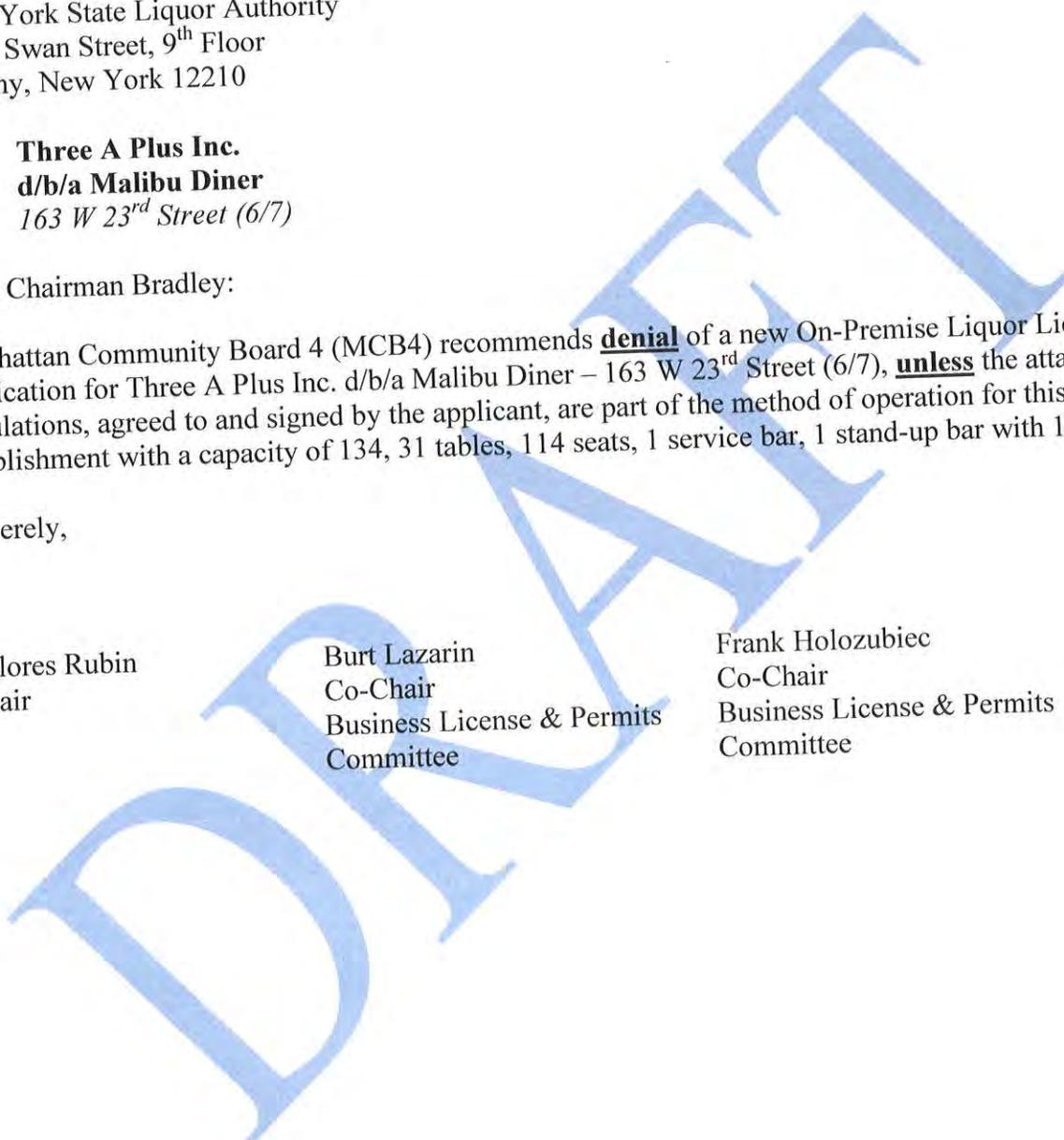
Manhattan Community Board 4 (MCB4) recommends **denial** of a new On-Premise Liquor License application for Three A Plus Inc. d/b/a Malibu Diner – 163 W 23<sup>rd</sup> Street (6/7), **unless** the attached stipulations, agreed to and signed by the applicant, are part of the method of operation for this establishment with a capacity of 134, 31 tables, 114 seats, 1 service bar, 1 stand-up bar with 13 seats.

Sincerely,

Delores Rubin  
Chair

Burt Lazarin  
Co-Chair  
Business License & Permits  
Committee

Frank Holozubiec  
Co-Chair  
Business License & Permits  
Committee



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# Manhattan Community Board 4

(All Fields Must Be Completed)

## Liquor License Stipulations Application

<b>CORPORATION NAME</b> Three A Plus Inc.		<b>DOING BUSINESS AS (DBA)</b> Malibu Diner		
<b>STREET ADDRESS</b> 163 West 23rd Street		<b>CROSS STREETS</b> 6th and 7th Avenues		<b>ZIP CODE</b> 10011
<b>OWNER</b> <i>(Attach a list of all the people that will be associated listed with the license)</i>	<b>NAME:</b> Alexandros Grimpas	<b>ATTORNEY/ REPRESENTATIVE</b>	<b>NAME:</b> Kordas & Marinis, LLP	
	<b>PHONE:</b> 212-691-1369		<b>PHONE:</b> 718-392-8000	
	<b>EMAIL:</b> agrimpas@gmail.com		<b>EMAIL:</b> peter.marinis@kandmlaw.com	
<b>MANAGER</b>	<b>NAME:</b> Alexandros Grimpas	<b>LANDLORD</b>	<b>NAME:</b> North Hudson Realty Corp.	
	<b>PHONE:</b> 212-691-1369		<b>PHONE:</b> 212-727-0222	
	<b>EMAIL:</b> agrimpas@gmail.com		<b>EMAIL:</b>	
<b>APPLICATION TYPE (Check One)</b>				
<input checked="" type="checkbox"/> <b>New</b>	Has applicant owned or managed a similar business?		<input checked="" type="radio"/> YES	<input type="radio"/> NO
	What is/was the name and address of establishment?		Malibu Diner, 163 West 23rd Street	
	What were the dates applicant was involved with this former premise?		Operator since 2007	
<input type="checkbox"/> <b>Transfer</b>	What is the prior license # and expiration date?			
	Is applicant making any alterations or operational changes?		<input type="radio"/> YES	<input type="radio"/> NO
	If alterations or operational changes are being made, please describe/list all changes.			
<input type="checkbox"/> <b>Alteration</b>	What is the current license # and expiration date?			
	Please list/describe the nature of all the changes and attach the plans:			
<b>METHOD OF OPERATION</b>				
<b>TYPE OF ALCOHOL</b>	<input checked="" type="checkbox"/> Liquor/Wine/Beer <input type="checkbox"/> Beer <input type="checkbox"/> Wine & Beer			
<b>ESTABLISHMENT TYPE</b>	<input checked="" type="checkbox"/> Restaurant <input type="checkbox"/> Cabaret <input type="checkbox"/> Night Club <input type="checkbox"/> Hotel <input type="checkbox"/> Bar/Tavern <input type="checkbox"/> Catering Establishment <input type="checkbox"/> Adult Entertainment <input type="checkbox"/> Wine Bar <input type="checkbox"/> Dance Club <input type="checkbox"/> Sports Bar <input type="checkbox"/> Club (Fraternal Organization – Members Only)			
Has applicant/owner filed with the SLA? If yes, when? If no, when do you plan to file?		<input checked="" type="radio"/> YES	<input type="radio"/> NO	2007
Is the 500 Foot Rule applicable? If yes, please attach a diagram of the On-Premise liquor license establishments within a 500 ft. radius of your establishment and the Public Interest Statement.		<input checked="" type="radio"/> YES	<input type="radio"/> NO	
Is the 200 Foot Rule applicable? If yes, please attach a diagram of the schools and houses of worship that trigger the rule.		<input type="radio"/> YES	<input checked="" type="radio"/> NO	
Has applicant/owner(s) read MCB4 Policy Regarding Concentration and Location of Alcoholic-Serving Establishments?		<input checked="" type="radio"/> YES	<input type="radio"/> NO	

**OPERATIONAL DETAILS** (\*Closing time will be when establishment is vacated of all patrons)

HOURS* <i>(Indoor Only)</i>		MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY
	Operation	24h	6am - 12 am	24h	24h	24h	24h	24h
	Kitchen	24h	6am - 12 am	24h	24h	24h	24h	24h
	Music	24h	6am - 12 am	24h	24h	24h	24h	24h
If you plan to have music, what type(s)? (Circle all that apply)			BACKGROUND	LIVE MUSIC	DJ	JUKE BOX	KARAOKE	

**OCCUPANCY**

	Capacity (Certificate of Occupancy)	Maximum # of Persons You Anticipate Occupying Premises (Including Employees)	Number of Tables	Number of Seats	Number of Service Only Bars	Number of Stand-Up Bars	Number of Seats at Stand-Up Bar	
<b>INSIDE</b>	134	134	31	114	1	1	13	
<b>OUTSIDE</b> <i>(Other than sidewalk cafe)</i>	N/A							
<b>SIDEWALK CAFE</b>	N/A							
How many floors are there? What is the capacity for each floor?					1-134			
How frequently will the owner(s) be at the establishment?					80 hours per week - 2 principals working full time			
Will you be applying or intending to apply for a cabaret license with DCA? If yes, will there be dancing?					YES	<input checked="" type="radio"/>		
Will applicant have bottle or table service for beverage alcohol?					YES	<input checked="" type="radio"/>		
Will you be hosting private; promotional or corporate events?					<input checked="" type="radio"/>	NO	Holiday Gatherings	
Will outside promoters be used on a regular basis? If yes please describe.					YES	<input checked="" type="radio"/>		
Will you have a security plan? If, yes please attach.					YES	<input checked="" type="radio"/>		
Will security plan be implemented?					YES	<input checked="" type="radio"/>		
Will State certified security personnel be used?					YES	<input checked="" type="radio"/>		
Will New York Nightlife Association and NYPD Best Practices be followed?					YES	NO	N/A	
Will applicant be using delivery bicycles? If yes, how many?					<input checked="" type="radio"/>	NO	5 bicycles	
Will delivery bicycles be clearly marked with the name of the restaurant and will staff wear attire clearly noting name as described by NYC Law?					<input checked="" type="radio"/>	NO		
Where will delivery bicycles be stored during the day when not in use?					In basement			

**LOCATION & ZONING**

Is this a Special District? If yes, is it Clinton, West Chelsea or Hudson Yards?	YES	<input checked="" type="radio"/>	
Does the building have a Certificate of Occupancy ("C of O") or a letter of no objection?	<input checked="" type="radio"/>	NO	
Is a Public Assembly permit required?	<input checked="" type="radio"/>	NO	
Are your plans filed with DOB?	YES	NO	N/A

**Community Notification/Relations**

<b>NOTIFICATION:</b> List all block associations; tenant associations, co-op boards or condo boards of residential buildings; and community groups that applicant has notified regarding its application. For each please list both the organization and individual you contacted	# 1	
	# 2	
	# 3	
	# 4	
	# 5	
Please provide dates when applicant met with the groups listed above.		
Who was your contact person at each group you met with?		
When did applicant post the notice that was provided?		
Where did applicant post the notice that was provided?		
Will applicant provide owner cell phone number to neighbors and respond to complaints that arise? Please provide number in space provided.		YES NO
Will applicant inform the Community Board office of its job openings and/or provide a hyperlink to applicants jobs webpage?		YES NO

<b>BUILDING DESIGN</b>			
State the name and type of business previously located in the space.	Malibu Diner - Restaurant		
Has a liquor-licensed establishment previously occupied this space at any time? If yes, please provide the name of the business.	<input checked="" type="radio"/> YES	<input type="radio"/> NO	Malibu Diner
Do you plan any changes to the existing façade? If yes, please describe.	YES	<input checked="" type="radio"/> NO	
Will applicant have a vestibule within the establishment?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	
Will applicant use a storm enclosure?	YES	<input checked="" type="radio"/> NO	
Will applicant not place any items or obstructions on the sidewalk, for example, sandwich boards, sidewalk signs, freestanding menus and plants, as per the law?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	
Will applicant comply with the NYC noise code?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	
Will the establishment have any of the following: (circle all that apply)	<b>FRENCH DOORS</b>	<b>GARAGE DOORS</b>	<b>WINDOWS THAT CAN BE OPENED</b>
Will applicant close all windows, French doors, garage doors when any music or amplified sound (including televisions) is played inside the establishment?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	N/A
Will applicant close all windows, French doors, garage doors by 11 PM Friday and Saturday and 10 PM on all other days even if no music or amplified sound is played inside the establishment?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	
Has applicant obtained an acoustical report from a certified sound engineer to assess potential noise disturbance to the neighboring residents and buildings?	YES	<input checked="" type="radio"/> NO	
Will applicant follow the recommendations of a certified sound engineer to mitigate potential noise disturbance to the neighboring residents and buildings, including placing speakers on the floor of the establishment?	YES	<input type="radio"/> NO	N/A
Will the kitchen exhaust system extend to the roof?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	
Will the establishment have an illuminated sign?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	
Will the establishment have a canopy extending over the sidewalk?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	
Where will the air conditioner be located? What type is it?	Back of building - split unit		
When was the air conditioner installed?	2007		

**OUTDOOR ITEMS - OTHER THEN SIDEWALK CAFE**

Has the applicant/owner(s) read MCB 4 Rear Yard Rooftop Policy?	YES	NO	N/A
Will applicant use any outdoor spaces: rooftop, rear yard, patio, porch, balcony, pavilion, tents, deck or gazebo? If yes, which one(s)?	YES	NO	AG
Are the floorplans for the outdoor space(s) included?	YES	NO	
Will applicant close and vacate the outdoor space(s) by 11PM on Friday & Saturday and 10 PM on all other days?	YES	NO	
Will the service and consumption of alcohol in any outdoor space only be via seated food service?	YES	NO	
Will applicant not allow standing space for patrons to drink or smoke in any outdoor space(s)?	YES	NO	
Will there be no amplified music, as per the law?	YES	NO	
If amplified sound is played inside the establishment, will windows and doors be closed?	YES	NO	
Will applicant agree to post signs outside asking customers to respect the neighbors'?	YES	NO	
Will applicant agree to train staff to encourage a peaceful environment?	YES	NO	
Will applicant provide effective sound control (landscaping enclosure, soundproofing tenants apartments)	YES	NO	
Will there be a lighting plan that allows safe usage of the outdoor space without disrupting neighbors?	YES	NO	

## OUTDOOR ITEMS – SIDEWALK CAFÉ

Has the applicant/owner(s) read MCB4 Sidewalk Café Policy?	YES	NO	N/A
Will applicant be applying for a sidewalk café now or in the future?	YES	NO	AG
Is applicant in this application seeking to include a sidewalk café in its liquor license?	YES	NO	
If yes, has applicant submitted an application and plans to NYC Dept. of Consumer Affairs? Please attach application and plans.	YES	NO	
Will applicant close and vacate the sidewalk café by 11 PM on Friday & Saturday and 10 PM on all other days?	YES	NO	
Will applicant be serving alcohol in the sidewalk café? If so, will you have waiter service?	YES	NO	
Will the café have a 3 ft. wide serving aisle running the entire length of the sidewalk cafe?	YES	NO	
Will applicant mark the perimeter of the café on the sidewalk?	YES	NO	
Will the service and consumption of alcohol in the sidewalk café only be via seated food service?	YES	NO	
Will the sidewalk café not provide standing space for drinking or smoking?	YES	NO	
Will applicant use any portable natural gas heaters? If so, do you have the requisite approvals from DOB & the Fire Department?	YES	NO	
Will applicant have a lighting plan that will allow safe usage of the outdoor space without disrupting neighbors?	YES	NO	
Will all furniture, plants and barricades be stored inside between the evening closing hours and the morning opening hours?	YES	NO	
Will all furniture be stored inside between December 21 <sup>st</sup> and March 21 <sup>st</sup> , and any other day when it rains or snows?	YES	NO	
Will applicant use umbrellas?	YES	NO	
If construction or construction protection has reduced the sidewalk width, will applicant always maintain an 8 foot clear path of sidewalk between the perimeter of the café and the closes obstruction including construction barricades?	YES	NO	

**ADDITIONAL STIPULATIONS: (Office Use Only)**

- All service of alcohol other than beer & wine will cease by 2 a.m. nightly
- All service of beer & wine will cease by 4 a.m. nightly

***To the extent any additional stipulation on pages 7 and 8 of this application conflicts with any response on pages 1 – 6 of this application, the stipulations on pages 7 and 8 control.***

1 **Business License & Permits Committee**

Item #: 09

2  
3 February 3, 2016

4  
5 Vincent G. Bradley  
6 Chairman  
7 New York State Liquor Authority  
8 80 S. Swan Street, 9<sup>th</sup> Floor  
9 Albany, New York 12210

10  
11 **Re: Zeren LLC**  
12 **d/b/a Kahve Coffee**  
13 *667 10<sup>th</sup> Avenue (46/47)*  
14

15 Dear Chairman Bradley:

16  
17 Manhattan Community Board 4 (MCB4) recommends **denial** of a new Wine & Beer License application  
18 for Zeren LLC. d/b/a Kahve Coffee – 667 10<sup>th</sup> Avenue (46/47), **unless** the attached stipulations, agreed  
19 to and signed by the applicant, are part of the method of operation for this establishment with a capacity  
20 of 40, 3 tables, 15 seats, 1 stand-up bar with 6 seats.

21  
22 Sincerely,

23  
24  
25 Delores Rubin  
Chair

Burt Lazarin  
Co-Chair  
Business License & Permits  
Committee

Frank Holozubiec  
Co-Chair  
Business License & Permits  
Committee

26  
27

# Manhattan Community Board 4

(All Fields Must Be Completed)

# Liquor License Stipulations Application

CORPORATION NAME <b>Zeren LLC</b>		DOING BUSINESS AS (DBA) <b>Kahve Coffee</b>	
STREET ADDRESS <b>667 10th Ave</b>		CROSS STREETS <b>46th St &amp; 47th St</b>	ZIP CODE <b>10036</b>
OWNER <small>(Attach a list of all the people that will be associated/listed with the license)</small>	NAME: <b>EROL Zeren &amp; Hector De Marchena</b>	ATTORNEY/ REPRESENTATIVE	NAME: <b>ROSA m Sanchez</b>
	PHONE: <b>305-458-9940</b>		PHONE: <b>646 619 1166</b>
	EMAIL: <b>edzeren@gmail.com</b>		EMAIL: <b>ROSA@ROSA m Sanchez.com</b>
MANAGER	NAME:	LANDLORD	NAME: <b>500 West 47th Street LLC</b>
	PHONE:		PHONE:
	EMAIL:		EMAIL:
<b>APPLICATION TYPE (Check One)</b>			
<input checked="" type="radio"/> <b>New</b>	Has applicant owned or managed a similar business?	<input checked="" type="radio"/> <b>YES</b>	<input type="radio"/> <b>NO</b>
	What is/was the name and address of establishment?	<b>Kahve 774 9th Ave.</b>	
	What were the dates applicant was involved with this former premise?	<b>2012 (premise does not have a liquor license)</b>	
<input type="radio"/> <b>Transfer</b>	What is the prior license # and expiration date?		
	Is applicant making any alterations or operational changes?	<input type="radio"/> <b>YES</b>	<input type="radio"/> <b>NO</b>
	<i>If alterations or operational changes are being made, please describe/list all changes.</i>		
<input type="radio"/> <b>Alteration</b>	What is the current license # and expiration date?		
	<i>Please list/describe the nature of all the changes and attach the plans:</i>		
<b>METHOD OF OPERATION</b>			
TYPE OF ALCOHOL	<input type="radio"/> Liquor/Wine/Beer	<input type="radio"/> Beer	<input checked="" type="radio"/> Wine & Beer
ESTABLISHMENT TYPE	<input checked="" type="radio"/> Restaurant <input type="radio"/> Cabaret <input type="radio"/> Night Club <input type="radio"/> Hotel <input type="radio"/> Bar/Tavern <input type="radio"/> Catering Establishment <i>(CAFE)</i>		
	<input type="radio"/> Adult Entertainment <input type="radio"/> Wine Bar <input type="radio"/> Dance Club <input type="radio"/> Sports Bar <input type="radio"/> Club (Fraternal Organization - Members Only)		
Has applicant/owner filed with the SLA? If yes, when? If no, when do you plan to file?	<input type="radio"/> YES	<input checked="" type="radio"/> <b>NO</b>	<b>After CB mtg</b>
Is the 500 Foot Rule applicable? If yes, please attach a diagram of the On-Premise liquor license establishments within a 500 ft. radius of your establishment and the Public Interest Statement.	<input type="radio"/> YES	<input checked="" type="radio"/> <b>NO</b>	
Is the 200 Foot Rule applicable? If yes, please attach a diagram of the schools and houses of worship that trigger the rule.	<input type="radio"/> YES	<input checked="" type="radio"/> <b>NO</b>	
Has applicant/owner(s) read MCB4 Policy Regarding Concentration and Location of Alcoholic-Serving Establishments?	<input checked="" type="radio"/> <b>YES</b>	<input type="radio"/> NO	

**OPERATIONAL DETAILS** (\*Closing time will be when establishment is vacated of all patrons)

		MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY
<b>HOURS*</b> (Indoor Only)	Operation	6 AM - 1 AM	6 AM - 1 AM	6 AM - 1 AM	6 AM - 2 AM	6 AM - 1 AM	6 AM - 1 AM	6 AM - 1 AM
	Kitchen	6 AM - 12 AM	6 AM - 12 AM	6 AM - 12 AM	6 AM - 12 AM	6 AM - 12 AM	6 AM - 12 AM	6 AM - 12 AM
	Music	6 AM - 1 AM	6 AM - 1 AM	6 AM - 1 AM	6 AM - 1 AM	6 AM - 1 AM	6 AM - 1 AM	6 AM - 1 AM
If you plan to have music, what type(s)? (Circle all that apply)			<u>BACKGROUND</u>	LIVE MUSIC	DJ	JUKE BOX	KARAOKE	

**OCCUPANCY**

	Capacity (Certificate of Occupancy)	Maximum # of Persons You Anticipate Occupying Premises (Including Employees)	Number of Tables	Number of Seats	Number of Service Only Bars	Number of Stand-Up Bars	Number of Seats at Stand-Up Bar
<b>INSIDE</b>	40	40	3	15	0	1	6
<b>OUTSIDE</b> (Other than sidewalk café.)	0						
<b>SIDEWALK CAFÉ</b>	<i>[Handwritten scribbles]</i>						

How many floors are there? What is the capacity for each floor? ground F1 and Basement

How frequently will the owner(s) be at the establishment? 7 days a week

Will you be applying or intending to apply for a cabaret license with DCA? If yes, will there be dancing?	YES	<input checked="" type="radio"/> NO	
Will applicant have bottle or table service for beverage alcohol?	YES	<input checked="" type="radio"/> NO	
Will you be hosting private, promotional or corporate events?	YES	<input checked="" type="radio"/> NO	
Will outside promoters be used on a regular basis? If yes please describe.	YES	<input checked="" type="radio"/> NO	
Will you have a security plan? If, yes please attach.	YES	<input checked="" type="radio"/> NO	
Will security plan be implemented?	YES	<input checked="" type="radio"/> NO	
Will State certified security personnel be used?	YES	<input checked="" type="radio"/> NO	
Will New York Nighliffe Association and NYPD Best Practices be followed?	<input checked="" type="radio"/> YES	NO	
Will applicant be using delivery bicycles? If yes, how many?	YES	<input checked="" type="radio"/> NO	
Will delivery bicycles be clearly marked with the name of the restaurant and will staff wear attire clearly noting name as described by NYC Law?	YES	NO	N/A
Where will delivery bicycles be stored during the day when not in use?	N/A		

LOCATION & ZONING			
Is this a Special District? If yes, is it Clinton, West Chelsea or Hudson Yards?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	Clinton
Does the building have a Certificate of Occupancy ("C of O") or a letter of no objection?	<input type="radio"/> YES	<input checked="" type="radio"/> NO	LNO to be applied for
Is a Public Assembly permit required?	<input type="radio"/> YES	<input checked="" type="radio"/> NO	
Are your plans filed with DOB?	<input type="radio"/> YES	<input checked="" type="radio"/> NO	

Community Notification/Relations			
<b>NOTIFICATION:</b> List all block associations; tenant associations, co-op boards or condo boards of residential buildings; and community groups that applicant has notified regarding its application. For each please list both the organization and individual you contacted	# 1	Please see attached Rider	
	# 2		
	# 3		
	# 4		
	# 5		
Please provide dates when applicant met with the groups listed above.	January 5 <sup>th</sup> to meet w/ Elke Fears		
Who was your contact person at each group you met with?	Elke Fears		
When did applicant post the notice that was provided?	12/21/15		
Where did applicant post the notice that was provided?	along 10 <sup>th</sup> Ave Btw 46 <sup>th</sup> & 47 <sup>th</sup> St		
Will applicant provide owner cell phone number to neighbors and respond to complaints that arise? Please provide number in space provided.	<input checked="" type="radio"/> YES	<input type="radio"/> NO	305 915 1740
Will applicant inform the Community Board office of its job openings and/or provide a hyperlink to applicants jobs webpage?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	

Tim	Tanner	West 45th Street BA	tangotanner@gmail.com
Chana	Widawski	West 45th Street (b. 9th/12th)	chanawid@gmail.com
Allison	Tupper	West 46th Street (8th Ave to 12th Ave)	AllisonTupper@verizon.net
Steve	Fanto	West 46 Street Block Asscoalition (8th Ave to 12th Ave)	stephenfanto@gmail.com
Phil	Kassen	West 47th/48th Streets	
Elke	Fears	West 47th/48th Streets	aefearshk@earthlink.net
Larry	Roberts	West 47th/48th Streets	larrymichaelroberts@gmail.com

## BUILDING DESIGN

State the name and type of business previously located in the space.	Coffee Shop		
Has a liquor-licensed establishment previously occupied this space at any time? If yes, please provide the name of the business.	YES	<input checked="" type="radio"/> NO	
Do you plan any changes to the existing façade? If yes, please describe.	YES	<input checked="" type="radio"/> NO	
Will applicant have a vestibule within the establishment?	YES	<input checked="" type="radio"/> NO	
Will applicant use a storm enclosure?	YES	<input checked="" type="radio"/> NO	
Will applicant not place any items or obstructions on the sidewalk, for example, sandwich boards, sidewalk signs, freestanding menus and plants, as per the law?	<input checked="" type="radio"/> YES	NO	
Will applicant comply with the NYC noise code?	<input checked="" type="radio"/> YES	NO	
Will the establishment have any of the following: (circle all that apply)	N/A	FRENCH DOORS	GARAGE DOORS
			WINDOWS THAT CAN BE OPENED
Will applicant close all windows, French doors, garage doors when any music or amplified sound (including televisions) is played inside the establishment?	YES	NO	N/A
Will applicant close all windows, French doors, garage doors by 11 PM Friday and Saturday and 10 PM on all other days even if no music or amplified sound is played inside the establishment?	YES	NO	N/A
Has applicant obtained an acoustical report from a certified sound engineer to assess potential noise disturbance to the neighboring residents and buildings?	YES	<input checked="" type="radio"/> NO	
Will applicant follow the recommendations of a certified sound engineer to mitigate potential noise disturbance to the neighboring residents and buildings, including placing speakers on the floor of the establishment?	YES	NO	N/A
Will the kitchen exhaust system extend to the roof?	YES	<input checked="" type="radio"/> NO	
Will the establishment have an illuminated sign?	YES	NO	undecided
Will the establishment have a canopy extending over the sidewalk?	YES	NO	undecided
Where will the air conditioner be located? What type is it?	in the window @ the front		
When was the air conditioner installed?	4 years ago		

N/A

OUTDOOR ITEMS - OTHER THAN SIDEWALK CAFÉ		
Has the applicant/owner(s) read MCB 4 Rear Yard Rooftop Policy?	YES	NO
Will applicant use any outdoor spaces: rooftop, rear yard, patio, porch, balcony, pavilion, tents, deck or gazebo? If yes, which one(s)?	YES	NO
Are the floorplans for the outdoor space(s) included?	YES	NO
Will applicant close and vacate the outdoor space(s) by 11PM on Friday & Saturday and 10 PM on all other days?	YES	NO
Will the service and consumption of alcohol in any outdoor space only be via seated food service?	YES	NO
Will applicant not allow standing space for patrons to drink or smoke in any outdoor space(s)?	YES	NO
Will there be no amplified music, as per the law?	YES	NO
If amplified sound is played inside the establishment, will windows and doors be closed?	YES	NO
Will applicant agree to post signs outside asking customers to respect the neighbors'?	YES	NO
Will applicant agree to train staff to encourage a peaceful environment?	YES	NO
Will applicant provide effective sound control (landscaping enclosure, soundproofing tenants apartments)	YES	NO
Will there be a lighting plan that allows safe usage of the outdoor space without disrupting neighbors?	YES	NO

## OUTDOOR ITEMS – SIDEWALK CAFÉ

Has the applicant/owner(s) read MCB4 Sidewalk Café Policy?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	
Will applicant be applying for a sidewalk café now or in the future?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	<i>In the future</i>
Is applicant in this application seeking to include a sidewalk café in its liquor license?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	
If yes, has applicant submitted an application and plans to NYC Dept. of Consumer Affairs? Please attach application and plans.	YES	<input checked="" type="radio"/> NO	
Will applicant close and vacate the sidewalk café by 11 PM on Friday & Saturday and 10 PM on all other days?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	
Will applicant be serving alcohol in the sidewalk café? If so, will you have waiter service?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	
Will the café have a 3 ft. wide serving aisle running the entire length of the sidewalk café?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	
Will applicant mark the perimeter of the café on the sidewalk?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	
Will the service and consumption of alcohol in the sidewalk café only be via seated food service?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	
Will the sidewalk café not provide standing space for drinking or smoking?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	
Will applicant use any portable natural gas heaters? If so, do you have the requisite approvals from DOB & the Fire Department?	YES	<input checked="" type="radio"/> NO	
Will applicant have a lighting plan that will allow safe usage of the outdoor space without disrupting neighbors?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	
Will all furniture, plants and barricades be stored inside between the evening closing hours and the morning opening hours?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	
Will all furniture be stored inside between December 21 <sup>st</sup> and March 21 <sup>st</sup> , and any other day when it rains or snows?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	
Will applicant use umbrellas?	YES	NO	<i>Undecided</i>
If construction or construction protection has reduced the sidewalk width, will applicant always maintain an 8 foot clear path of sidewalk between the perimeter of the café and the closes obstruction including construction barricades?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	

**ADDITIONAL STIPULATIONS: (Office Use Only)**

This application does not extend to any sidewalk cafe

***To the extent any additional stipulation on pages 7 and 8 of this application conflicts with any response on pages 1 – 6 of this application, the stipulations on pages 7 and 8 control.***

## Menu

ZEREN LLC, DBA Kahve Coffee, 667 10<sup>th</sup> ave sample menu

\*World wine menu, local craft beers

*-Short descriptions of origin & taste profiles under each one*

\*Gourmet small plates

*-specify gluten free options*

*- choose a few items to recommend a pairing of a specific wine or beer*

### Red wine

Rioja Tempranillo  
*Spain*

Shiraz  
*South Africa*

Sangiovese or Super Tuscan  
*Italy*

Cabernet Sauvignon  
*Local- finger lakes?*

Malbec  
*Argentina*

Bordeaux  
*France*

## White wine

Sancerre  
*France*

Reisling  
*Germany*

Gruner Veltliner  
*Austria*

Chardonnay or Chablis (unoaked chardonnay)  
*France*

*Local - finger lakes?*

Pinot Blanc

---

## Beer

1 seasonal on tap- local

## *Small plates*

Avocado Toast  
*gluten free toast*  
*avocado smash*

Truffle Tots  
*Truffle oil*  
*Parmesean*  
*Gluten free*

Truffle Mac & Cheese  
*Gluten free*  
*Gourmet cheeses*

## *Breads and Pastries*

### **cookies**

chocolate chip

oatmeal raisin

dark chocolate toffee

mini-cookies

salted chocolate buckwheat cookie

malted granola cookie

### **brownies & blondies**

chocolate chip brownie

black & white brownie

peanut butter brownie

walnut brownie

black & white blondie

peanut butter blondie

coconut walnut chocolate chip blondie

everything else

### **muffin**

sprouted grain muffin

blueberry muffin

chocolate muffin (with brownie butter streusel)

### **croissant**

traditional French-style croissant

almond croissant

pain au chocolat

traditional

pain au raisin brioche

rum-poached black currants, vanilla pastry cream

### **low fat parfaits**

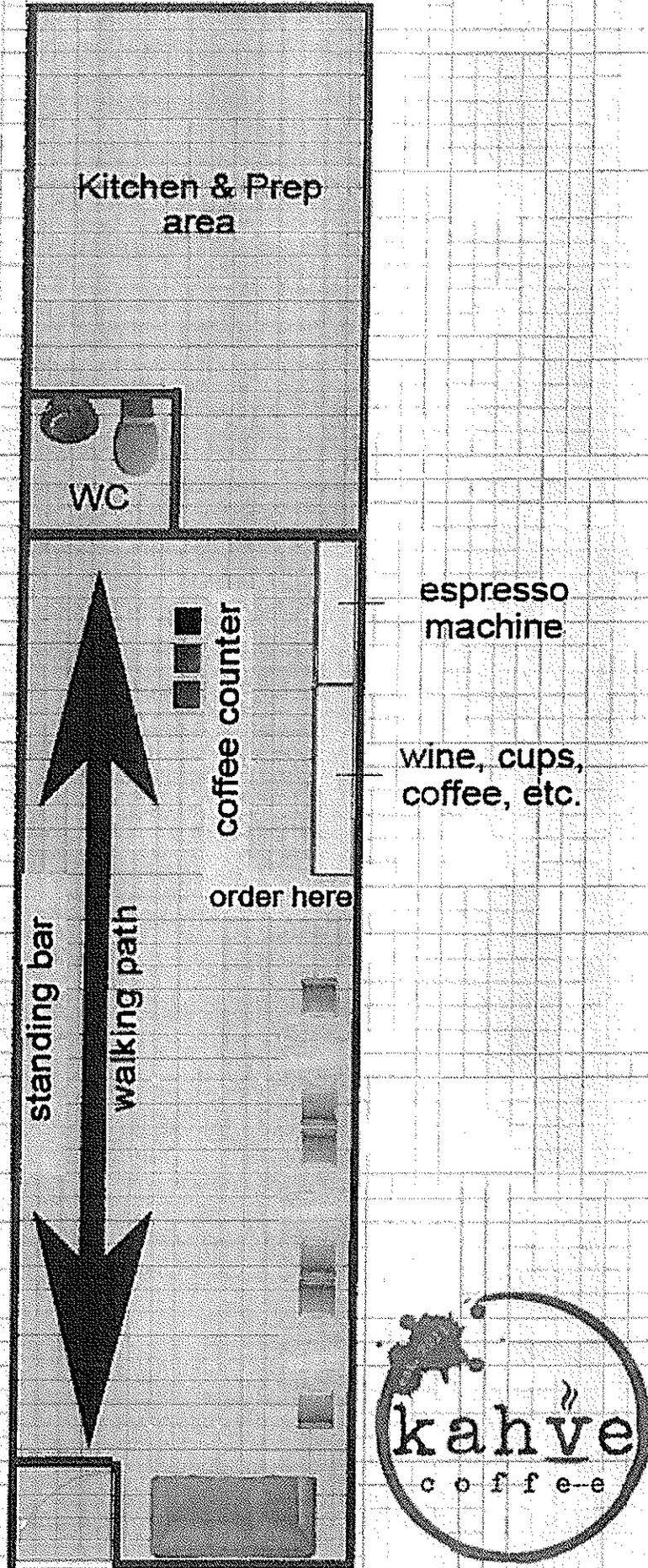
plain yogurt parfait

strawberry yogurt parfait

### **macaron**

various flavors (seasonal)

# Kahve-2 Floor Plan 12/28/15



1 **Business License & Permits Committee**

**Item #: 10**

2  
3 February 3, 2016

4  
5 Vincent G. Bradley  
6 Chairman  
7 New York State Liquor Authority  
8 80 S. Swan Street, 9<sup>th</sup> Floor  
9 Albany, New York 12210

10  
11 **Re: 420 West 42 Street Gourmet Food Inc.**  
12 **d/b/a Treehaus**  
13 *470 W 42<sup>nd</sup> Street (9/10)*  
14

15 Dear Chairman Bradley:

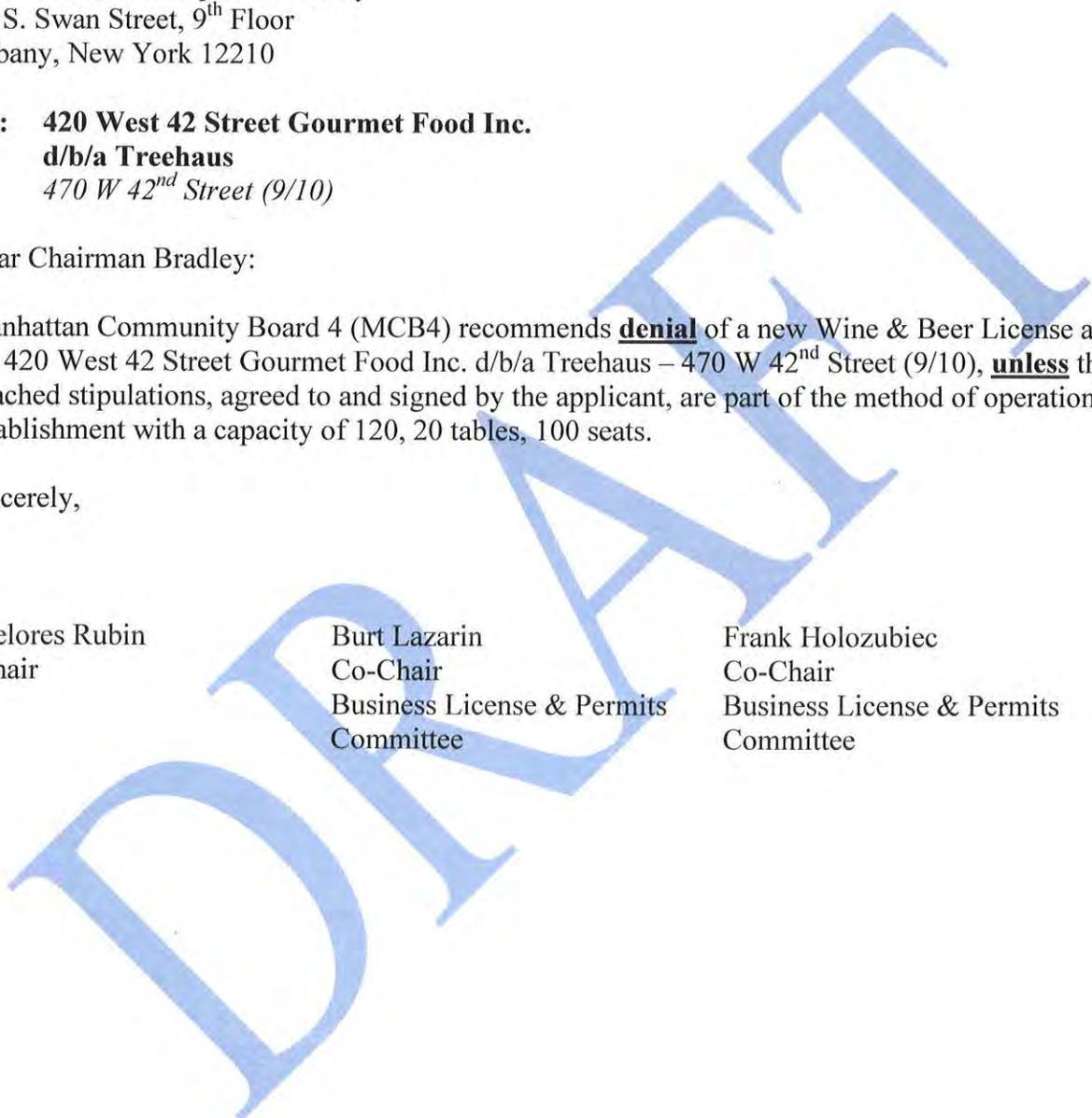
16  
17 Manhattan Community Board 4 (MCB4) recommends **denial** of a new Wine & Beer License application  
18 for 420 West 42 Street Gourmet Food Inc. d/b/a Treehaus – 470 W 42<sup>nd</sup> Street (9/10), **unless** the  
19 attached stipulations, agreed to and signed by the applicant, are part of the method of operation for this  
20 establishment with a capacity of 120, 20 tables, 100 seats.

21  
22 Sincerely,

23  
24  
25 Delores Rubin  
Chair

Burt Lazarin  
Co-Chair  
Business License & Permits  
Committee

Frank Holozubiec  
Co-Chair  
Business License & Permits  
Committee



26  
27

# Manhattan Community Board 4

(All Fields Must Be Completed)

# Liquor License Stipulations Application

<b>CORPORATION NAME</b>		<b>DOING BUSINESS AS (DBA)</b>	
420 West 42 Street Gourmet Food INC		Treehaus	
<b>STREET ADDRESS</b>		<b>CROSS STREETS</b>	<b>ZIP CODE</b>
470 W 42nd Street, New York, NY		9th Ave & 10th Ave	10036
<b>OWNER</b> <small>(Attach a list of all the people that will be associated/listed with the license)</small>	<b>NAME:</b>	Michael Park	<b>NAME:</b> Samuel Ahne, Esq.
	<b>PHONE:</b>	2013819771	<b>PHONE:</b> 2125941035
	<b>EMAIL:</b>	mikepark329@gmail.com	<b>EMAIL:</b> samuelahne@gmail.com
<b>MANAGER</b>	<b>NAME:</b>	N/A	<b>NAME:</b> 42nd and 10th Associates, LLC c/o The Related Companies,
	<b>PHONE:</b>		<b>PHONE:</b> LP 2128011000
	<b>EMAIL:</b>		<b>EMAIL:</b>
<b>ATTORNEY/ REPRESENTAIVE</b>			
<b>LANDLORD</b>			
<b>APPLICATION TYPE (Check One)</b>			
<input checked="" type="radio"/> <b>New</b>	Has applicant owned or managed a similar business?		YES <input checked="" type="radio"/>
	What is/was the name and address of establishment?		
	What were the dates applicant was involved with this former premise?		
<input type="radio"/> <b>Transfer</b>	What is the prior license # and expiration date?		
	Is applicant making any alterations or operational changes?		YES <input type="radio"/> NO <input type="radio"/>
	If alterations or operational changes are being made, please describe/list all changes.		
<input type="radio"/> <b>Alteration</b>	What is the current license # and expiration date?		
	Please list/describe the nature of all the changes and attach the plans:		
<b>METHOD OF OPERATION</b>			
<b>TYPE OF ALCOHOL</b>	<input type="radio"/> Liquor/Wine/Beer <input type="radio"/> Beer <input checked="" type="radio"/> Wine & Beer		
<b>ESTABLISHMENT TYPE</b>	<input checked="" type="radio"/> Restaurant <input type="radio"/> Cabaret <input type="radio"/> Night Club <input type="radio"/> Hotel <input type="radio"/> Bar/Tavern <input type="radio"/> Catering Establishment  <input type="radio"/> Adult Entertainment <input type="radio"/> Wine Bar <input type="radio"/> Dance Club <input type="radio"/> Sports Bar <input type="radio"/> Club (Fraternal Organization – Members Only)		
Has applicant/owner filed with the SLA? If yes, when? If no, when do you plan to file?		YES	<input checked="" type="radio"/>
Is the 500 Foot Rule applicable? If yes, please attach a diagram of the On-Premise liquor license establishments within a 500 ft. radius of your establishment and the Public Interest Statement.		YES	<input type="radio"/>
Is the 200 Foot Rule applicable? If yes, please attach a diagram of the schools and houses of worship that trigger the rule.		YES	<input checked="" type="radio"/>
Has applicant/owner(s) read MCB4 Policy Regarding Concentration and Location of Alcoholic-Serving Establishments?		YES	<input checked="" type="radio"/>

**OPERATIONAL DETAILS** (\*Closing time will be when establishment is vacated of all patrons)

HOURS* (Indoor Only)		MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY
	Operation	24 Hours	24 Hours	24 Hours	24 Hours	24 Hours	24 Hours	24 Hours
	Kitchen	24 Hours	24 Hours	24 Hours	24 Hours	24 Hours	24 Hours	24 Hours
	Music	N/A	N/A	N/A	N/A	N/A	N/A	N/A

If you plan to have music, what type(s)? (Circle all that apply)

BACKGROUND    
  LIVE MUSIC    
  DJ    
  JUKE BOX    
  KARAOKE

**OCCUPANCY**

	Capacity (Certificate of Occupancy)	Maximum # of Persons You Anticipate Occupying Premises (Including Employees)	Number of Tables	Number of Seats	Number of Service Only Bars	Number of Stand-Up Bars	Number of Seats at Stand-Up Bar
<b>INSIDE</b>	Commercial Use	120	20	100	0	0	0
<b>OUTSIDE</b> (Other than sidewalk café)	N/A	N/A	N/A	N/A	N/A	N/A	N/A
<b>SIDEWALK CAFE</b>	N/A	N/A	N/A	N/A	N/A		

How many floors are there? What is the capacity for each floor?     1st Floor and Basement

How frequently will the owner(s) be at the establishment?     60 Hours per week, Monday through Sunday

Will you be applying or intending to apply for a cabaret license with DCA? If yes, will there be dancing?	YES	<input checked="" type="radio"/>	
Will applicant have bottle or table service for beverage alcohol?	YES	<input checked="" type="radio"/>	
Will you be hosting private; promotional or corporate events?	YES	<input checked="" type="radio"/>	
Will outside promoters be used on a regular basis? If yes please describe.	YES	<input checked="" type="radio"/>	
Will you have a security plan? If, yes please attach.	YES	<input checked="" type="radio"/>	
Will security plan be implemented?	YES	<input checked="" type="radio"/>	
Will State certified security personnel be used?	YES	<input checked="" type="radio"/>	
Will New York Nightlife Association and NYPD Best Practices be followed?	YES	<input checked="" type="radio"/>	
Will applicant be using delivery bicycles? If yes, how many?	<input checked="" type="radio"/>	NO	perhaps in future
Will delivery bicycles be clearly marked with the name of the restaurant and will staff wear attire clearly noting name as described by NYC Law?	<input checked="" type="radio"/>	NO	

Where will delivery bicycles be stored during the day when not in use?     Within Store Premises

LOCATION & ZONING			
Is this a Special District? If yes, is it Clinton, West Chelsea or Hudson Yards?	YES	<input checked="" type="radio"/>	
Does the building have a Certificate of Occupancy ("C of O") or a letter of no objection?	<input checked="" type="radio"/>	NO	
Is a Public Assembly permit required?	<input checked="" type="radio"/>	NO	
Are your plans filed with DOB?	<input checked="" type="radio"/>	NO	

Community Notification/Relations			
<b>NOTIFICATION:</b> List all block associations; tenant associations, co-op boards or condo boards of residential buildings; and community groups that applicant has notified regarding its application. For each please list both the organization and individual you contacted	# 1	Eduardo Zeiger	
	# 2	Douglas Leland	
	# 3	Linda Ashley	
	# 4	Renee & Golden Stanley	
	# 5	Rudy Papiri	
Please provide dates when applicant met with the groups listed above.	Applicant sent emails		
Who was your contact person at each group you met with?	As downloaded email		
When did applicant post the notice that was provided?	December 22, 2015		
Where did applicant post the notice that was provided?	On or about store premise		
Will applicant provide owner cell phone number to neighbors and respond to complaints that arise? Please provide number in space provided.	<input checked="" type="radio"/>	NO	
Will applicant inform the Community Board office of its job openings and/or provide a hyperlink to applicants jobs webpage?	<input checked="" type="radio"/>	NO	

<b>BUILDING DESIGN</b>			
State the name and type of business previously located in the space.	Grocery - Deli		
Has a liquor-licensed establishment previously occupied this space at any time? If yes, please provide the name of the business.	YES	<input checked="" type="radio"/>	
Do you plan any changes to the existing façade? If yes, please describe.	YES	<input checked="" type="radio"/>	
Will applicant have a vestibule within the establishment?	YES	<input checked="" type="radio"/>	
Will applicant use a storm enclosure?	YES	<input checked="" type="radio"/>	
Will applicant not place any items or obstructions on the sidewalk, for example, sandwich boards, sidewalk signs, freestanding menus and plants, as per the law?	YES	<input checked="" type="radio"/>	
Will applicant comply with the NYC noise code?	YES	<input checked="" type="radio"/>	
Will the establishment have any of the following: (circle all that apply)	<b>FRENCH DOORS</b>	<b>GARAGE DOORS</b>	<b>WINDOWS THAT CAN BE OPENED</b>
Will applicant close all windows, French doors, garage doors when any music or amplified sound (including televisions) is played inside the establishment?	<input checked="" type="radio"/>	NO	
Will applicant close all windows, French doors, garage doors by 11 PM Friday and Saturday and 10 PM on all other days even if no music or amplified sound is played inside the establishment?	<input checked="" type="radio"/>	NO	<del>NO</del> <input checked="" type="radio"/>
Has applicant obtained an acoustical report from a certified sound engineer to assess potential noise disturbance to the neighboring residents and buildings?	YES	NO	N/A
Will applicant follow the recommendations of a certified sound engineer to mitigate potential noise disturbance to the neighboring residents and buildings, including placing speakers on the floor of the establishment?	YES	NO	N/A
Will the kitchen exhaust system extend to the roof?	YES	<input checked="" type="radio"/>	
Will the establishment have an illuminated sign?	YES	<input checked="" type="radio"/>	
Will the establishment have a canopy extending over the sidewalk?	YES	<input checked="" type="radio"/>	
Where will the air conditioner be located? What type is it?	Within the Building - HVAC		
When was the air conditioner installed?	May 25, 2015		

<b>OUTDOOR ITEMS - OTHER THEN SIDEWALK CAFÉ</b>			
Has the applicant/owner(s) read MCB 4 Rear Yard Rooftop Policy?	YES	NO	
Will applicant use any outdoor spaces: rooftop, rear yard, patio, porch, balcony, pavilion, tents, deck or gazebo? If yes, which one(s)?	YES	NO	
Are the floorplans for the outdoor space(s) included?	YES	NO	
Will applicant close and vacate the outdoor space(s) by 11PM on Friday & Saturday and 10 PM on all other days?	YES	NO	
Will the service and consumption of alcohol in any outdoor space only be via seated food service?	YES	NO	
Will applicant not allow standing space for patrons to drink or smoke in any outdoor space(s)?	YES	NO	
Will there be no amplified music, as per the law?	YES	NO	
If amplified sound is played inside the establishment, will windows and doors be closed?	YES	NO	
Will applicant agree to post signs outside asking customers to respect the neighbors'?	YES	NO	
Will applicant agree to train staff to encourage a peaceful environment?	YES	NO	
Will applicant provide effective sound control (landscaping enclosure, soundproofing tenants apartments)	YES	NO	
Will there be a lighting plan that allows safe usage of the outdoor space without disrupting neighbors?	YES	NO	

**OUTDOOR ITEMS – SIDEWALK CAFÉ**

Has the applicant/owner(s) read MCB4 Sidewalk Café Policy?	YES	NO	
Will applicant be applying for a sidewalk café now or in the future?	YES	NO	W/P
Is applicant in this application seeking to include a sidewalk café in its liquor license?	YES	NO	
If yes, has applicant submitted an application and plans to NYC Dept. of Consumer Affairs? Please attach application and plans.	YES	NO	
Will applicant close and vacate the sidewalk café by 11 PM on Friday & Saturday and 10 PM on all other days?	YES	NO	
Will applicant be serving alcohol in the sidewalk café? If so, will you have waiter service?	YES	NO	
Will the café have a 3 ft. wide serving aisle running the entire length of the sidewalk cafe?	YES	NO	
Will applicant mark the perimeter of the café on the sidewalk?	YES	NO	
Will the service and consumption of alcohol in the sidewalk café only be via seated food service?	YES	NO	
Will the sidewalk café not provide standing space for drinking or smoking?	YES	NO	
Will applicant use any portable natural gas heaters? If so, do you have the requisite approvals from DOB & the Fire Department?	YES	NO	
Will applicant have a lighting plan that will allow safe usage of the outdoor space without disrupting neighbors?	YES	NO	
Will all furniture, plants and barricades be stored inside between the evening closing hours and the morning opening hours?	YES	NO	
Will all furniture be stored inside between December 21 <sup>st</sup> and March 21 <sup>st</sup> , and any other day when it rains or snows?	YES	NO	
Will applicant use umbrellas?	YES	NO	
If construction or construction protection has reduced the sidewalk width, will applicant always maintain an 8 foot clear path of sidewalk between the perimeter of the café and the closes obstruction including construction barricades?	YES	NO	

**ADDITIONAL STIPULATIONS: (Office Use Only)**

All On-Premises consumption of Beer & Wine will cease Sunday to Wednesday by 10:00 p.m. and Thursday, Friday, & Saturday by midnight

***To the extent any additional stipulation on pages 7 and 8 of this application conflicts with any response on pages 1 – 6 of this application, the stipulations on pages 7 and 8 control.***

ADDITIONAL STIPULATIONS: (Office Use Only)

ALL ON-PREMISE CONSUMPTION  
OF BEER & WINE WILL CEASE  
SUN TO WED BY 1050 PM  
AND THUR, FRI, & SAT BY MIDNIGHT



To the extent any additional stipulation on pages 7 and 8 of this application conflicts with any response on pages 1 - 6 of this application, the stipulations on pages 7 and 8 control.





**UNSPACE**  
 100 WEST 42ND STREET, 11TH FLOOR  
 NEW YORK, NY 10018  
 TEL: 212.250.1500  
 WWW.UNSPACEARCHITECTS.COM

PROJECT: TREEHAUS  
 LOCATION: 480 WEST 42ND STREET  
 CLIENT: TREEHAUS  
 DATE: 05.15.2015

DESIGNER: UNSPACE  
 ARCHITECT: UNSPACE  
 INTERIOR DESIGNER: UNSPACE

PROJECT NO: A-2009.00  
 SHEET NO: 1 OF 4

DATE: 05.15.2015  
 SCALE: AS SHOWN

PROJECT: TREEHAUS  
 LOCATION: 480 WEST 42ND STREET  
 CLIENT: TREEHAUS  
 DATE: 05.15.2015

DESIGNER: UNSPACE  
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PROJECT NO: A-2009.00  
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PROJECT NO: A-2009.00  
 SHEET NO: 1 OF 4

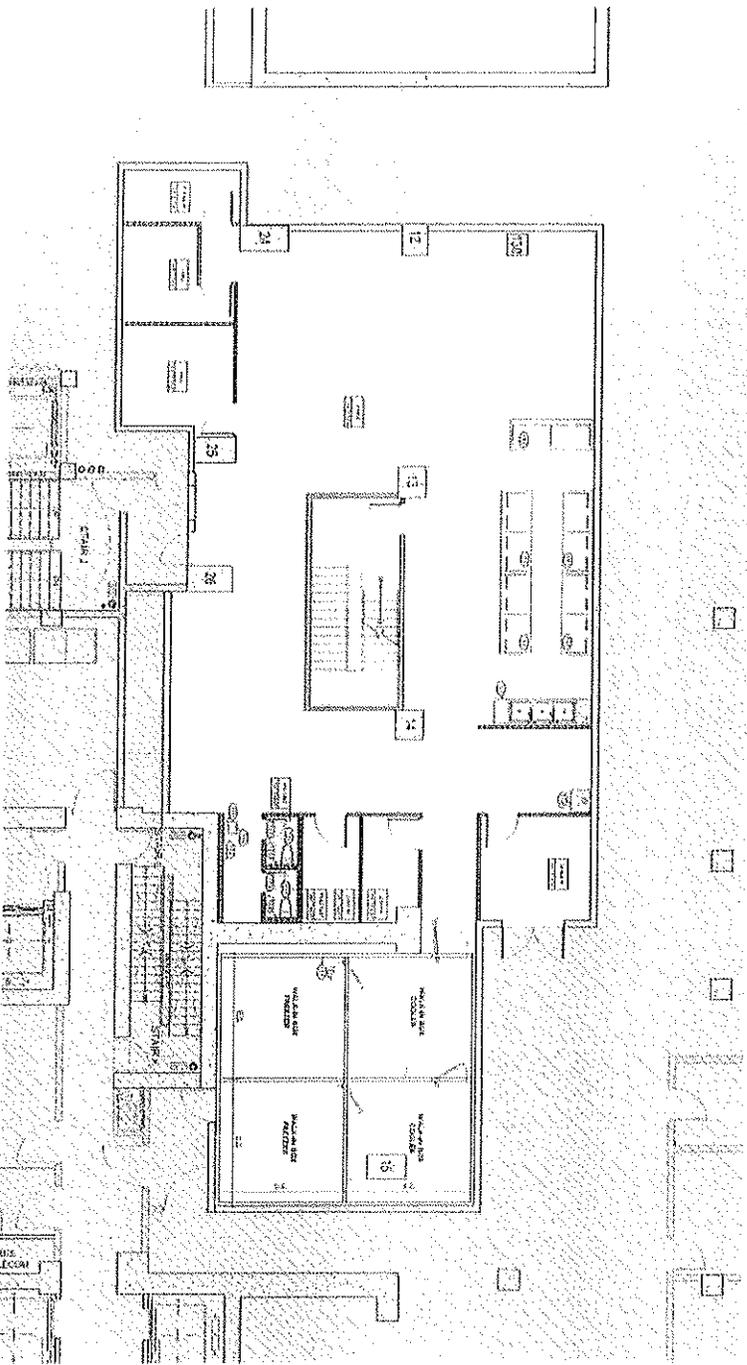
DATE: 05.15.2015  
 SCALE: AS SHOWN

PROJECT: TREEHAUS  
 LOCATION: 480 WEST 42ND STREET  
 CLIENT: TREEHAUS  
 DATE: 05.15.2015

DESIGNER: UNSPACE  
 ARCHITECT: UNSPACE  
 INTERIOR DESIGNER: UNSPACE

PROJECT NO: A-2009.00  
 SHEET NO: 1 OF 4

DATE: 05.15.2015  
 SCALE: AS SHOWN



11TH FLOOR PLAN  
 11/15/15

GENERAL NOTES:  
 1. SEE SHEET A-2009.00 FOR FLOOR CONSTRUCTION

PROJECT:	TREEHAUS
LOCATION:	480 WEST 42ND STREET NEW YORK, NY 10018
CLIENT:	TREEHAUS
DATE:	05.15.2015
DESIGNER:	UNSPACE
ARCHITECT:	UNSPACE
INTERIOR DESIGNER:	UNSPACE
PROJECT NO:	A-2009.00
SHEET NO:	1 OF 4
DATE:	05.15.2015
SCALE:	AS SHOWN





# TREEHAUS

BREAKFAST | LUNCH | DINNER

## FRENCH-STYLE OMELET

4.50

ADD A PLATTER

+2.00

*three cheese:*  
gruyère, sharp cheddar,  
swiss, fine herbs

*healthy:*  
turkey bacon, tomatoes,  
baby arugula, sharp  
white cheddar

*western:*  
ham, tomatoes,  
pepper, onions  
cheddar

*veggie:*  
caramelized onions,  
sautéed mushrooms  
avocado, chives,  
pecorino

*mediterranean:*  
tomatoes, baby spinach  
kalamata olives,  
red onions, feta

## PANCAKES OR CHALLAH FRENCH TOAST DIPPED IN CREME ANGLAISE

W/ MAPLE SYRUP	4.75
BANANAS	+0.75
BANANAS FOSTER	+1.00
STRAWBERRY OR BLUEBERRY	+1.50
MIXED BERRIES COMPOTE	+1.50
WALNUTS	+1.25
ADD EGG	+1.75
ADD MEAT	+2.50

## CRÊPES

SAVORY	8.95	SWEET	7.95
1) ham, swiss cheese, sautéed mushrooms		1) nutella, banana	
2) turkey, cheddar cheese, granny smith apple, baby arugula		2) condensed milk, strawberries	
3) sautéed spinach, ricotta cheese, sautéed mushrooms, tomato jam		3) butter, cinnamon sugar	
4) honey, goat cheese, walnut, baby spinach		4) dulce de leche, banana	
5) weekly special (inquire within)		5) weekly special (inquire within)	

## BAGELS W/

BUTTER	1.25
BUTTER & JELLY	1.50
PEANUT BUTTER & JELLY	2.75
PLAIN CREAM CHEESE	2.25
VEGETABLE SCALLION	2.50
STRAWBERRY BLUEBERRY MAPLE WALNUT	2.75
LOX SPREAD	3.75
SMOKED SALMON	7.95
ADD TOMATO & RED ONION	+0.50
STEEL CUT OATMEAL	3.75
unlimited toppings: honey granola, walnuts, dried fruits, banana, cinnamon, brown sugar	4.75

## EGGS YOUR WAY

LOCAL FARM FRESH EGGS	2.00
OMELET	3.00
EGG WHITE FRENCH OMELET	4.50
EGG WHITES	+2.00
ADD EXTRA EGG	+1.00
ADD MEAT bacon, ham, sausage, turkey sausage, turkey bacon, chorizo	+2.50
ADD CHEESE american, sharp cheddar, swiss, fresh mozzarella, pepper jack, mexican 4 cheese, ricotta, provolone, feta	+1.00
GROUYÈRE CHEESE	+1.50
ADD VEGETABLES black olives, broccoli, mushrooms, onions, piza de gallo, pickled jalapenos, spinach, basil, tomatoes, zucchini, bell pepper, and red pepper, confit	+0.50
ADD HERBS basil, chives, cilantro, parsley	+0.25
ADD PLATTER home fries, peppered hamsters, choice of toast (white, whole wheat, multi-grain or marbled rye)	+2.00

## HAUS BREAKFAST SANDWICHES

BLACK FOREST HAM scrambled eggs, gruyère, croissant	5.75
BACON scrambled eggs, american cheese, ketchup, texas toast	5.25
MUSHROOM scrambled eggs, swiss, baby spinach, caramelized onions, croissant	5.25
PORK SAUSAGE fried eggs, sharp cheddar, croissant	5.25
CHORIZO scrambled eggs, pepper jack, piza de gallo, sour cream, wrap	5.25
TURKEY SAUSAGE egg whites, fontina, avocado, sliced whole wheat	6.45
SMOKED SALMON cucumber, capers, scallion cream cheese, bagel	8.95

## BREAKFAST PASTRIES

(please inquire for our available pastries)

CRIOSSANT	2.75
BLUESKY MUFFIN	4.00
DOUGHNUTS BY DOUGH glazed, passion fruit, bitters, chocolate w/ coconut, dulce de leche, cheesecake w/ granola crumbles	2.75

## LA COLOMBE COFFEE

	<u>1</u>	<u>15</u>	<u>1</u>
SINGLE ORIGIN	2.00	2.50	3.00
COLD BREW	4.50	--	5.00



# TREEHAUS

## COLD PRESS JUICES

HEART BEET <i>beet, red apple, ginger, lemon</i>	9.00
LEMON DROP <i>lemon, cayenne, ginger, honey</i>	9.00
SNOW WHITE <i>almond, nutmeg, vanilla, agave</i>	9.00
GENTLE GREEN <i>kiwi, green apple, spinach, pineapple, lime</i>	9.00
MIGHTY GREEN <i>kale, spinach, green apple, cucumber, ginger, lemon</i>	9.00

## FRESH JUICE BAR

	<u>12oz</u>	<u>16oz</u>
FIRST RISE <i>strawberry, kiwi, orange</i>	5.75	7.00
C BETTER <i>grapefruit, orange, carrot, ginger, yuzu</i>	5.75	7.00
MORNING SUNSHINE <i>apple, carrot, pineapple, orange</i>	5.75	7.00
PEAR-SUBSIDIUM <i>pear, fuji apple, mango, mint, lime, coconut water</i>	5.75	7.00
GREEN MEDLEY <i>honeydew, baby spinach, celery, parsley, pineapple</i>	5.75	7.00
ELDERFLOWER PRAIRIE <i>green apples, kale, lime, elderflower, coconut water</i>	5.75	7.00
KALE MARY <i>kale, plum tomatoes, celery, ginger, horseradish, agave</i>	5.75	7.00

## FRESH FRUIT SMOOTHIES

	<u>12oz</u>	<u>16oz</u>
BERRY LOVELY <i>strawberry, raspberry, blueberry, cranberry juice, greek yogurt, agave</i>	5.75	7.00
LYCHEE GODDESS <i>strawberry, lychee, mango, banana</i>	5.75	7.00
TROPIC BLAST <i>pineapple, mango, kiwi, orange, greek yogurt, agave</i>	5.75	7.00
O POPSICLE <i>orange, grapefruit, soy milk, vanilla, cinnamon-spiced honey</i>	5.75	7.00
PASSION TWIRE <i>lychee, pineapple, passion fruit, apple juice, banana</i>	5.75	7.00
SPEED GREEN <i>spinach, kale, celery, almond milk, almond butter, banana</i>	7.00	7.00
PEANUT BETTER <i>peanut butter, banana, spinach, almond milk, cocoa powder</i>	5.75	7.00
FIGHTING IN PEARS <i>pear, kale, blueberry, avocado, coconut water</i>	5.75	7.00
FRUIT SALAD CUPS	12oz 3.75	16oz 4.25
BERRY GODDESS		4.75
MIXED GRAPES		4.00
WATERMELON BLUEBERRY		4.00
MELON SALAD		4.00
TROPICAL SALAD <i>pineapple, lychee, kiwi, mango, strawberry</i>		4.50

	<u>SHOT</u>
WHEAT GRASS SHOT	5.00
ADD ONS <i>Spirulina Powder \$2.00 - Vitamin C \$2.00 - Isopure<sup>®</sup> Protein \$2.50 - Wheatgrass extract \$2.00</i>	

	<u>\$</u>	<u>£</u>
100% ORANGE JUICE	5.00	7.00
100% CARROT JUICE	5.00	7.00



1 **Business License & Permits Committee**

**Item #: 11**

2  
3 February 3, 2016

4  
5 Vincent G. Bradley  
6 Chairman  
7 New York State Liquor Authority  
8 80 S. Swan Street, 9<sup>th</sup> Floor  
9 Albany, New York 12210

10  
11 **Re: 302 Cafes LLC**  
12 **d/b/a Café Tarantin**  
13 *302 W 38<sup>th</sup> Street (8/9)*

14  
15 Dear Chairman Bradley:

16  
17 Manhattan Community Board 4 (MCB4) recommends **denial** of a new Wine & Beer License application  
18 for 302 Cafes LLC. d/b/a Café Tarantin – 302 W 38<sup>th</sup> Street (8/9), **unless** the attached stipulations,  
19 agreed to and signed by the applicant, are part of the method of operation for this establishment with a  
20 capacity of 28, 9 tables/1 counter, 24 seats and 1 service bar.

21  
22 Sincerely,

23  
24  
25 Delores Rubin  
Chair

Burt Lazarin  
Co-Chair  
Business License & Permits  
Committee

Frank Holozubiec  
Co-Chair  
Business License & Permits  
Committee

26  
27

**Manhattan Community Board 4**  
(All Fields Must Be Completed)

Liquor License Stipulations Application

<b>CORPORATION NAME</b>		<b>DOING BUSINESS AS (DBA)</b>	
302 Cafes LLC		Cafe Tarantin	
<b>STREET ADDRESS</b>		<b>CROSS STREETS</b>	<b>ZIP CODE</b>
302 West 38th Street		8th Avenue & West 38th Street	10018
<b>OWNER</b> <i>(Attach a list of all the people that will be associated/listed with the license)</i>	<b>NAME:</b>	Ronen Krotenberg	<b>NAME:</b> Gen Harris from Rezzonator Services
	<b>PHONE:</b>	212.239.1921	<b>PHONE:</b> 212.340.8006 or 347.642.5077
	<b>EMAIL:</b>	ronanrotem@gmail.com	<b>EMAIL:</b>
<b>MANAGER</b>	<b>NAME:</b>	Ronen Krotenberg	<b>NAME:</b> ELI USA LLC (Landlord Eli Nir)
	<b>PHONE:</b>	212.239.1921	<b>PHONE:</b> 917.842.9100
	<b>EMAIL:</b>	ronanrotem@gmail.com	<b>EMAIL:</b> None
<b>ATTORNEY/ REPRESENTAIVE</b>			
<b>LANDLORD</b>			
<b>APPLICATION TYPE (Check One)</b>			
<input checked="" type="checkbox"/> <b>New</b>	Has applicant owned or managed a similar business?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
	What is/was the name and address of establishment?	Cafe Mogador	
	What were the dates applicant was involved with this former premise?	2008 to 2010	
<input type="checkbox"/> <b>Transfer</b>	What is the prior license # and expiration date?		
	is applicant making any alterations or operational changes?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
	If alterations or operational changes are being made, please describe/list all changes.		
<input type="checkbox"/> <b>Alteration</b>	What is the current license # and expiration date?		
	Please list/describe the nature of all the changes and attach the plans:		
<b>METHOD OF OPERATION</b>			
<b>TYPE OF ALCOHOL</b>	<input type="checkbox"/> Liquor/Wine/Beer <input type="checkbox"/> Beer <input checked="" type="checkbox"/> Wine & Beer		
<b>ESTABLISHMENT TYPE</b>	<input checked="" type="checkbox"/> Restaurant <input type="checkbox"/> Cabaret <input type="checkbox"/> Night Club <input type="checkbox"/> Hotel <input type="checkbox"/> Bar/Tavern <input type="checkbox"/> Catering Establishment <input type="checkbox"/> Adult Entertainment <input type="checkbox"/> Wine Bar <input type="checkbox"/> Dance Club <input type="checkbox"/> Sports Bar <input type="checkbox"/> Club (Fraternal Organization – Members Only)		
Has applicant/owner filed with the SLA? If yes, when? If no, when do you plan to file?	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	
Is the 500 Foot Rule applicable? If yes, please attach a diagram of the On-Premise liquor license establishments within a 500 ft. radius of your establishment and the Public Interest Statement.	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	Beer and Wine Applicant Only.
Is the 200 Foot Rule applicable? If yes, please attach a diagram of the schools and houses of worship that trigger the rule.	<del>YES</del>	<input checked="" type="checkbox"/> NO	<del>Word Center at 300 West 38th Street</del> <i>PK</i>
Has applicant/owner(s) read MCB4 Policy Regarding Concentration and Location of Alcoholic-Serving Establishments?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	

OPERATIONAL DETAILS (*Closing time will be when establishment is vacated of all patrons)									
HOURS* (Indoor Only)		MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY	
	Operation	8am - 10pm	8am - 10pm	8am - 10pm	8am - 10pm	8am - 10pm	CLOSED	8am - 10pm	
	Kitchen	8am - 10pm	8am - 10pm	8am - 10pm	8am - 10pm	8am - 10pm	CLOSED	8am - 10pm	
	Music	8am - 10pm	8am - 10pm	8am - 10pm	8am - 10pm	8am - 10pm	CLOSED	8am - 10pm	
If you plan to have music, what type(s)? (Circle all that apply)			<input checked="" type="checkbox"/> BACKGROUND	LIVE MUSIC	DJ	JUKE BOX	KARAOKE		
OCCUPANCY									
	Capacity (Certificate of Occupancy)	Maximum # of Persons You Anticipate Occupying Premises (Including Employees)	Number of Tables	Number of Seats	Number of Service Only Bars	Number of Stand-Up Bars	Number of Seats at Stand-Up Bar		
INSIDE	48 based on C of O	28 total patrons 24	9 Tables 1 Counter	24 total	One	Zero	Zero		
OUTSIDE (Other than sidewalk café)	N/A Not Licensed								
SIDEWALK CAFÉ	N/A Not Licensed								
How many floors are there? What is the capacity for each floor?					First Floor Only Capacity 48. Expected 24 Patrons and 4 Employees				
How frequently will the owner(s) be at the establishment?					6 days per week, 40+ Hours per week.				
Will you be applying or intending to apply for a cabaret license with DCA? If yes, will there be dancing?					YES	<input checked="" type="checkbox"/> NO			
Will applicant have bottle or table service for beverage alcohol?					YES	<input checked="" type="checkbox"/> NO			
Will you be hosting private; promotional or corporate events?					<input checked="" type="checkbox"/> YES	NO	occasional private parties if requested. limited times per year, geared towards business meetings		
Will outside promoters be used on a regular basis? If yes please describe.					YES	<input checked="" type="checkbox"/> NO			
Will you have a security plan? If, yes please attach. <b>Described herein</b>					<input checked="" type="checkbox"/> YES	NO	Security cameras in place. Staff training on the sale of beverages, ID check for all patrons		
Will security plan be implemented?					<input checked="" type="checkbox"/> YES	NO	Implemented by owner and employees		
Will State certified security personnel be used?					YES	<input checked="" type="checkbox"/> NO	Not necessary. Small cafe		
Will New York Nightlife Association and NYPD Best Practices be followed?					<input checked="" type="checkbox"/> YES	NO			
Will applicant be using delivery bicycles? If yes, how many?					YES	<input checked="" type="checkbox"/> NO	N/A		
Will delivery bicycles be clearly marked with the name of the restaurant and will staff wear attire clearly noting name as described by NYC Law?					YES	NO	N/A		
Where will delivery bicycles be stored during the day when not in use?					N/A				

**LOCATION & ZONING**

Is this a Special District? If yes, is it Clinton, West Chelsea or Hudson Yards?	YES	<input checked="" type="checkbox"/> NO	N/A
Does the building have a Certificate of Occupancy ("C of O") or a letter of no objection?	<input checked="" type="checkbox"/> YES	NO	
Is a Public Assembly permit required?	YES	<input checked="" type="checkbox"/> NO	N/A UNDER 75 PERSONS
Are your plans filed with DOB?	<input checked="" type="checkbox"/> YES	NO	Filed 2012

**Community Notification/Relations**

<b>NOTIFICATION:</b> List all block associations; tenant associations, co-op boards or condo boards of residential buildings; and community groups that applicant has notified regarding its application. For each please list both the organization and individual you contacted	# 1	West 36th Street Block Association: Frank Strock at mcgee79@aol.com
	# 2	HKNA Association: Kathleen Treat at kathleentreat123@gmail.com
	# 3	
	# 4	
	# 5	
Please provide dates when applicant met with the groups listed above.		Pending. Will meet prior to January Meeting
Who was your contact person at each group you met with?		To be contacted by Email as per Instructions
When did applicant post the notice that was provided?		To be posted by January 1st 2015
Where did applicant post the notice that was provided?		Front of Business Premises
Will applicant provide owner cell phone number to neighbors and respond to complaints that arise? Please provide number in space provided.		YES <input checked="" type="checkbox"/> NO Owner Cell is a private line. Complaints may be directed to business # at 212.239.1921
Will applicant inform the Community Board office of its job openings and/or provide a hyperlink to applicants jobs webpage?		YES <input checked="" type="checkbox"/> NO As applicable

<b>BUILDING DESIGN</b>			
State the name and type of business previously located in the space.	Cafe - Exact name not recalled		
Has a liquor-licensed establishment previously occupied this space at any time? If yes, please provide the name of the business.	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>	Beer and Wine License by AMSES RESTAURANT CORP Currently inactive
Do you plan any changes to the existing façade? If yes, please describe.	YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>	N/A
Will applicant have a vestibule within the establishment?	YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>	N/A
Will applicant use a storm enclosure?	YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>	N/A
Will applicant not place any items or obstructions on the sidewalk, for example, sandwich boards, sidewalk signs, freestanding menus and plants, as per the law?	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>	
Will applicant comply with the NYC noise code?	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>	Background Music Only. Minimal noise created
Will the establishment have any of the following: (circle all that apply) <b>NONE</b>	FRENCH DOORS		GARAGE DOORS
			WINDOWS THAT CAN BE OPENED
Will applicant close all windows, French doors, garage doors when any music or amplified sound (including televisions) is played inside the establishment?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	N/A
Will applicant close all windows, French doors, garage doors by 11 PM Friday and Saturday and 10 PM on all other days even if no music or amplified sound is played inside the establishment?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	N/A
Has applicant obtained an acoustical report from a certified sound engineer to assess potential noise disturbance to the neighboring residents and buildings?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	N/A - Background Music Only
Will applicant follow the recommendations of a certified sound engineer to mitigate potential noise disturbance to the neighboring residents and buildings, including placing speakers on the floor of the establishment?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	N/A - Background Music Only
Will the kitchen exhaust system extend to the roof?	YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>	
Will the establishment have an illuminated sign?	YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>	
Will the establishment have a canopy extending over the sidewalk?	YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>	
Where will the air conditioner be located? What type is it?	A/C unit located inside of the premises - Central Unit		
When was the air conditioner installed?	Exact date not recalled. to be discussed at meeting		

<b>OUTDOOR ITEMS - OTHER THEN SIDEWALK CAFÉ</b>			
Has the applicant/owner(s) read MCB 4 Rear Yard Rooftop Policy?	YES	NO	<b>ALL BELOW NOT APPLICABLE. No Outdoor Area</b>
Will applicant use any outdoor spaces: rooftop, rear yard, patio, porch, balcony, pavilion, tents, deck or gazebo? If yes, which one(s)?	YES	NO	
Are the floorplans for the outdoor space(s) included?	YES	NO	
Will applicant close and vacate the outdoor space(s) by 11PM on Friday & Saturday and 10 PM on all other days?	YES	NO	
Will the service and consumption of alcohol in any outdoor space only be via seated food service?	YES	NO	
Will applicant not allow standing space for patrons to drink or smoke in any outdoor space(s)?	YES	NO	
Will there be no amplified music, as per the law?	YES	NO	
If amplified sound is played inside the establishment, will windows and doors be closed?	YES	NO	
Will applicant agree to post signs outside asking customers to respect the neighbors'?	YES	NO	
Will applicant agree to train staff to encourage a peaceful environment?	YES	NO	
Will applicant provide effective sound control (landscaping enclosure, soundproofing tenants apartments)	YES	NO	
Will there be a lighting plan that allows safe usage of the outdoor space without disrupting neighbors?	YES	NO	

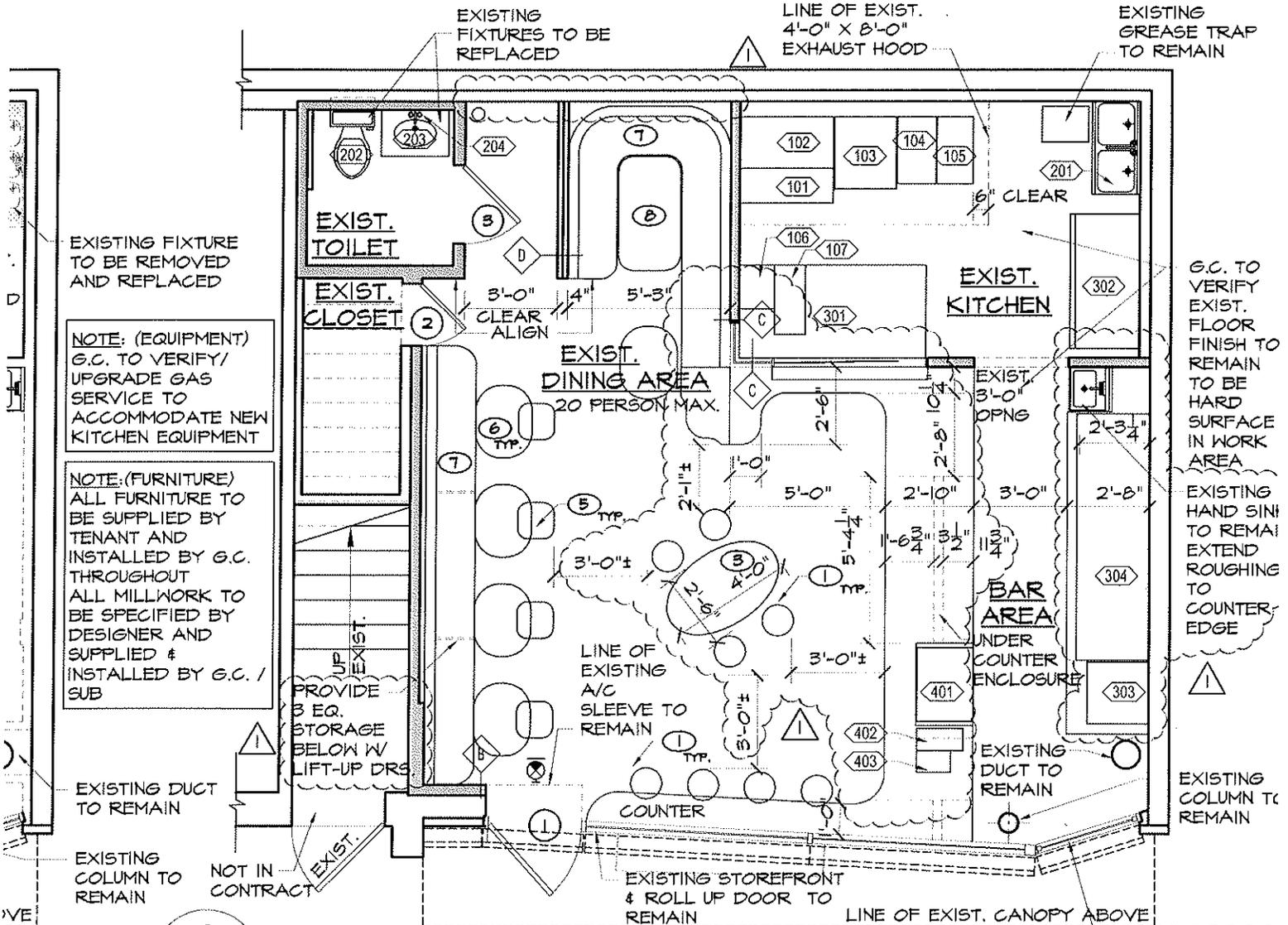
## OUTDOOR ITEMS – SIDEWALK CAFÉ

Has the applicant/owner(s) read MCB4 Sidewalk Café Policy?	YES	NO	<b>ALL BELOW NOT APPLICABLE. No Outdoor Area</b>
Will applicant be applying for a sidewalk café now or in the future?	YES	NO	
Is applicant in this application seeking to include a sidewalk café in its liquor license?	YES	NO	
If yes, has applicant submitted an application and plans to NYC Dept. of Consumer Affairs? Please attach application and plans.	YES	NO	
Will applicant close and vacate the sidewalk café by 11 PM on Friday & Saturday and 10 PM on all other days?	YES	NO	
Will applicant be serving alcohol in the sidewalk café? If so, will you have waiter service?	YES	NO	
Will the café have a 3 ft. wide serving aisle running the entire length of the sidewalk cafe?	YES	NO	
Will applicant mark the perimeter of the café on the sidewalk?	YES	NO	
Will the service and consumption of alcohol in the sidewalk café only be via seated food service?	YES	NO	
Will the sidewalk café not provide standing space for drinking or smoking?	YES	NO	
Will applicant use any portable natural gas heaters? If so, do you have the requisite approvals from DOB & the Fire Department?	YES	NO	
Will applicant have a lighting plan that will allow safe usage of the outdoor space without disrupting neighbors?	YES	NO	
Will all furniture, plants and barricades be stored inside between the evening closing hours and the morning opening hours?	YES	NO	
Will all furniture be stored inside between December 21 <sup>st</sup> and March 21 <sup>st</sup> , and any other day when it rains or snows?	YES	NO	
Will applicant use umbrellas?	YES	NO	
If construction or construction protection has reduced the sidewalk width, will applicant always maintain an 8 foot clear path of sidewalk between the perimeter of the café and the closes obstruction including construction barricades?	YES	NO	

**ADDITIONAL STIPULATIONS: (Office Use Only)**

- Any sandwich board will be placed only parallel to and leaning against the building facade

***To the extent any additional stipulation on pages 7 and 8 of this application conflicts with any response on pages 1 – 6 of this application, the stipulations on pages 7 and 8 control.***



**3** FIRST FLOOR PART. PLAN (PROPOSED)  
 A-1 SCALE: 1/4" = 1'-0"

## Café Tarantin Menu

---

### Breakfast:

(All eggs are organic)

1. Breakfast special: 2 eggs any style, home fries, salad, choice of coffee or o.j 7.5
2. Mediterranean: 2 eggs any style, labneh cheese, tabouli salad. 8
3. The LES: bagel with cream cheese, Nova Scotia smoked salmon, pickled red onion, tomato & capers 8.5
4. Homemade granola: organic Greek yogurt, fresh mixed fruit, orange blossom honey 7.5
5. Feta cheese omelette: 3 eggs, tomatoes, spinach, salad & home fries 9
6. Midtown Rush: bagel, cream cheese, lettuce, tomato, onion 3.75 w/eggs 5.25
7. Tarantin breakfast: baguette, demi-sel butter, fig/strawberry confiture, 1 choice of pastry, coffee, small o.j 8
8. French toast: Vermont maple, mixed berries, cinnamon dust, candid almonds 7.5

Pastries: croissant, pain chocolate, almond croissant 3

### Coffees:

Espresso 2.5 /4 Café au lait 4.5 Americano 2.5 Hot chocolate 4

Cappuccino 3.5 Machiato 3/4.5 Mochaccino 4.5 Housed Roast 2 Iced add 25c

Teas: 3.25

Homemade Moroccan mint tea, English breakfast, earl grey, chamomile citrus, lemon zinger, ginger twit

Hot cider with fresh muddled ginger 3.75

### Cold Beverages:

Homemade mint lemonade 3.5, Homemade mint ice tea 3.5, Fresh squeezed o.j small/large 3/4

Coke, Diet coke, Sprite, Orangina 2.50

S. Pellegrino 2.75

Sandwiches: (salad or French fries)

## *Café Tarantin Menu*

---

*(toasted/pressed optional)*

1. *Tuna sandwich: lemon-pepper confit, black olives, broiled egg, baby spinach. 8*
2. *Grilled chicken & Avocado sandwich: chipotle aioli, hass avocado, roasted peppers. 9*
3. *Steak sandwich: harissa chimichurri, sautéed onion, arugula. 11*
4. *Roasted vegetables sandwich: grilled zucchini, eggplant, portobello mushrooms, onions 8*
5. *Schnitzel sandwich: sweet & spicy tomatoes, pickled onion, capers 9*
6. *Buffalo Mozzarella sandwich: roasted tomato, olive oil, thyme & garlic 8.5*
8. *Roast beef sandwich: Dijon mustard, braised cabbage 8.5*
9. *Tarantin burger: sautéed onion, roasted tomato, arugula, pickles. 12*

### Salads:

1. *César salad: romaine heart, white anchovies, shaved parmesan, crouton, César dressing 8*
  2. *Avocado salad: grape tomato, fennel, baby arugula, citrus dressing 9*
  3. *Green salad: butter lettuce, fine herbs, grape tomato, lemon-mustard vinaigrette 7*
  4. *Greek salad: romaine heart, tomato, cucumber, red onion, fresh mint, black olives, feta cheese 9*
  5. *Halumi cheese salad: Chopped roasted vegetables, portobello mushrooms, zahatar vinaigrette*
- Add grilled chicken 3, tuna 5*

### Pasta: 9

*Penne or Spaghetti*

1. *Salsa alla capri : sweet and spicy tomato, Italian sauce*
  2. *Tartoffo : mozeralla , mushrooms ,black truffle ,shaved parmesan*
- add meatballs \$4 add grilled chicken \$3*

Soup of the day : 6 *(served with bread )*

### From our Grill :

*(served with rice/fries and salad)*

*Chicken 11    Salmon 13    Kefla Kebab 12    Tuna 13    Schnitzel 12 (fried)*

*Daily homemade special: inquire daily*

*Wine :*

## *Café Tarantin Menu*

---

*Red : Malbec , Bordeaux , Pinot Noir : 9*

*White : Pinot Grigio , Sauvignon Blanc ,Rose : 8*

*Sparkling : Prosecco , Mimosa :8*

*Beer :*

*Stella Artois , Hogarden , estrella : 6*

## Café Tarantin Menu

---

### Breakfast:

(All eggs are organic)

1. Breakfast special: 2 eggs any style, home fries, salad, choice of coffee or o.j 7.5
2. Mediterranean: 2 eggs any style, labneh cheese, tabouli salad. 8
3. The LES: bagel with cream cheese, Nova Scotia smoked salmon, pickled red onion, tomato & capers 8.5
4. Homemade granola: organic Greek yogurt, fresh mixed fruit, orange blossom honey 7.5
5. Feta cheese omelette: 3 eggs, tomatoes, spinach, salad & home fries 9
6. Midtown Rush: bagel, cream cheese, lettuce, tomato, onion 3.75 w/eggs 5.25
7. Tarantin breakfast: baguette, demi-sel butter, fig/strawberry confiture, 1 choice of pastry, coffee, small o.j 8
8. French toast: Vermont maple, mixed berries, cinnamon dust, candid almonds 7.5

Pastries : croissant , pain chocolate , almond croissant 3

### Coffees:

Espresso 2.5 /4 Café au lait 4.5 Americano 2.5 Hot chocolate 4

Cappuccino 3.5 Machiato 3/4.5 Mochaccino 4.5 Housed Roast 2 Iced add 25c

Teas : 3.25

Homemade Moroccan mint tea, English breakfast, earl grey, chamomile citrus , lemon zinger, ginger twit

Hot cider with fresh muddled ginger 3.75

### Cold Beverages:

Homemade mint lemonade 3.5 , Homemade mint ice tea 3.5 ,Fresh squeezed o.j small/large 3/4

Coke, Diet coke, Sprite ,Orangina 2.50

S. Pellegrino 2.75

Sandwiches: (salad or French fries)

## *Café Tarantin Menu*

---

*(toasted/pressed optional)*

1. Tuna sandwich: lemon-pepper confit, black olives, broiled egg, baby spinach. 8
2. Grilled chicken & Avocado sandwich: chipotle aioli, hass avocado, roasted peppers. 9
3. Steak sandwich: harissa chimichurri, sautéed onion, arugula. 11
4. Roasted vegetables sandwich: grilled zucchini, eggplant, portobello mushrooms, onions 8
5. Schmitzel sandwich: sweet & spicy tomatoes, pickled onion, capers 9
6. Buffalo Mozzarella sandwich: roasted tomato, olive oil, thyme & garlic 8.5
8. Roast beef sandwich: Dijon mustard, braised cabbage 8.5
9. Tarantin burger: sautéed onion, roasted tomato, arugula, pickles. 12

### Salads:

1. César salad: romaine heart, white anchovies, shaved parmesan, crouton, César dressing 8
  2. Avocado salad: grape tomato, fennel, baby arugula, citrus dressing 9
  3. Green salad: butter lettuce, fine herbs, grape tomato, lemon-mustard vinaigrette 7
  4. Greek salad: romaine heart, tomato, cucumber, red onion, fresh mint, black olives, feta cheese 9
  5. Halumi cheese salad: Chopped roasted vegetables, portobello mushrooms, zahatar vinaigrette
- Add grilled chicken 3, tuna 5

### Pasta: 9

*Penne or Spaghetti*

1. Salsa alla capri : sweet and spicy tomato, Italian sauce
  2. Tartoffo : mozeralla , mushrooms ,black truffle ,shaved parmesan
- add meatballs \$4 add grilled chicken \$3

Soup of the day : 6 (served with bread )

### From our Grill :

*(served with rice/fries and salad)*

Chicken 11    Salmon 13    Kefta Kebab 12    Tuna 13    Schmitzel 12 (fried)

Daily homemade special: inquire daily

Wine :

## *Café Tarantin Menu*

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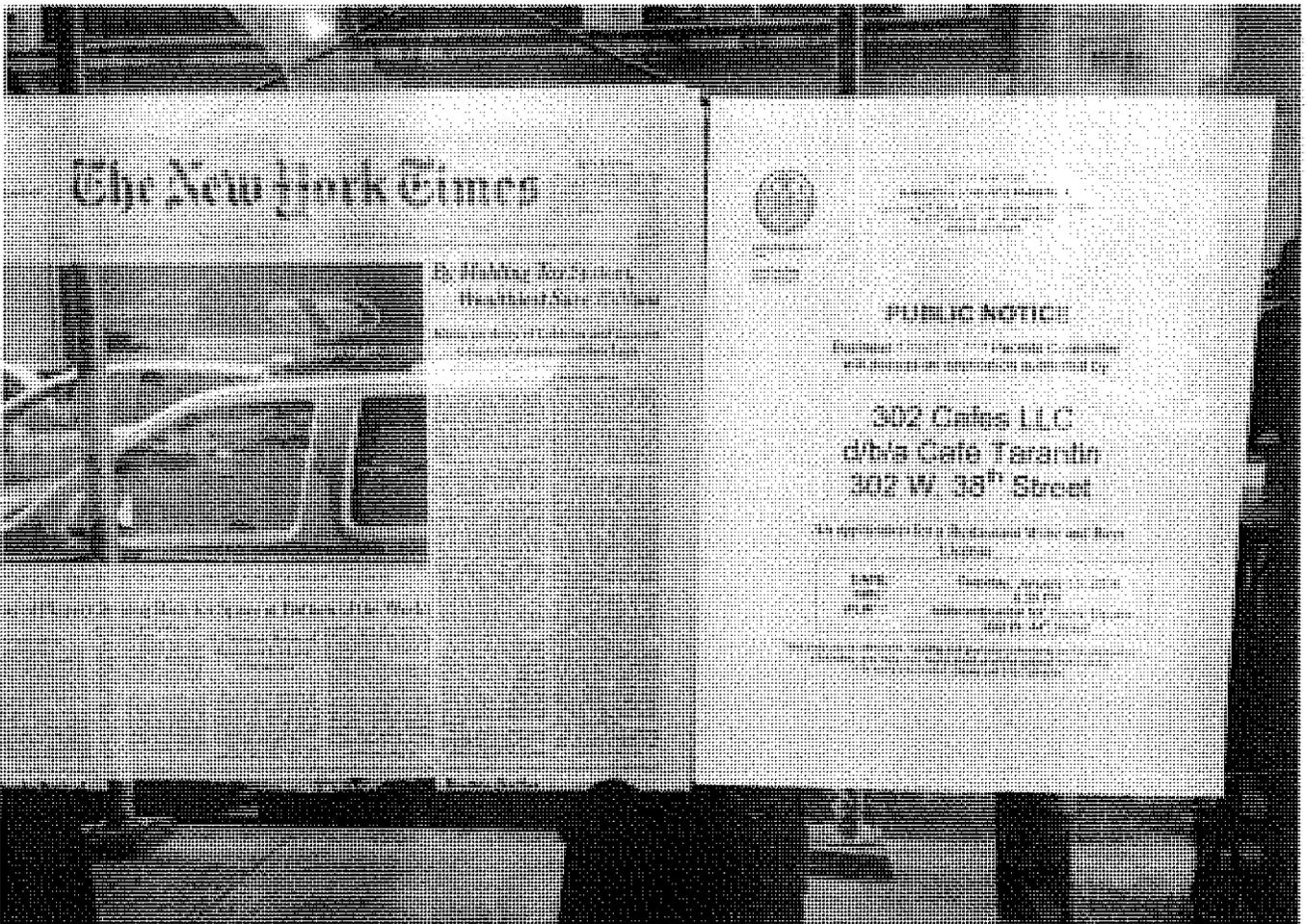
*Red : Malbec , Bordeaux , Pinot Noir : 9*

*White : Pinot Grigio , Sauvignon Blanc ,Rose : 8*

*Sparkling : Prosecco , Mimosa :8*

*Beer :*

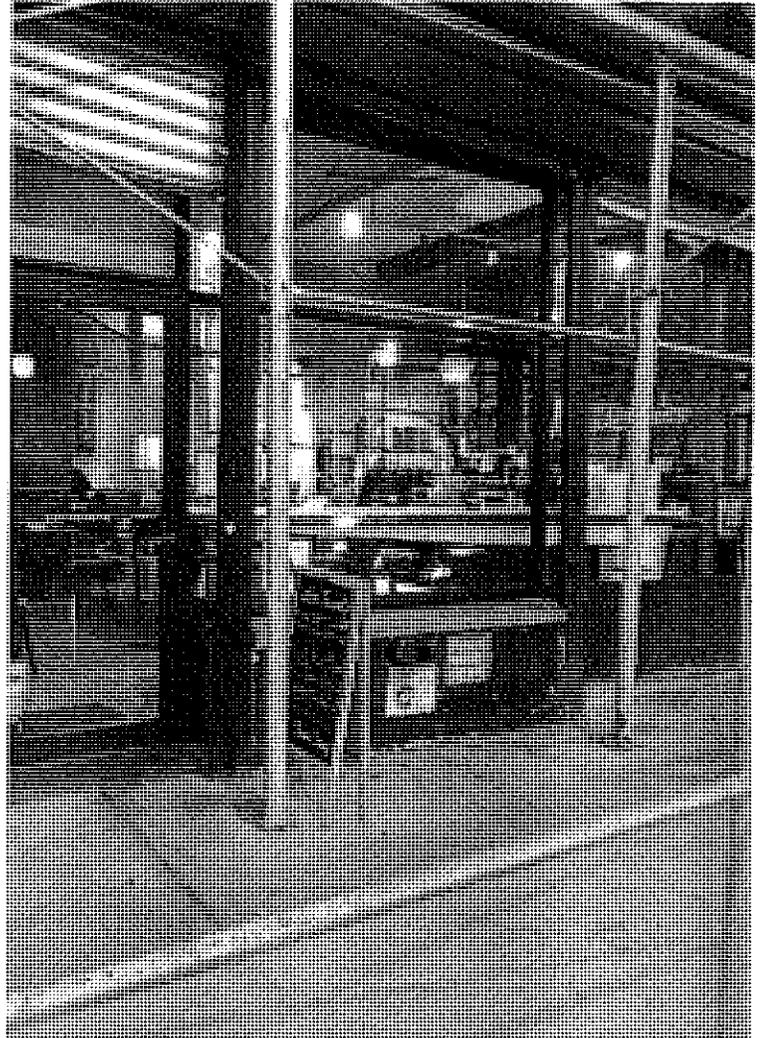
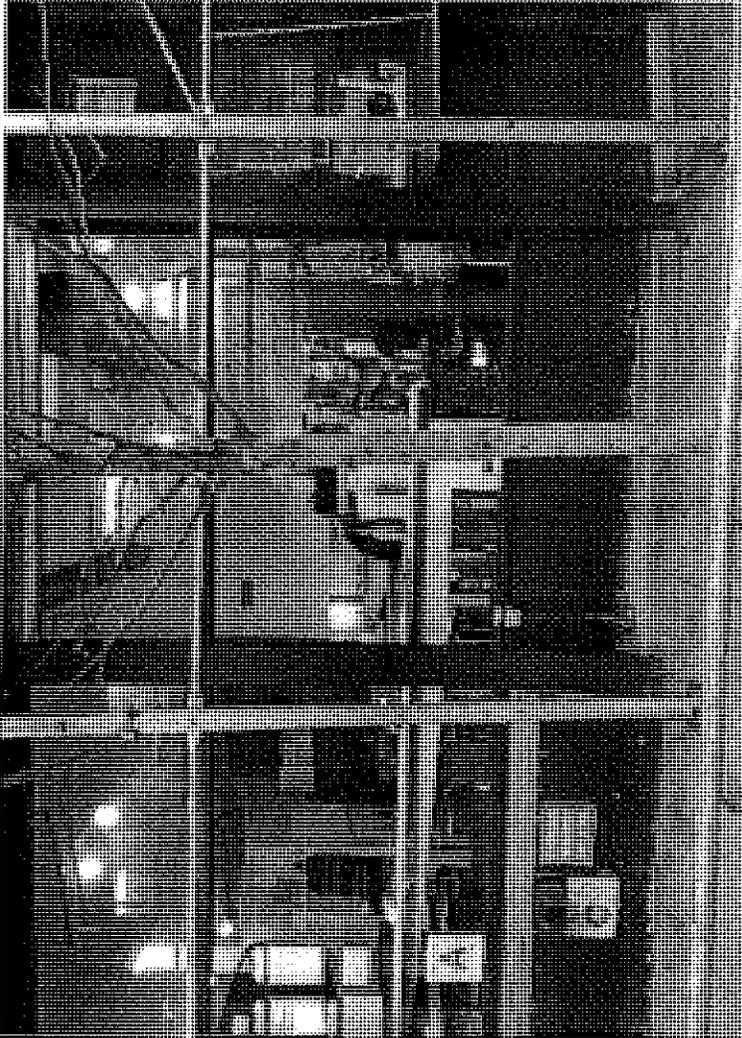
*Stella Artois , Hogarden , estrella : 6*





302 Cafes LLC DBA Cafe Tarantin  
302 West 38th Street New York, NY 10018

Community Board Request  
Meeting Date 01/12/2015



1 **Business License & Permits Committee**

Item #: 12

2  
3 February 3, 2016

4  
5 Vincent G. Bradley  
6 Chairman  
7 New York State Liquor Authority  
8 80 S. Swan Street, 9<sup>th</sup> Floor  
9 Albany, New York 12210

10  
11 **Re: Chelsea Corporate Events LLC**  
12 **d/b/a The Glasshouse**  
13 *660 12<sup>th</sup> Avenue (48/49)*

14  
15 Dear Chairman Bradley:

16  
17 Manhattan Community Board 4 (MCB4) recommends **denial** of a new On-Premise Liquor License  
18 application for Chelsea Corporate Events LLC d/b/a Glasshouse – 660 12<sup>th</sup> Avenue (48/49), **unless** the  
19 attached stipulations, agreed to and signed by the applicant, are part of the method of operation for this  
20 establishment with a capacity of 1800, 180 tables, 1800 seats, 6 services bars and 6 stand-up bar with 0  
21 seats; rooftop capacity: 400 (included in the above); 1 service bar and 1 stand-up bar with 0 seats.

22  
23 Sincerely,

24  
25  
26 Delores Rubin  
Chair

Burt Lazarin  
Co-Chair  
Business License & Permits  
Committee

Frank Holozubiec  
Co-Chair  
Business License & Permits  
Committee

27  
28

# Manhattan Community Board 4

(All Fields Must Be Completed)

## Liquor License Stipulations Application

<b>CORPORATION NAME</b>		<b>DOING BUSINESS AS (DBA)</b>	
Chelsea Corporate Events LLC		The Glasshouses	
<b>STREET ADDRESS</b>		<b>CROSS STREETS</b>	<b>ZIP CODE</b>
660 12th Avenue		W 48th & W 49th Streets	10019
<b>OWNER</b> <i>(Attach a list of all the people that will be associated/listed with the license)</i>	<b>NAME:</b>	Jack Guttman	<b>NAME:</b> Terrence R Flynn Jr.
	<b>PHONE:</b>	914-671-4180	<b>PHONE:</b> 718-945-1000
	<b>EMAIL:</b>	jackgutt@gmail.com	<b>EMAIL:</b> trflynnjr@gmail.com
<b>MANAGER</b>	<b>NAME:</b>	Perry Brocco	<b>NAME:</b> 677 Eleventh Avenue LLC
	<b>PHONE:</b>	212-634-8797	<b>PHONE:</b> 212-671-0578
	<b>EMAIL:</b>	perry@theglasshouses.com	<b>EMAIL:</b> jiacono@bramautogroup.com
<b>APPLICATION TYPE</b> <i>(Check One)</i>			
<input checked="" type="checkbox"/> <b>New</b>	Has applicant owned or managed a similar business?		<input checked="" type="radio"/> YES <input type="radio"/> NO
	What is/was the name and address of establishment?		The Glasshouses
	What were the dates applicant was involved with this former premise?		Since year 2008
<input type="checkbox"/> <b>Transfer</b>	What is the prior license # and expiration date?		
	Is applicant making any alterations or operational changes?		<input type="radio"/> YES <input type="radio"/> NO
	If alterations or operational changes are being made, please describe/list all changes.		
<input type="checkbox"/> <b>Alteration</b>	What is the current license # and expiration date?		
	Please list/describe the nature of all the changes and attach the plans:		
<b>METHOD OF OPERATION</b>			
<b>TYPE OF ALCOHOL</b>	<input checked="" type="checkbox"/> Liquor/Wine/Beer <input type="checkbox"/> Beer <input type="checkbox"/> Wine & Beer		
<b>ESTABLISHMENT TYPE</b>	<input type="checkbox"/> Restaurant <input type="checkbox"/> Cabaret <input type="checkbox"/> Night Club <input type="checkbox"/> Hotel <input type="checkbox"/> Bar/Tavern <input checked="" type="checkbox"/> Catering Establishment <input type="checkbox"/> Adult Entertainment <input type="checkbox"/> Wine Bar <input type="checkbox"/> Dance Club <input type="checkbox"/> Sports Bar <input type="checkbox"/> Club (Fraternal Organization – Members Only)		
Has applicant/owner filed with the SLA? If yes, when? If no, when do you plan to file?		<b>YES</b>	<input checked="" type="radio"/> NO
Is the 500 Foot Rule applicable? If yes, please attach a diagram of the On-Premise liquor license establishments within a 500 ft. radius of your establishment and the Public Interest Statement.		<b>YES</b>	<input checked="" type="radio"/> NO
Is the 200 Foot Rule applicable? If yes, please attach a diagram of the schools and houses of worship that trigger the rule.		<b>YES</b>	<input checked="" type="radio"/> NO
Has applicant/owner(s) read MCB4 Policy Regarding Concentration and Location of Alcoholic-Serving Establishments?		<input checked="" type="radio"/> YES	<input type="radio"/> NO



LOCATION & ZONING			
Is this a Special District? If yes, is it Clinton, West Chelsea or Hudson Yards?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	
Does the building have a Certificate of Occupancy ("C of O") or a letter of no objection?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	
Is a Public Assembly permit required?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	
Are your plans filed with DOB?	<input type="radio"/> YES	<input checked="" type="radio"/> NO	To be filed in January 2016

Community Notification/Relations			
<b>NOTIFICATION:</b> List all block associations; tenant associations, co-op boards or condo boards of residential buildings; and community groups that applicant has notified regarding its application. For each please list both the organization and individual you contacted	# 1	West 45th Street Block Association: Tim Tanner at tangotanner@gmail.com West 47th/48th Streets Block Association: Larry Roberts at larrymichaelroberts@gmail.com	
	# 2	West 45th Street Block Association (between 9th/11th Aves): Chana Widawsky at chanawid@gmail.com West 47th/48th Streets Block Association: Kim Bogues at jamesbogues@gmail.com	
	# 3	West 46th Street Block Association: Allison Tupper at allisontupper@verizon.net West 47th/48th Streets Block Association: Elke Fears at aefearshk@earthlink.net	
	# 4	West 47th/48th Streets Block Association: Chuck Vassallo at chasmv@hotmail.com West 47th/48th Streets Block Association: Steven Riedl at chluderemyc@yahoo.com	
	# 5	West 47th/48th Streets Block Association: Nancy Roylance at nancyroylance@ymail.com West 50th/51st Streets Block Association: Steve Belida at hk5051@gmail.com	
Please provide dates when applicant met with the groups listed above.		No dates have been set up yet.	
Who was your contact person at each group you met with?		We did not meet anyone yet.	
When did applicant post the notice that was provided?		December 16, 2015	
Where did applicant post the notice that was provided?		On the front door of the building.	
Will applicant provide owner cell phone number to neighbors and respond to complaints that arise? Please provide number in space provided.		<input checked="" type="radio"/> YES	<input type="radio"/> NO
Will applicant inform the Community Board office of its job openings and/or provide a hyperlink to applicants jobs webpage?		<input checked="" type="radio"/> YES	<input type="radio"/> NO

<b>BUILDING DESIGN</b>			
State the name and type of business previously located in the space.			
Has a liquor-licensed establishment previously occupied this space at any time? If yes, please provide the name of the business.	YES	<input checked="" type="radio"/>	
Do you plan any changes to the existing façade? If yes, please describe.	<input checked="" type="radio"/>	NO	It's being built new.
Will applicant have a vestibule within the establishment?	<input checked="" type="radio"/>	NO	
Will applicant use a storm enclosure?	YES	<input checked="" type="radio"/>	
Will applicant not place any items or obstructions on the sidewalk, for example, sandwich boards, sidewalk signs, freestanding menus and plants, as per the law?	<input checked="" type="radio"/>	NO	
Will applicant comply with the NYC noise code?	<input checked="" type="radio"/>	NO	
Will the establishment have any of the following: (circle all that apply)	<b>FRENCH DOORS</b>	<b>GARAGE DOORS</b>	<b>WINDOWS THAT CAN BE OPENED</b>
Will applicant close all windows, French doors, garage doors when any music or amplified sound (including televisions) is played inside the establishment?	<input checked="" type="radio"/>	NO	
Will applicant close all windows, French doors, garage doors by 11 PM Friday and Saturday and 10 PM on all other days even if no music or amplified sound is played inside the establishment?	<input checked="" type="radio"/>	NO	
Has applicant obtained an acoustical report from a certified sound engineer to assess potential noise disturbance to the neighboring residents and buildings?	YES	<input checked="" type="radio"/>	
Will applicant follow the recommendations of a certified sound engineer to mitigate potential noise disturbance to the neighboring residents and buildings, including placing speakers on the floor of the establishment?	<input checked="" type="radio"/>	NO	
Will the kitchen exhaust system extend to the roof?	<input checked="" type="radio"/>	NO	
Will the establishment have an illuminated sign?	<input checked="" type="radio"/>	NO	
Will the establishment have a canopy extending over the sidewalk?	<input checked="" type="radio"/>	NO	
Where will the air conditioner be located? What type is it?	Roof top units		
When was the air conditioner installed?	To be installed		

<b>OUTDOOR ITEMS - OTHER THEN SIDEWALK CAFE</b>			
Has the applicant/owner(s) read MCB 4 Rear Yard Rooftop Policy?	<input checked="" type="radio"/>	NO	
Will applicant use any outdoor spaces: rooftop, rear yard, patio, porch, balcony, pavilion, tents, deck or gazebo? If yes, which one(s)?	<input checked="" type="radio"/>	NO	
Are the floorplans for the outdoor space(s) included?	<input checked="" type="radio"/>	NO	
Will applicant close and vacate the outdoor space(s) by 11PM on Friday & Saturday and 10 PM on all other days?	<input checked="" type="radio"/>	NO	
Will the service and consumption of alcohol in any outdoor space only be via seated food service?	<input checked="" type="radio"/>	NO	
Will applicant not allow standing space for patrons to drink or smoke in any outdoor space(s)?	<input checked="" type="radio"/>	NO	
Will there be no amplified music, as per the law?	<input checked="" type="radio"/>	NO	
If amplified sound is played inside the establishment, will windows and doors be closed?	<input checked="" type="radio"/>	NO	
Will applicant agree to post signs outside asking customers to respect the neighbors'?	<input checked="" type="radio"/>	NO	
Will applicant agree to train staff to encourage a peaceful environment?	<input checked="" type="radio"/>	NO	
Will applicant provide effective sound control (landscaping enclosure, soundproofing tenants apartments)	<input checked="" type="radio"/>	NO	
Will there be a lighting plan that allows safe usage of the outdoor space without disrupting neighbors?	<input checked="" type="radio"/>	NO	

<b>OUTDOOR ITEMS – SIDEWALK CAFÉ</b> - There will be no sidewalk cafe.			
Has the applicant/owner(s) read MCB4 Sidewalk Café Policy?	YES	NO	
Will applicant be applying for a sidewalk café now or in the future?	YES	NO	
Is applicant in this application seeking to include a sidewalk café in its liquor license?	YES	NO	
If yes, has applicant submitted an application and plans to NYC Dept. of Consumer Affairs? Please attach application and plans.	YES	NO	
Will applicant close and vacate the sidewalk café by 11 PM on Friday & Saturday and 10 PM on all other days?	YES	NO	
Will applicant be serving alcohol in the sidewalk café? If so, will you have waiter service?	YES	NO	
Will the café have a 3 ft. wide serving aisle running the entire length of the sidewalk cafe?	YES	NO	
Will applicant mark the perimeter of the café on the sidewalk?	YES	NO	
Will the service and consumption of alcohol in the sidewalk café only be via seated food service?	YES	NO	
Will the sidewalk café not provide standing space for drinking or smoking?	YES	NO	
Will applicant use any portable natural gas heaters? If so, do you have the requisite approvals from DOB & the Fire Department?	YES	NO	
Will applicant have a lighting plan that will allow safe usage of the outdoor space without disrupting neighbors?	YES	NO	
Will all furniture, plants and barricades be stored inside between the evening closing hours and the morning opening hours?	YES	NO	
Will all furniture be stored inside between December 21 <sup>st</sup> and March 21 <sup>st</sup> , and any other day when it rains or snows?	YES	NO	
Will applicant use umbrellas?	YES	NO	
If construction or construction protection has reduced the sidewalk width, will applicant always maintain an 8 foot clear path of sidewalk between the perimeter of the café and the closes obstruction including construction barricades?	YES	NO	

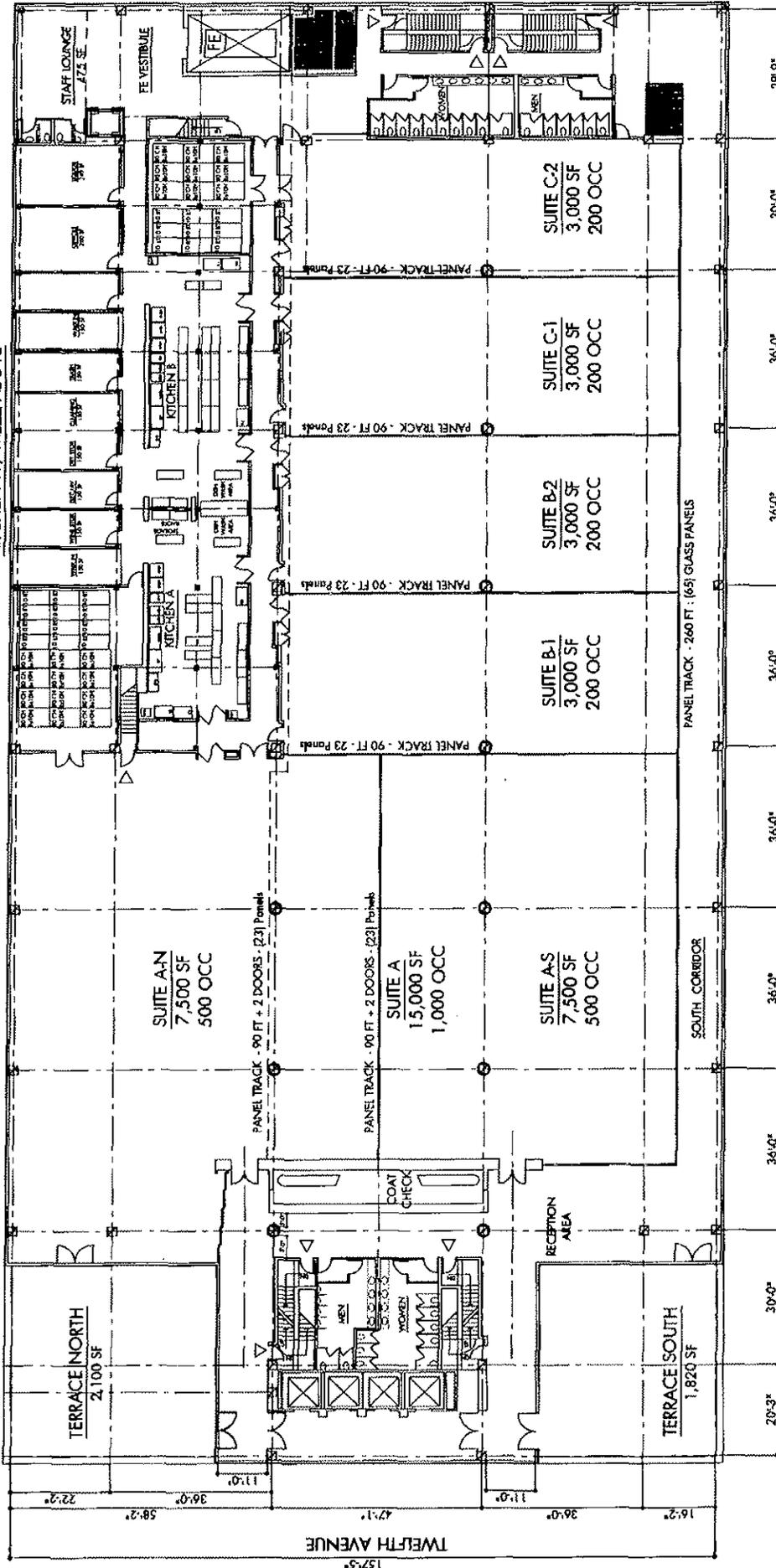
**ADDITIONAL STIPULATIONS: (Office Use Only)**

- Windows abutting outdoor space will not capable of being opened
- There will be no music or amplified sound in the outdoor space
- All events will be private and not open to the public. There will be no tickets or admission sold in advance or at the door
- Applicant will provide contact number to the community

***To the extent any additional stipulation on pages 7 and 8 of this application conflicts with any response on pages 1 – 6 of this application, the stipulations on pages 7 and 8 control.***

WEST 49 STREET

KITCHEN W/ MEZZ ABOVE



**SIXTH**  
**SEVENTH FLOOR**  
 SCALE: 3/32" = 1'-0"

**A-110.00**  
 November 17, 2015

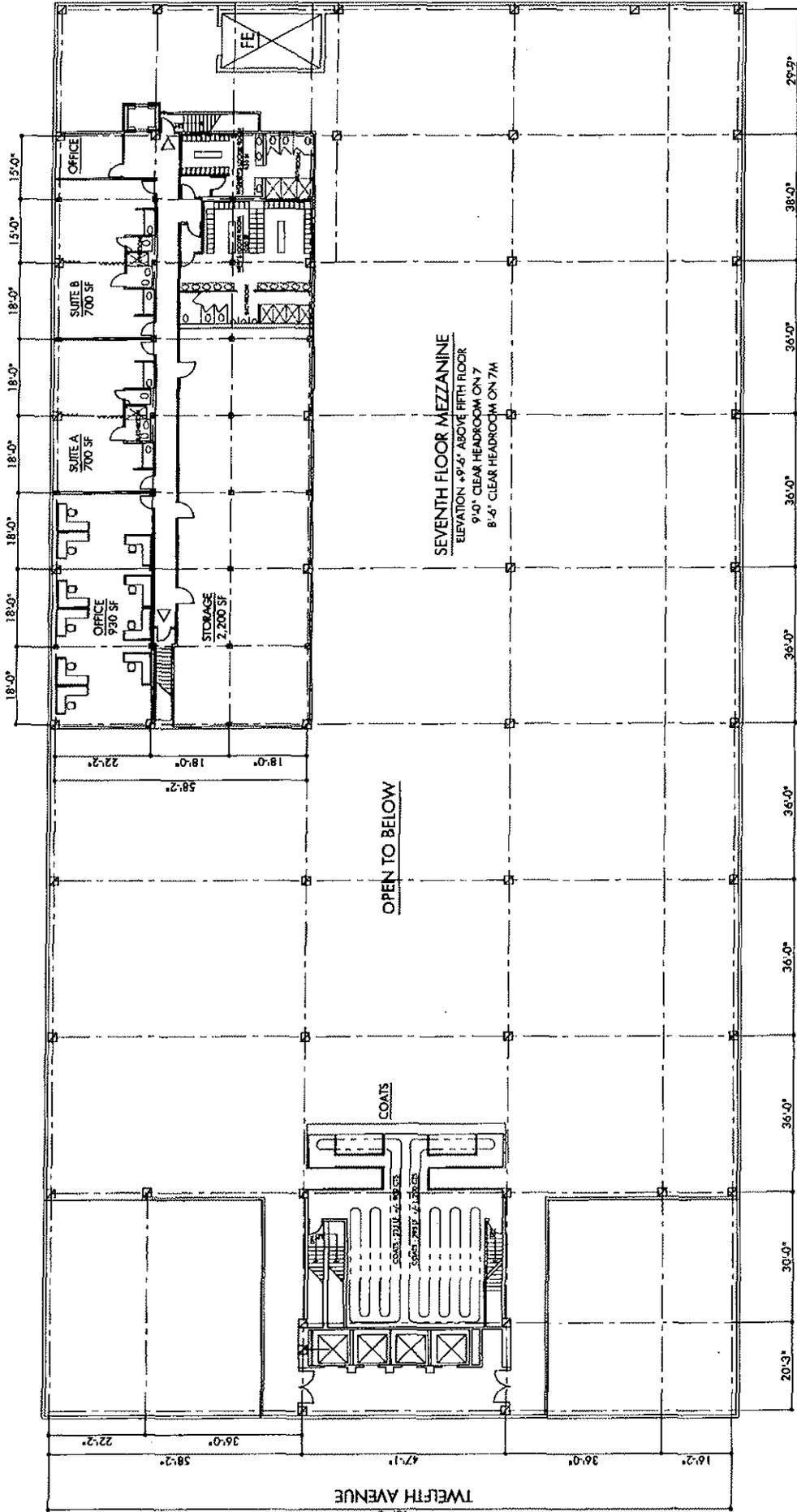
SCHEMATIC DESIGN  
 PROPOSED SEVENTH FLOOR PLAN  
**SIXTH**

**GLÖSS**  
 600 Third Avenue, Seventh Floor  
 New York, NY 10016

Chelsea Corporate Events, LLP  
 242 West 23 Street, 21st Floor  
 New York, NY 10011  
 212.242.7800

**KGA**  
 Kasser + Garry Architects, LP  
 115 West 30 Street  
 New York, NY 10011  
 212.922.6181

WEST 49 STREET



WEST 48 STREET

**SIXTH**  
**PLAN - SEVENTH-FLOOR MEZZANINE**  
**SCALE: 3/32" = 1'-0"**

**KGA**  
 Kossor + Garry Architects, LP  
 115 West 30 Street  
 New York, NY 10001  
 212-647-6161

Chelsea Corporate Events, LP  
 541 West 23 Street, 21st Floor  
 New York, NY 10001  
 212-647-7800

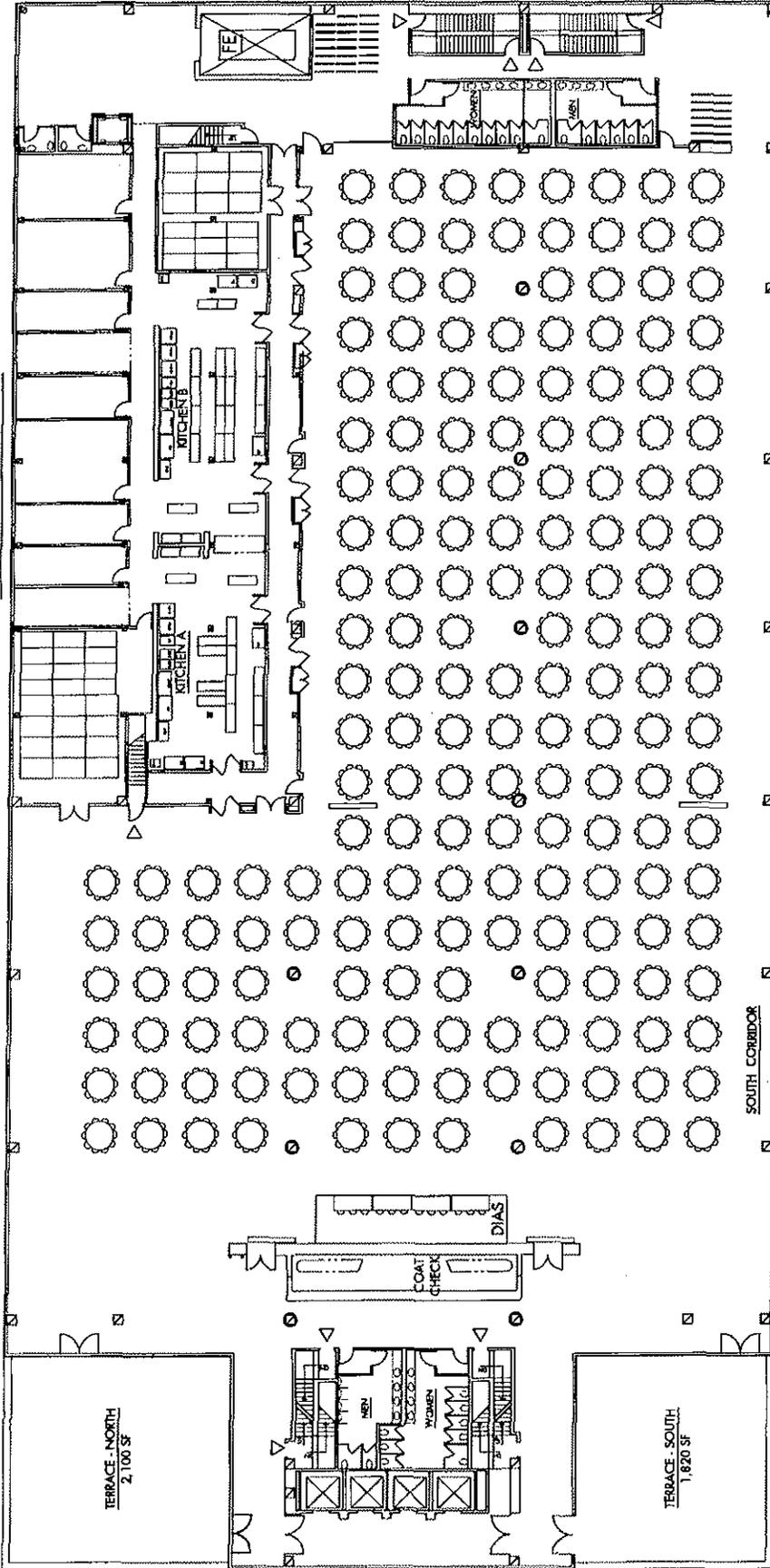
**GLÖSS**  
 SCHEMATIC DESIGN  
 600 Tenth Avenue, 8th Floor  
 New York, NY 10018

PROPOSED SEVENTH FLOOR MEZZANINE PLAN  
 SIXTH

**A-111.00**  
 November 17, 2015

WEST 49 STREET

KITCHEN W/ MEZZ ABOVE



TWELFTH AVENUE

GALA DINNER LAYOUT  
185 TABLES  
SEATING FOR 1,850

WEST 48 STREET

SOUTH CORRIDOR

1 PLAN - SIXTH SEVENTH FLOOR  
SCALE: 3/32" = 1'-0"

**KGA**  
Krause + Garry Architects, LP  
125 West 30 Street  
New York, NY 10001  
212 922 5161

Chelsea Corporate Events, LP  
345 West 14th Street, 21st Floor  
New York, NY 10011  
212 242 7920

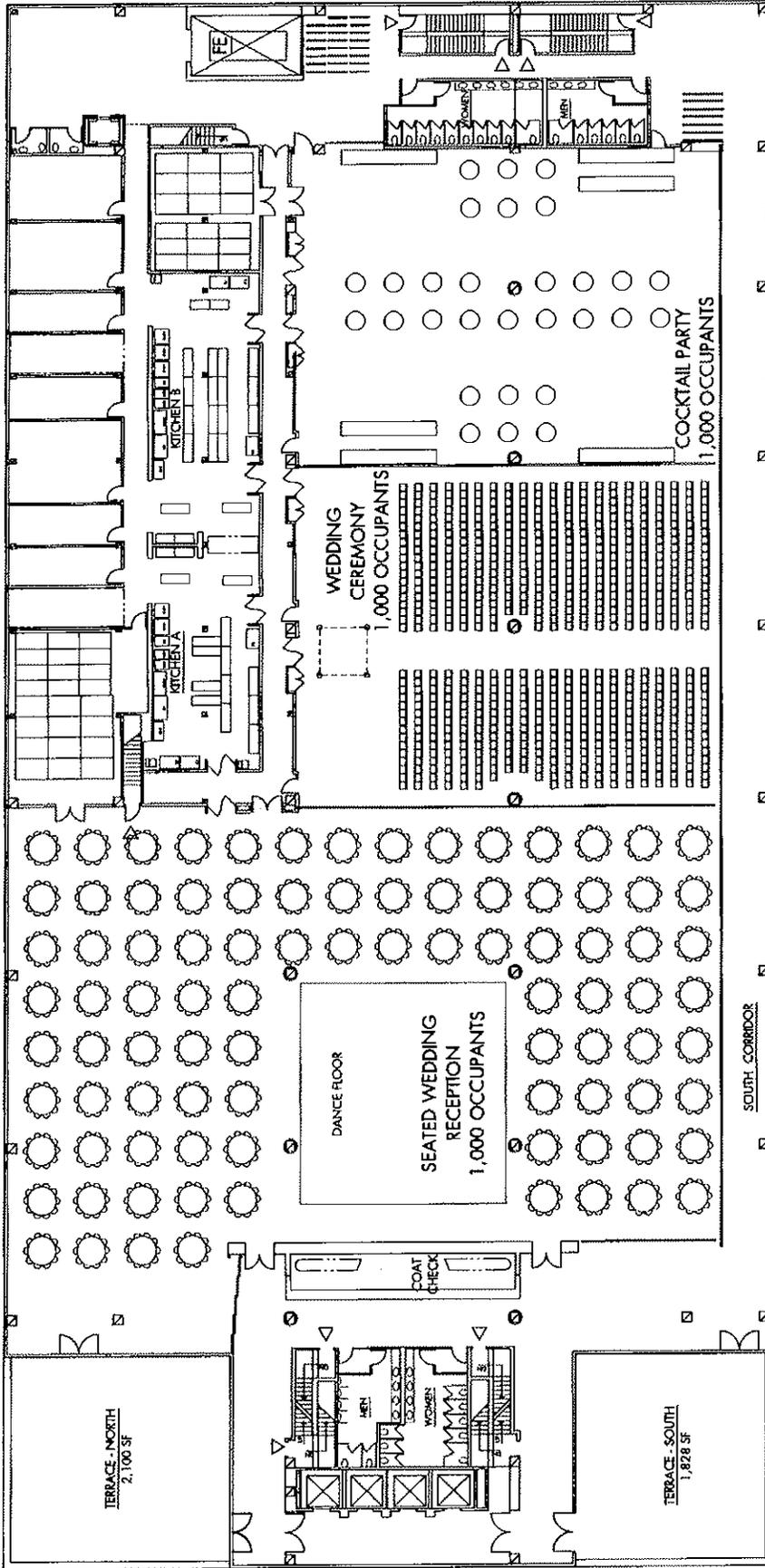
**GLÖSS**  
ARCHITECTS  
600 South Avenue, Seventh Floor  
New York, NY 10019

**SIXTH SEVENTH FLOOR PLAN**  
GALA DINNER LAYOUT  
SCHEMATIC DESIGN

**A-120.00**  
November 17, 2015

WEST 49 STREET

KITCHEN W/ MEZZ ABOVE



TWELFTH AVENUE

WEST 48 STREET

WEDDING LAYOUT  
 COCKTAIL PARTY + WEDDING CEREMONY + SEATED  
 RECEPTION WITH DANCE FLOOR  
 90 TABLES  
 1,000 OCCUPANTS

SIXTY SEVENTH FLOOR

1 PLAN: SIXTY SEVENTH FLOOR  
 SCALE: 3/32" = 1'-0"

**KGA**  
 Kasser + Garry Architects, LP  
 113 West 20 Street  
 New York, NY 10011  
 212 667 8161

Chelsea Corporate Events, LP  
 540 West 23 Street, 21st Floor  
 New York, NY 10011  
 212 242 7800

**GLÖSES**  
 607 South Avenue, Seventh Floor  
 New York, NY 10019

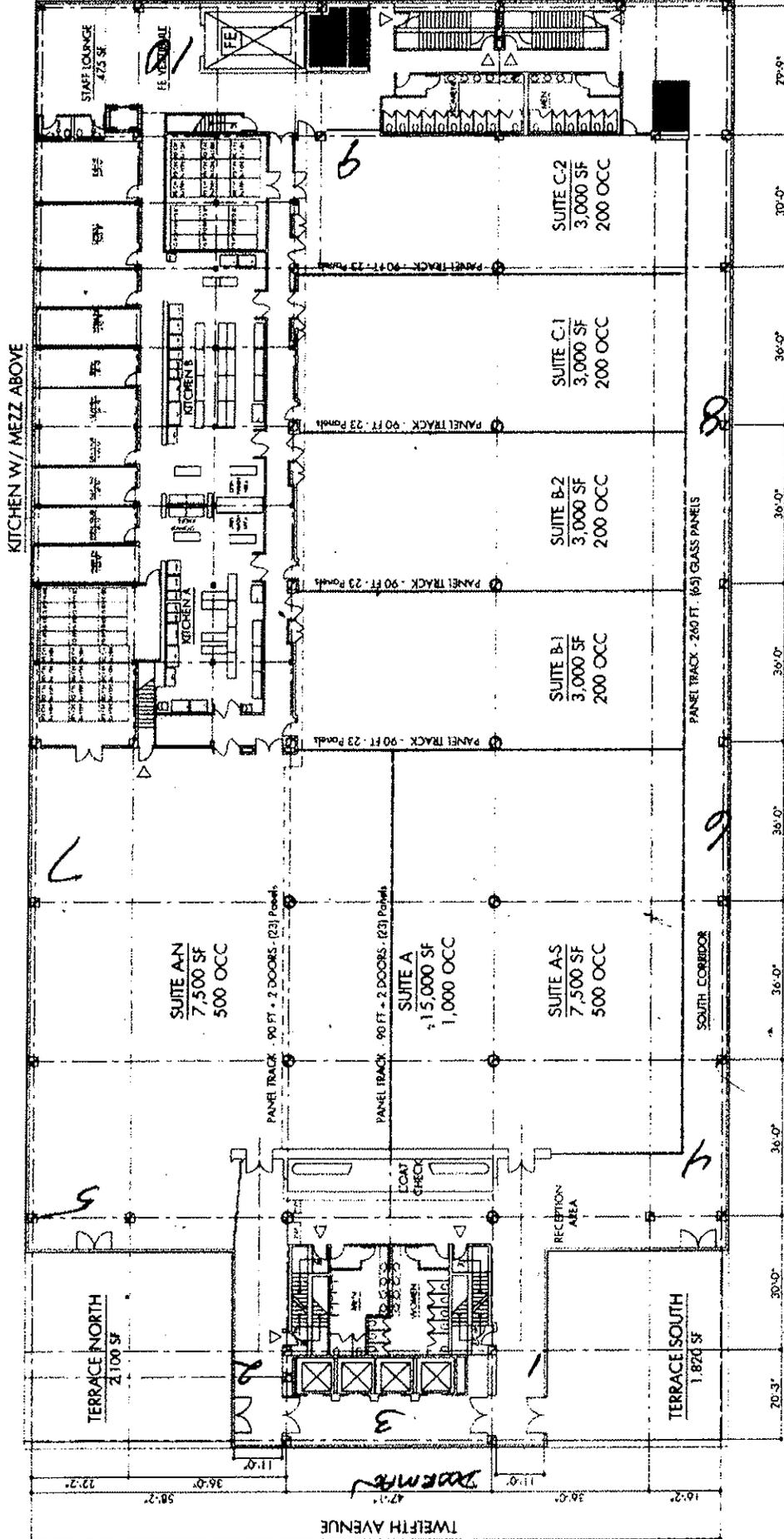
SIXTY SEVENTH FLOOR PLAN  
 WEDDING LAYOUT  
 SCHEMATIC DESIGN

A-122.00  
 November 17, 2015

Security Plan

-Numbers 1 thru 10 marked in pen indicates locations where the security guards will be placed.

WEST 49 STREET



WEST 48 STREET

WEST 48 STREET

SIXTH  
SEVENTH FLOOR  
SCALE: 3/32" = 1'-0"

KGa  
Korner + Cary Architects, LP  
115 West 25 Street  
New York, NY 10011  
212 487 8141

Chelsea Corporate Events, LP  
515 West 23 Street  
New York, NY 10011  
212 752 1800

GLASS  
100 West Avenue, Second Floor  
New York, NY 10013

SCHEMATIC DESIGN  
PROPOSED SEVENTH FLOOR PLAN  
SIXTH

A-110.00  
November 17, 2015



## Sample Menu

### Reception & Seater Dinner

Butlered Drinks  
White Wine  
Sparkling Water with Lime

Bar Snacks  
Maple Bacon Popcorn  
Dark Chocolate Espresso Bark

Passed HDs  
Steak Frites  
Sbeef Short Rib Wellington  
Yellowtail Sashimi  
Lobster Mac and Cheese  
Chicken Waffles  
French Onion Soup Grilled Cheese  
Five Mushroom Ragout Tartle  
Artichoke Fondue

Seated Dinner  
Butter Trio: Herb, Truffle, Sea Sal  
Iceberg Lettuce Wedge with crumbled blue cheese, buttermilk dressing  
Biscuits and Baguettes  
Braised Short Ribs and Filet  
Lemon Thyme Baked Branzino

Coffee & Tea

**NOTE:** This is just a sample menu.  
Since we are not a restaurant, our menu will change per event.





1 **Business License & Permits Committee**

Item #: 13

2  
3 February 3, 2016

4  
5 Vincent G. Bradley  
6 Chairman  
7 New York State Liquor Authority  
8 80 S. Swan Street, 9<sup>th</sup> Floor  
9 Albany, New York 12210

10  
11 **Re: Mariscos Chelsea LLC**  
12 **d/b/a Los Mariscos**  
13 *409 W 15<sup>th</sup> Street a/k/a 75 9<sup>th</sup> Avenue*

14  
15 Dear Chairman Bradley:

16  
17 Manhattan Community Board 4 (MCB4) recommends **denial** of a new On-Premise Liquor License  
18 application for Mariscos Chelsea LLC d/b/a Los Mariscos – 409 W 15<sup>th</sup> Street a/k/a 75 9<sup>th</sup> Avenue,  
19 **unless** the attached stipulations, agreed to and signed by the applicant, are part of the method of  
20 operation for this establishment with a capacity of 40, 5 tables, 30 seats, and 1 stand-up bar with 0 seats.

21  
22  
23 Sincerely,

24  
25  
26 Delores Rubin  
Chair

Burt Lazarin  
Co-Chair  
Business License & Permits  
Committee

Frank Holozubiec  
Co-Chair  
Business License & Permits  
Committee

27  
28

# Manhattan Community Board 4

(All Fields Must Be Completed)

## Liquor License Stipulations Application

<b>CORPORATION NAME</b>		<b>DOING BUSINESS AS (DBA)</b>	
Mariscos Chelsea LLC		Los Mariscos	
<b>STREET ADDRESS</b>		<b>CROSS STREETS</b>	<b>ZIP CODE</b>
409 West 15th Street AKA 75 9th Avenue		15th and 16th Streets	10011
<b>OWNER</b> <i>(Attach a list of all the people that will be associated listed with the license)</i>	<b>NAME:</b>	See signature page	<b>NAME:</b> Robert S Bookman
	<b>PHONE:</b>		<b>PHONE:</b> 212-513-1988
	<b>EMAIL:</b>		<b>EMAIL:</b> rbookman@pandblegal.com
<b>MANAGER</b>	<b>NAME:</b>	Jacob Ackerman	<b>NAME:</b> Jamestown Properties
	<b>PHONE:</b>	619-740-9242	<b>PHONE:</b> 212-652-2122
	<b>EMAIL:</b>	jacob@lostacos1.com	<b>EMAIL:</b> ddechiaro@jamestown.com
<b>ATTORNEY/ REPRESENTAIVE</b>			
<b>LANDLORD</b>			
<b>APPLICATION TYPE (Check One)</b>			
<input checked="" type="checkbox"/> <b>New</b>	Has applicant owned or managed a similar business?		<input checked="" type="radio"/> YES <input type="radio"/> NO
	What is/was the name and address of establishment?		Los Tacos No. 1 / 75 9th Avenue
	What were the dates applicant was involved with this former premise?		May 1st 2013 to Present
<input type="checkbox"/> <b>Transfer</b>	What is the prior license # and expiration date?		
	Is applicant making any alterations or operational changes?		<input type="radio"/> YES <input type="radio"/> NO
	If alterations or operational changes are being made, please describelist all changes.		
<input type="checkbox"/> <b>Alteration</b>	What is the current license # and expiration date?		
	Please list/describe the nature of all the changes and attach the plans:		
<b>METHOD OF OPERATION</b>			
<b>TYPE OF ALCOHOL</b>	<input checked="" type="checkbox"/> Liquor/Wine/Beer <input type="checkbox"/> Beer <input type="checkbox"/> Wine & Beer		
<b>ESTABLISHMENT TYPE</b>	<input checked="" type="checkbox"/> Restaurant <input type="checkbox"/> Cabaret <input type="checkbox"/> Night Club <input type="checkbox"/> Hotel <input type="checkbox"/> Bar/Tavern <input type="checkbox"/> Catering Establishment <input type="checkbox"/> Adult Entertainment <input type="checkbox"/> Wine Bar <input type="checkbox"/> Dance Club <input type="checkbox"/> Sports Bar <input type="checkbox"/> Club (Fraternal Organization – Members Only)		
Has applicant/owner filed with the SLA? If yes, when? If no, when do you plan to file?		<b>YES</b>	<input checked="" type="radio"/> NO
Is the 500 Foot Rule applicable? If yes, please attach a diagram of the On-Premise liquor license establishments within a 500 ft. radius of your establishment and the Public Interest Statement.		<input checked="" type="radio"/> YES	<input type="radio"/> NO
Is the 200 Foot Rule applicable? If yes, please attach a diagram of the schools and houses of worship that trigger the rule.		<b>YES</b>	<input checked="" type="radio"/> NO
Has applicant/owner(s) read MCB4 Policy Regarding Concentration and Location of Alcoholic-Serving Establishments?		<input checked="" type="radio"/> YES	<input type="radio"/> NO

**OPERATIONAL DETAILS** (\*Closing time will be when establishment is vacated of all patrons)

HOURS* <i>(Indoor Only)</i>		MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY
	Operation	11am-1am	11am-1am	11am-1am	11am-1am	11am-2am	11am-2am	11am-1am
	Kitchen	11am-1am	11am-1am	11am-1am	11am-1am	11am-2am	11am-2am	11am-1am
	Music	11am-1am	11am-1am	11am-1am	11am-1am	11am-2am	11am-2am	11am-1am
If you plan to have music, what type(s)? (Circle all that apply)		<input checked="" type="checkbox"/> BACKGROUND	<input type="checkbox"/> LIVE MUSIC	<input type="checkbox"/> DJ	<input type="checkbox"/> JUKE BOX	<input type="checkbox"/> KARAOKE		

**OCCUPANCY**

	Capacity (Certificate of Occupancy)	Maximum # of Persons You Anticipate Occupying Premises (Including Employees)	Number of Tables	Number of Seats	Number of Service Only Bars	Number of Stand-Up Bars	Number of Seats at Stand-Up Bar
<b>INSIDE</b>	40	40	5	30	0	1	0
<b>OUTSIDE</b> <i>(Other than sidewalk café)</i>	N/A	N/A	N/A	N/A	N/A	N/A	N/A
<b>SIDEWALK CAFE</b>	N/A	N/A	N/A	N/A	N/A		

How many floors are there? What is the capacity for each floor? 1 Floor, 40

How frequently will the owner(s) be at the establishment? Everday

Will you be applying or intending to apply for a cabaret license with DCA? If yes, will there be dancing?	YES	<input checked="" type="radio"/> NO
Will applicant have bottle or table service for beverage alcohol?	YES	<input checked="" type="radio"/> NO
Will you be hosting private; promotional or corporate events?	YES	<input checked="" type="radio"/> NO
Will outside promoters be used on a regular basis? If yes please describe.	YES	<input checked="" type="radio"/> NO
Will you have a security plan? If, yes please attach.	YES	<input checked="" type="radio"/> NO
Will security plan be implemented?	YES	<input checked="" type="radio"/> NO
Will State certified security personnel be used?	YES	<input checked="" type="radio"/> NO
Will New York Nightlife Association and NYPD Best Practices be followed?	<input checked="" type="radio"/> YES	NO
Will applicant be using delivery bicycles? If yes, how many?	YES	<input checked="" type="radio"/> NO
Will delivery bicycles be clearly marked with the name of the restaurant and will staff wear attire clearly noting name as described by NYC Law?	YES	<input checked="" type="radio"/> NO
Where will delivery bicycles be stored during the day when not in use?	N/A	

LOCATION & ZONING			
Is this a Special District? If yes, is it Clinton, West Chelsea or Hudson Yards?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	West Chelsea
Does the building have a Certificate of Occupancy ("C of O") or a letter of no objection?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	
Is a Public Assembly permit required?	<input type="radio"/> YES	<input checked="" type="radio"/> NO	
Are your plans filed with DOB?	<input type="radio"/> YES	<input checked="" type="radio"/> NO	

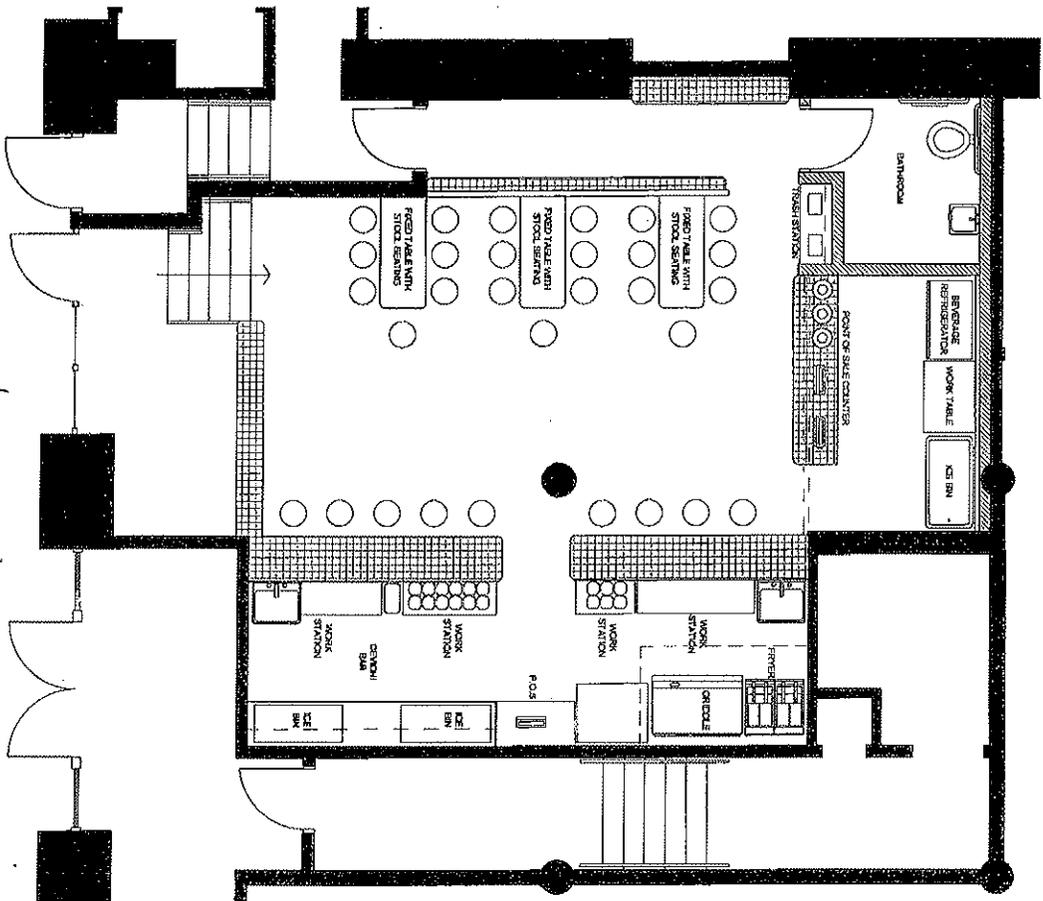
Community Notification/Relations			
<b>NOTIFICATION:</b> List all block associations; tenant associations, co-op boards or condo boards of residential buildings; and community groups that applicant has notified regarding its application. For each please list both the organization and individual you contacted	# 1	Jim Jasper; 300 West 15th Street Block Association	
	# 2	Will Rogers; 200 West 16th Street Block Association	
	# 3	Craig Slutzkin; 100 West 17/18th Street Block Association	
	# 4	Judy Klein; 100 West 17/18th Street Block Association	
	# 5	Cheryl Kupper; 300 West 18/19th Street Block Association	
Please provide dates when applicant met with the groups listed above.		Sent notification via email on 12/18/2015	
Who was your contact person at each group you met with?		See above	
When did applicant post the notice that was provided?		12/18/2015	
Where did applicant post the notice that was provided?		2 block radius of 409 West 15th Street AKA 75 9th Avenue	
Will applicant provide owner cell phone number to neighbors and respond to complaints that arise? Please provide number in space provided.		<input checked="" type="radio"/> YES	<input type="radio"/> NO Owner: 760-550-2551
Will applicant inform the Community Board office of its job openings and/or provide a hyperlink to applicants jobs webpage?		<input checked="" type="radio"/> YES	<input type="radio"/> NO

BUILDING DESIGN			
State the name and type of business previously located in the space.	New construction		
Has a liquor-licensed establishment previously occupied this space at any time? If yes, please provide the name of the business.	YES	<input checked="" type="radio"/> NO	
Do you plan any changes to the existing façade? If yes, please describe.	YES	<input checked="" type="radio"/> NO	
Will applicant have a vestibule within the establishment?	<input checked="" type="radio"/> YES	NO	
Will applicant use a storm enclosure?	YES	<input checked="" type="radio"/> NO	
Will applicant not place any items or obstructions on the sidewalk, for example, sandwich boards, sidewalk signs, freestanding menus and plants, as per the law?	<input checked="" type="radio"/> YES	NO	
Will applicant comply with the NYC noise code?	<input checked="" type="radio"/> YES	NO	
Will the establishment have any of the following: (circle all that apply)	FRENCH DOORS	GARAGE DOORS	WINDOWS THAT CAN BE OPENED <input checked="" type="checkbox"/>
Will applicant close all windows, French doors, garage doors when any music or amplified sound (including televisions) is played inside the establishment?	<input checked="" type="radio"/> YES	<input checked="" type="radio"/> NO	
Will applicant close all windows, French doors, garage doors by 11 PM Friday and Saturday and 10 PM on all other days even if no music or amplified sound is played inside the establishment?	<input checked="" type="radio"/> YES	NO	
Has applicant obtained an acoustical report from a certified sound engineer to assess potential noise disturbance to the neighboring residents and buildings?	YES	<input checked="" type="radio"/> NO	
Will applicant follow the recommendations of a certified sound engineer to mitigate potential noise disturbance to the neighboring residents and buildings, including placing speakers on the floor of the establishment?	YES	<input checked="" type="radio"/> NO	
Will the kitchen exhaust system extend to the roof?	<input checked="" type="radio"/> YES	NO	
Will the establishment have an illuminated sign?	<input checked="" type="radio"/> YES	NO	
Will the establishment have a canopy extending over the sidewalk?	YES	<input checked="" type="radio"/> NO	
Where will the air conditioner be located? What type is it?	A/C is provided by building and unit is located on the roof		
When was the air conditioner installed?	2015		

<b>OUTDOOR ITEMS - OTHER THEN SIDEWALK CAFÉ</b>		N/A	
Has the applicant/owner(s) read MCB 4 Rear Yard Rooftop Policy?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	
Will applicant use any outdoor spaces: rooftop, rear yard, patio, porch, balcony, pavilion, tents, deck or gazebo? If yes, which one(s)?	<input type="radio"/> YES	<input checked="" type="radio"/> NO	
Are the floorplans for the outdoor space(s) included?	<input type="radio"/> YES	<input checked="" type="radio"/> NO	
Will applicant close and vacate the outdoor space(s) by 11PM on Friday & Saturday and 10 PM on all other days?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	
Will the service and consumption of alcohol in any outdoor space only be via seated food service?	<input type="radio"/> YES	<input checked="" type="radio"/> NO	
Will applicant not allow standing space for patrons to drink or smoke in any outdoor space(s)?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	
Will there be no amplified music, as per the law?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	
If amplified sound is played inside the establishment, will windows and doors be closed?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	
Will applicant agree to post signs outside asking customers to respect the neighbors'?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	
Will applicant agree to train staff to encourage a peaceful environment?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	
Will applicant provide effective sound control (landscaping enclosure, soundproofing tenants apartments)	<input checked="" type="radio"/> YES	<input type="radio"/> NO	
Will there be a lighting plan that allows safe usage of the outdoor space without disrupting neighbors?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	

<b>OUTDOOR ITEMS – SIDEWALK CAFÉ</b>		N/A	
Has the applicant/owner(s) read MCB4 Sidewalk Café Policy?	YES	NO	
Will applicant be applying for a sidewalk café now or in the future?	YES	NO	
Is applicant in this application seeking to include a sidewalk café in its liquor license?	YES	NO	
If yes, has applicant submitted an application and plans to NYC Dept. of Consumer Affairs? Please attach application and plans.	YES	NO	
Will applicant close and vacate the sidewalk café by 11 PM on Friday & Saturday and 10 PM on all other days?	YES	NO	
Will applicant be serving alcohol in the sidewalk café? If so, will you have waiter service?	YES	NO	
Will the café have a 3 ft. wide serving aisle running the entire length of the sidewalk cafe?	YES	NO	
Will applicant mark the perimeter of the café on the sidewalk?	YES	NO	
Will the service and consumption of alcohol in the sidewalk café only be via seated food service?	YES	NO	
Will the sidewalk café not provide standing space for drinking or smoking?	YES	NO	
Will applicant use any portable natural gas heaters? If so, do you have the requisite approvals from DOB & the Fire Department?	YES	NO	
Will applicant have a lighting plan that will allow safe usage of the outdoor space without disrupting neighbors?	YES	NO	
Will all furniture, plants and barricades be stored inside between the evening closing hours and the morning opening hours?	YES	NO	
Will all furniture be stored inside between December 21 <sup>st</sup> and March 21 <sup>st</sup> , and any other day when it rains or snows?	YES	NO	
Will applicant use umbrellas?	YES	NO	
If construction or construction protection has reduced the sidewalk width, will applicant always maintain an 8 foot clear path of sidewalk between the perimeter of the café and the closes obstruction including construction barricades?	YES	NO	

# Mariscos Chelsea



1  
A1.0  
Scale = 1/8"

West 15th Street

Drawn By: TS  
Project Code: \_\_\_\_\_  
Checked By: TS  
Materials: \_\_\_\_\_

Date: 11/18/75

## Design Development

- Revisions
- △
  - △
  - △
  - △
  - △
  - △
  - △
  - △

## Floor Plan

Chelsea Market \_\_\_\_\_ New York, NY

# A1.0

63 Bank Street Suite 1B New York, NY 10014  
Phone 780.550.2551

## LOS MARISCOS

### OUR MENU

#### **TACOS**

- FISH
- SHRIMP
- CAMARON ENCHILADO

#### **CEVICHE**

- FISH
- SHRIMP
- ESPECIAL (shrimp, oysters, clams, scallops, octopus)

#### **COCKTAILS**

- SHRIMP
- CAMPECHANO (SHRIMP, OYSTERS, CLAMS, SCALLOPS, OCTUPUS)

#### **AGUACHILE** (shrimp seasoned in lime) \*scallops when in season

- ROJO
- VERDE

#### **CONCHAS** (shells)

- CHOCOLATA CLAM (fresh or gratin)
- OYSTERS
- OYSTER SHOOTER

#### **LOBSTER BURRITO**

- SERVED w/ BEANS, RICE, AND FLOUR TORTILLAS

*\* ALSO TRY OUR HOUSE BROTH (SHRIMP OR FISH)*

### DRINK MENU

**MEXICAN SODAS**  
**US BOTTLED SODA**  
**AGUAS FRESCAS**

### BAR MENU

**BEER**  
**CLAMATO (w/BEER)**  
**CLAMATO PREPARADO (w/vodka)**  
**MICHELADAS**  
**MEZCAL**  
**TEQUILA**



**LOS MARISCOS**  
TRUQUE - DEPOTÉ - DOCTEUR

1 **Business License & Permits Committee**

**Item #: 14**

2  
3 February 3, 2016

4  
5 Vincent G. Bradley  
6 Chairman  
7 New York State Liquor Authority  
8 80 S. Swan Street, 9<sup>th</sup> Floor  
9 Albany, New York 12210

10  
11 **Re: TR5 Group Inc**  
12 **d/b/a Hide-Chan Ramen**  
13 *314 W 53<sup>rd</sup> Street (8/9)*

14  
15 Dear Chairman Bradley:

16  
17 Manhattan Community Board 4 (MCB4) recommends **denial** of a new Wine and Beer License  
18 application for TR5 Group Inc. d/b/a Hide-Chan Ramen – 314 W 53<sup>rd</sup> Street (8/9), **unless** the attached  
19 stipulations, agreed to and signed by the applicant, are part of the method of operation for this  
20 establishment with a capacity of 60, 8 tables, 40 seats, and 1 stand-up bar with 7 seats.

21  
22  
23 Sincerely,

24  
25  
26 Delores Rubin  
Chair

Burt Lazarin  
Co-Chair  
Business License & Permits  
Committee

Frank Holozubiec  
Co-Chair  
Business License & Permits  
Committee

27  
28

# Manhattan Community Board 4

(All Fields Must Be Completed)

# Liquor License Stipulations Application

CORPORATION NAME <b>TR 5 GROUP INC</b>		DOING BUSINESS AS (DBA) <b>HIDE-CHAN RAMEN</b>	
STREET ADDRESS <b>314 W BROADWAY 53<sup>rd</sup> #</b>		CROSS STREETS <b>53<sup>rd</sup> ST bet 8+9<sup>th</sup> AV</b>	ZIP CODE <b>10019</b>
OWNER <small>(Attach a list of all the people that will be associated/listed with the license)</small>	NAME: <b>Ryuichi MuneKata</b>	NAME: <b>FRANCIS BUSCEMI</b>	
	PHONE: <b>917-697-9987</b>	PHONE: <b>212-962-4688</b>	
	EMAIL: <b>r.munekata@madisonbygroup.com</b>	EMAIL: <b>FR.BUSCEMI@AOL.COM</b>	
MANAGER	NAME: <b>Ryuichi MuneKata</b>	NAME: <b>310-313 Midtown Equities</b>	
	PHONE: <b>917-697-9986</b>	PHONE: <b>212-957-9444</b>	
	EMAIL: <b>r.munekata@madisonbygroup.com</b>	EMAIL: <b>Eastwestreg.HyNYC.COM</b>	
APPLICATION TYPE (Check One)			
<input checked="" type="radio"/> New	Has applicant owned or managed a similar business?	<input checked="" type="radio"/> YES	<input type="radio"/> NO
	What is/was the name and address of establishment?	<b>See Rider</b>	
	What were the dates applicant was involved with this former premise?	<b>currently in operation</b>	
<input type="radio"/> Transfer	What is the prior license # and expiration date?		
	Is applicant making any alterations or operational changes?	<input type="radio"/> YES	<input type="radio"/> NO
	If alterations or operational changes are being made, please describe/list all changes.		
<input type="radio"/> Alteration	What is the current license # and expiration date?		
	Please list/describe the nature of all the changes and attach the plans:		
METHOD OF OPERATION			
TYPE OF ALCOHOL	<input checked="" type="checkbox"/> Liquor/Wine/Beer	<input type="checkbox"/> Beer	<input checked="" type="checkbox"/> Wine & Beer
ESTABLISHMENT TYPE	<input checked="" type="checkbox"/> Restaurant <input type="checkbox"/> Cabaret <input type="checkbox"/> Night Club <input type="checkbox"/> Hotel <input type="checkbox"/> Bar/Tavern <input type="checkbox"/> Catering Establishment <input type="checkbox"/> Adult Entertainment <input type="checkbox"/> Wine Bar <input type="checkbox"/> Dance Club <input type="checkbox"/> Sports Bar <input type="checkbox"/> Club (Fraternal Organization - Members Only)		
Has applicant/owner filed with the SLA? If yes, when? If no, when do you plan to file?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	
Is the 500 Foot Rule applicable? If yes, please attach a diagram of the On-Premise liquor license establishments within a 500 ft. radius of your establishment and the Public Interest Statement.	<input checked="" type="radio"/> YES	<input type="radio"/> NO	
Is the 200 Foot Rule applicable? If yes, please attach a diagram of the schools and houses of worship that trigger the rule.	<input type="radio"/> YES	<input checked="" type="radio"/> NO	
Has applicant/owner(s) read MCB4 Policy Regarding Concentration and Location of Alcoholic-Serving Establishments?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	

# RIDER OF Similar Businesses

DBA: Hide Chan Ramen  
Company Name: MMMSG Inc.  
Address: 248 East 52nd Street 2nd FL New York, NY 10022  
TEL: 212-813-1800

DBA: Totto Ramen Midtown East  
Company Name: New Season Foods Corp.  
Address: 248 East 52nd Street New York, NY 10022  
TEL: 212-421-0052

DBA: Totto Ramen Midtown West  
Company Name: Misoya (NY) Inc.  
Address: 366 West 52nd Street New York, NY 10019  
TEL: 212-582-0052

DBA: Totto Ramen Hell's Kitchen  
Company Name: Ramen Time Inc.  
Address: 464 West 51st Street New York, NY 10019  
TEL: 646-596-9056

**OPERATIONAL DETAILS** (\*Closing time will be when establishment is vacated of all patrons)

HOURS* (Indoor Only)		MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY
	Operation	11:30 AM - 1:00 AM	11:30 AM - 1 AM	11:30 AM - 1 AM	11:30 AM - 1 AM	11:30 AM - 1 AM	11:30 AM - 1 AM	11:30 AM - 1 AM
	Kitchen	11:30 - 12:30 AM	11:30 AM - 12:30 AM	11:30 AM - 12:30 AM	11:30 AM - 12:30 AM	11:30 AM - 12:30 AM	11:30 AM - 12:30 AM	11:30 AM - 12:30 AM
	Music	11:30 AM - 1 AM	11:30 AM - 1 AM	11:30 AM - 1 AM	11:30 AM - 1 AM	11:30 AM - 1 AM	11:30 AM - 1 AM	11:30 AM - 1 AM

If you plan to have music, what type(s)? (Circle all that apply)

BACKGROUND    
  LIVE MUSIC    
  DJ    
  JUKE BOX    
  KARAOKE

**OCCUPANCY**

	Capacity (Certificate of Occupancy)	Maximum # of Persons You Anticipate Occupying Premises (Including Employees)	Number of Tables	Number of Seats	Number of Service Only Bars	Number of Stand-Up Bars	Number of Seats at Stand-Up Bar
INSIDE	60	60	8	40	0	1	7
OUTSIDE (Other than sidewalk café)	0	0	0	0	0	0	0
SIDEWALK CAFÉ	0	0	0	0			

How many floors are there? What is the capacity for each floor?

1 (60)

How frequently will the owner(s) be at the establishment?

Full time

Will you be applying or intending to apply for a cabaret license with DCA? If yes, will there be dancing?	YES	<input checked="" type="radio"/> NO
Will applicant have bottle or table service for beverage alcohol?	YES	<input checked="" type="radio"/> NO
Will you be hosting private, promotional or corporate events?	YES	<input checked="" type="radio"/> NO
Will outside promoters be used on a regular basis? If yes please describe.	YES	<input checked="" type="radio"/> NO
Will you have a security plan? If, yes please attach.	YES	<input checked="" type="radio"/> NO
Will security plan be implemented?	YES	<input checked="" type="radio"/> NO
Will State certified security personnel be used?	YES	<input checked="" type="radio"/> NO
Will New York Nightlife Association and NYPD Best Practices be followed?	YES	<input checked="" type="radio"/> NO
Will applicant be using delivery bicycles? If yes, how many?	YES	<input checked="" type="radio"/> NO
Will delivery bicycles be clearly marked with the name of the restaurant and will staff wear attire clearly noting name as described by NYC Law?	YES	NO N/A
Where will delivery bicycles be stored during the day when not in use?		N/A

12:15 am close for all

(7-7)

LOCATION & ZONING		
Is this a Special District? If yes, is it Clinton, West Chelsea or Hudson Yards?	<input checked="" type="radio"/> YES	<input type="radio"/> NO CLINTON
Does the building have a Certificate of Occupancy ("C of O") or a letter of no objection?	<input checked="" type="radio"/> YES	<input type="radio"/> NO
Is a Public Assembly permit required?	<input type="radio"/> YES	<input checked="" type="radio"/> NO
Are your plans filed with DOB?	<input checked="" type="radio"/> YES	<input type="radio"/> NO

Community Notification/Relations		
<b>NOTIFICATION:</b> List all block associations; tenant associations, co-op boards or condo boards of residential buildings; and community groups that applicant has notified regarding its application. For each please list both the organization and individual you contacted	# 1	West 40 <sup>th</sup> ST BL Assoc (Allison Tupper)
	# 2	West 47/6 <sup>th</sup> ST BL Assoc (Erik FFAE)
	# 3	West 47/48 ST BL (Larry Roberts)
	# 4	West 47/88 ST BL (Kim Boques)
	# 5	W 47/48 ST BLK (Chuck Versalle)
Please provide dates when applicant met with the groups listed above.		upon request
Who was your contact person at each group you met with?		
When did applicant post the notice that was provided?		12/11/15
Where did applicant post the notice that was provided?		window of establishment
Will applicant provide owner cell phone number to neighbors and respond to complaints that arise? Please provide number in space provided.		<input checked="" type="radio"/> YES <input type="radio"/> NO 917-697-9786
Will applicant inform the Community Board office of its job openings and/or provide a hyperlink to applicants jobs webpage?		<input checked="" type="radio"/> YES <input type="radio"/> NO

W 47/48 ST BLK (Steven Riedl)  
 W 47/48 ST BLK (Nancy Royance)  
 West 50/51 ST BLK (Steve Bolida)

**BUILDING DESIGN**

State the name and type of business previously located in the space.				ROOM 53 - Pub			
Has a liquor-licensed establishment previously occupied this space at any time? If yes, please provide the name of the business.		YES	<input checked="" type="radio"/> NO				
Do you plan any changes to the existing façade? If yes, please describe.		<input checked="" type="radio"/> YES	<input checked="" type="radio"/> NO	2/1/20			
Will applicant have a vestibule within the establishment?		<input checked="" type="radio"/> YES	<input checked="" type="radio"/> NO	2/1/20			
Will applicant use a storm enclosure?		YES	<input checked="" type="radio"/> NO				
Will applicant not place any items or obstructions on the sidewalk, for example, sandwich boards, sidewalk signs, freestanding menus and plants, as per the law?		<input checked="" type="radio"/> YES	<input checked="" type="radio"/> NO				
Will applicant comply with the NYC noise code?		<input checked="" type="radio"/> YES	<input checked="" type="radio"/> NO				
Will the establishment have any of the following: (circle all that apply)		FRENCH DOORS		GARAGE DOORS		WINDOWS THAT CAN BE OPENED	
Will applicant close all windows, French doors, garage doors when any music or amplified sound (including televisions) is played inside the establishment?		<input checked="" type="radio"/> YES	<input checked="" type="radio"/> NO	7/1/20			
Will applicant close all windows, French doors, garage doors by 11 PM Friday and Saturday and 10 PM on all other days even if no music or amplified sound is played inside the establishment?		<input checked="" type="radio"/> YES	<input checked="" type="radio"/> NO				
Has applicant obtained an acoustical report from a certified sound engineer to assess potential noise disturbance to the neighboring residents and buildings?		YES	<input checked="" type="radio"/> NO				
Will applicant follow the recommendations of a certified sound engineer to mitigate potential noise disturbance to the neighboring residents and buildings, including placing speakers on the floor of the establishment?		YES	NO	N/A			
Will the kitchen exhaust system extend to the roof?		<input checked="" type="radio"/> YES	<input checked="" type="radio"/> NO				
Will the establishment have an illuminated sign?		<input checked="" type="radio"/> YES	<input checked="" type="radio"/> NO				
Will the establishment have a canopy extending over the sidewalk?		YES	<input checked="" type="radio"/> NO				
Where will the air conditioner be located? What type is it?		ROOF TOP - HVAC					
When was the air conditioner installed?		to be installed					

OUTDOOR ITEMS - OTHER THEN SIDEWALK CAFÉ		
Has the applicant/owner(s) read MCB 4 Rear Yard Rooftop Policy?	YES	NO
Will applicant use any outdoor spaces: rooftop, rear yard, patio, porch, balcony, pavilion, tents, deck or gazebo? If yes, which one(s)?	YES	NO
Are the floorplans for the outdoor space(s) included?	YES	NO
Will applicant close and vacate the outdoor space(s) by 11PM on Friday & Saturday and 10 PM on all other days?	YES	NO
Will the service and consumption of alcohol in any outdoor space only be via seated food service?	YES	NO
Will applicant not allow standing space for patrons to drink or smoke in any outdoor space(s)?	YES	NO
Will there be no amplified music, as per the law?	YES	NO
If amplified sound is played inside the establishment, will windows and doors be closed?	YES	NO
Will applicant agree to post signs outside asking customers to respect the neighbors?	YES	NO
Will applicant agree to train staff to encourage a peaceful environment?	YES	NO
Will applicant provide effective sound control (landscaping enclosure, soundproofing tenants apartments)	YES	NO
Will there be a lighting plan that allows safe usage of the outdoor space without disrupting neighbors?	YES	NO

N/A

NO (7-2)

**OUTDOOR ITEMS – SIDEWALK CAFÉ**

N/A

79

Has the applicant/owner(s) read MCB4 Sidewalk Café Policy?	YES	NO	
Will applicant be applying for a sidewalk café now or in the future?	YES	NO	
Is applicant in this application seeking to include a sidewalk café in its liquor license?	YES	NO	
If yes, has applicant submitted an application and plans to NYC Dept. of Consumer Affairs? Please attach application and plans.	YES	NO	
Will applicant close and vacate the sidewalk café by 11 PM on Friday & Saturday and 10 PM on all other days?	YES	NO	
Will applicant be serving alcohol in the sidewalk café? If so, will you have waiter service?	YES	NO	
Will the café have a 3 ft. wide serving aisle running the entire length of the sidewalk café?	YES	NO	
Will applicant mark the perimeter of the café on the sidewalk?	YES	NO	
Will the service and consumption of alcohol in the sidewalk café only be via seated food service?	YES	NO	
Will the sidewalk café not provide standing space for drinking or smoking?	YES	NO	
Will applicant use any portable natural gas heaters? If so, do you have the requisite approvals from DOB & the Fire Department?	YES	NO	
Will applicant have a lighting plan that will allow safe usage of the outdoor space without disrupting neighbors?	YES	NO	
Will all furniture, plants and barricades be stored inside between the evening closing hours and the morning opening hours?	YES	NO	
Will all furniture be stored inside between December 21 <sup>st</sup> and March 21 <sup>st</sup> , and any other day when it rains or snows?	YES	NO	
Will applicant use umbrellas?	YES	NO	
If construction or construction protection has reduced the sidewalk width, will applicant always maintain an 8 foot clear path of sidewalk between the perimeter of the café and the closes obstruction including construction barricades?	YES	NO	

**ADDITIONAL STIPULATIONS: (Office Use Only)**

- This application is for a restaurant wine & beer license
- Applicant will take steps to minimize lines outside the establishment. If a line is formed, it will be monitored by the applicant (see attached email from Ryuichi Munekata on 1/20/16)
- Will hire carting company to pickup garbage seven days a week
- Sidewalk will be cleaned upon closing of establishment each night and before 8 a.m. each morning
- Hours of operation: 1130 a.m. - 1215 p.m. seven days a week
- Kitchen hours: 1130 a.m. - 1215 p.m. seven days a week
- Music hours: 1130 a.m. - 1215 p.m. seven days a week

***To the extent any additional stipulation on pages 7 and 8 of this application conflicts with any response on pages 1 – 6 of this application, the stipulations on pages 7 and 8 control.***



## Edamame: green soybeans

- 1. Sea Salt 3.5
- 2. Garlic Butter 4.5



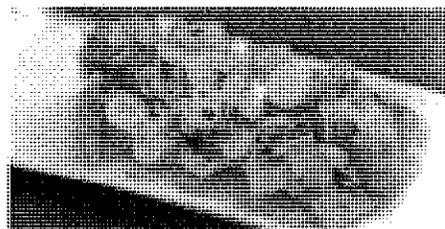
Gyoza w/ cheese

## Gyoza

(Panfried Pork Dumpling)

(5pcs/10pcs)

- 1. Regular 5 / 8
- 2. Cheese 6 / 10
- 3. Grated radish, scallion w/ponzu sauce 7 / 12
- 4. Shrimp & Pork w/ sweet chilli sauce 8 / 14



Gyoza w/ ponzu

## Buns

- 1. Pork 4 / 8
- 2. Spicy Pork 4 / 8

(1pc/2pcs)



Gyoza w/ shrimp & pork

## Fried Chicken

6pcs \$7



Spicy Pork Buns (2pcs)

## Takoyaki

(Round pastry stuffed with diced octopus)

6pcs \$6



Fried Chicken

## Teriyaki chicken Avocado-Don

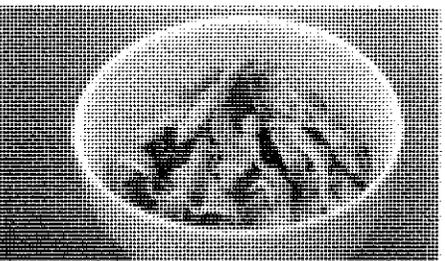
6.5



Takoyaki

## White rice

2



Teriyaki Chicken Avocado-Don

## Ramen

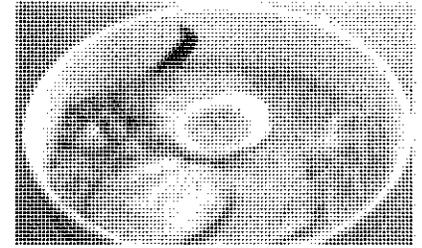
Choose your noodle & firmness  
 Noodle :Wavy/Straight  
 Firmness:Very Firm/ Firm/ Med/ Soft

## Pork Broth

\* **1.Miso Ramen (Add \$1 for Spicy option)**

Sliced pork (2pcs), scallion, onion, bean sprouts, corn, boiled egg

13

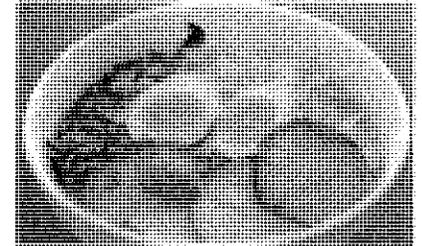


Miso Ramen

**2.Deluxe Ramen**

Sliced pork(3pcs),boiled egg (2pcs), kikurage mushroom, scallion, onion, bean sprouts, cod roe

15

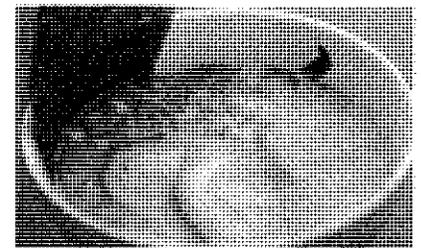


Delux Ramen

\* **3.Kogashi Ramen**

Sliced pork(2pcs), scallion, onion, boiled egg

13



Kogashi Ramen

\* **4.Spicy Garlic Ramen** 🌶️ \*spicy ramen is also available

Sliced pork(2pcs), scallion, kikurage mushroom, original spicy garlic sauce

12

**5.Classic Ramen since 1963**

Sliced pork (2pcs), scallion, kikurage mushroom

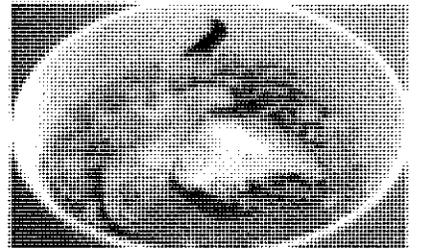
10

## Special Broth

\* **1.Red Dragon (Spicy)** 🌶️🌶️🌶️

Bonito fish & vegetable based broth, miso, bean sprouts, nira leeks, garlic chip, red pepper, ground pork

15



Spicy Garlic Ramen

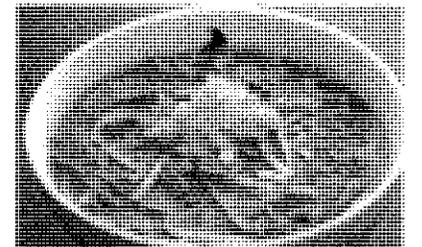
\* **2. Bonito Dashi Ramen**

Bonito fish& vegetable based broth, seared soy sauce, sliced pork(2pcs),scallion, bean sprouts, garlic paste

13

**3. Vegetable Dashi Ramen(Add \$1 for spicy option)**

Konbu seaweed & shiitake mushroom based soup with corn, cauliflower, 14 avocado, garlic chip, red cabbage, red pepper, yellow pepper, lime, pepper yuzu paste, mix green, sesame oil



Red Dragon

## Topping

Kaedama (Extra Noodle) +2

Sliced Pork (3pcs) +3.5

Boiled Egg +2

Poached Egg +1.5

Bamboo Shoot +2

Kikurage +1

Scallion +1

Bean sprouts +1

Garlic Paste +1

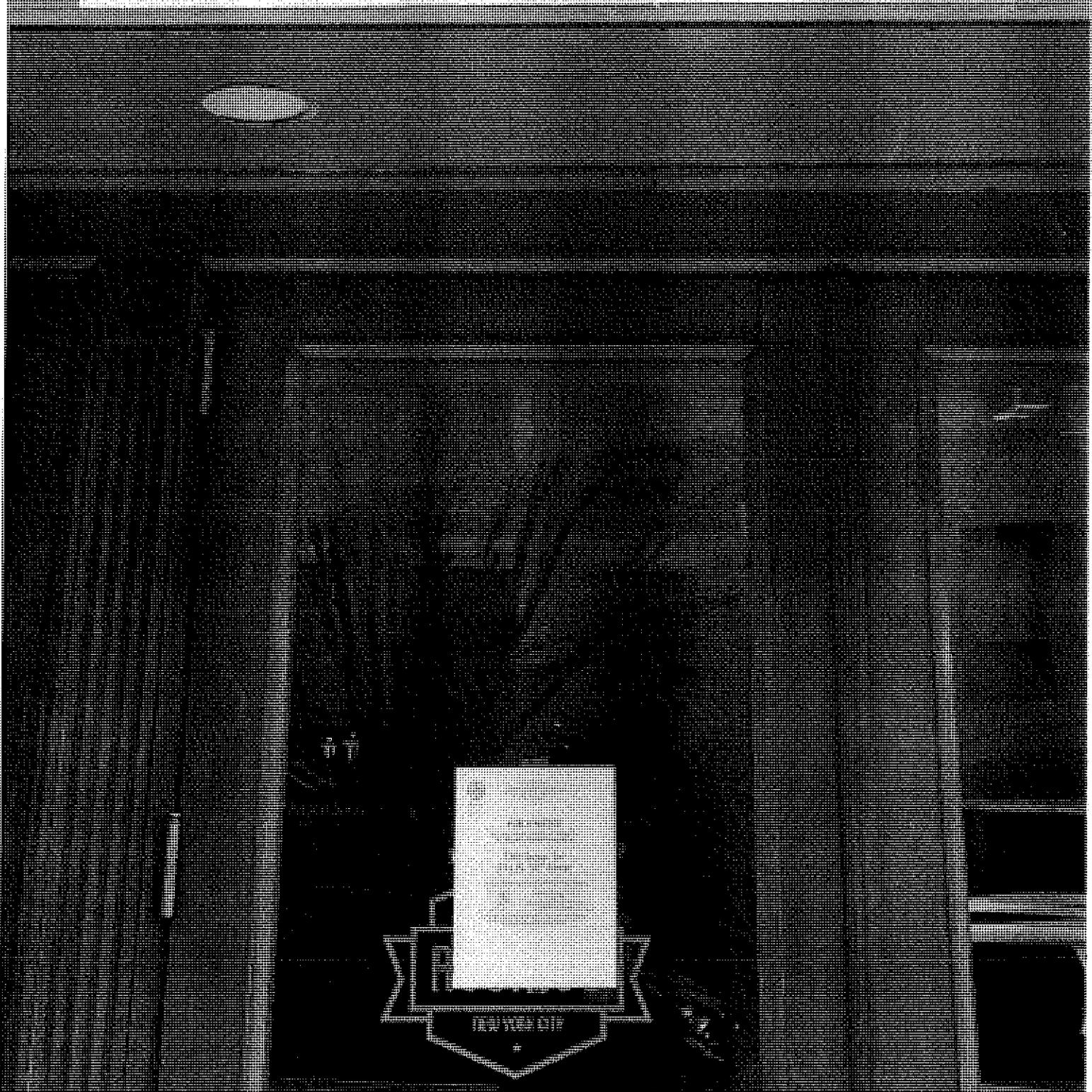
Garlic Chip +1

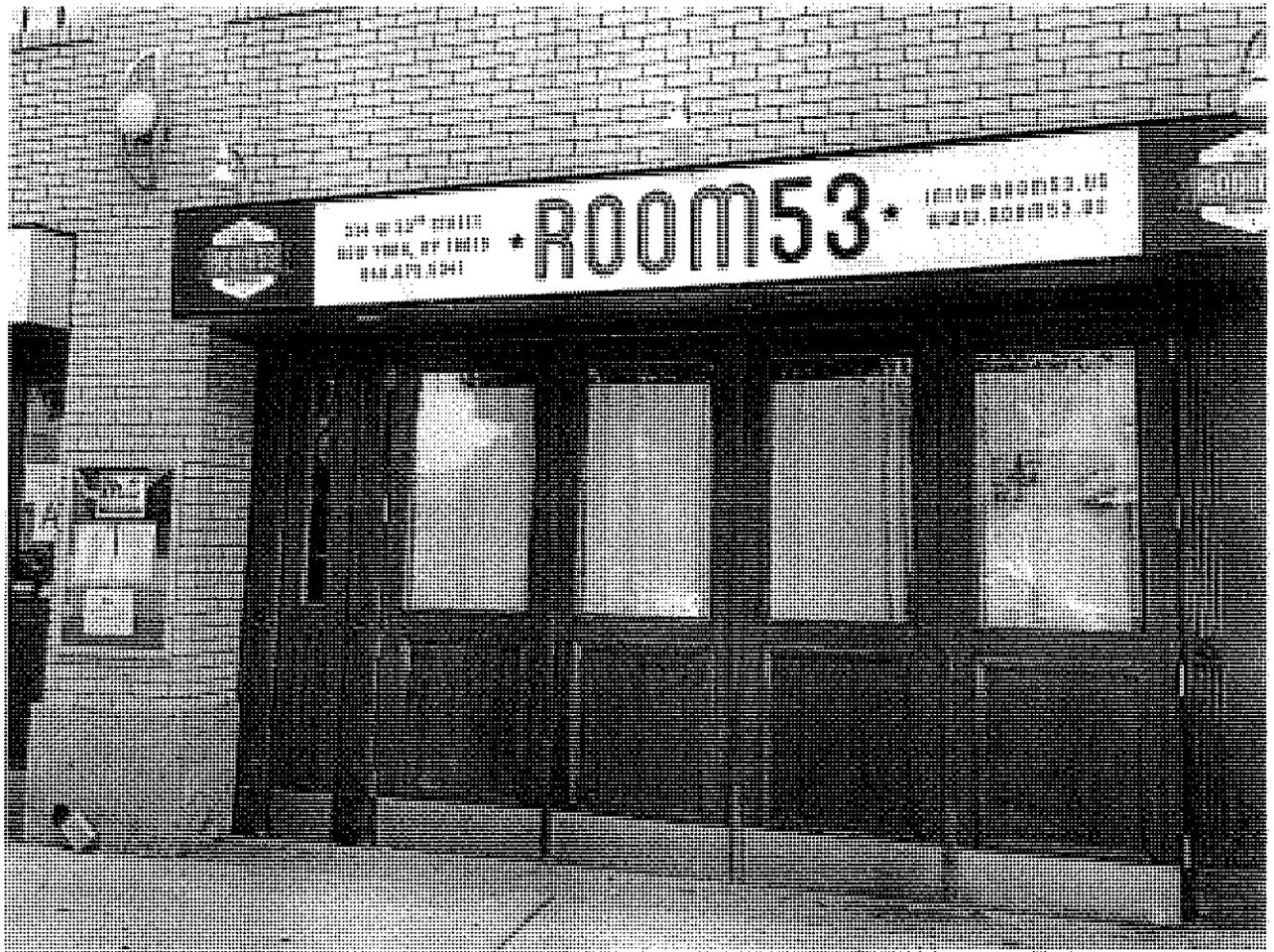
Spicy Red Sauce +1.5



Bonito Ramen

314 W 53<sup>RD</sup> STREET  
NEW YORK, NY 10019  
646.675.5341





1 **Business License & Permits Committee**

Item #: 15

2  
3 February 3, 2016

4  
5 Vincent G. Bradley  
6 Chairman  
7 New York State Liquor Authority  
8 80 S. Swan Street, 9<sup>th</sup> Floor  
9 Albany, New York 12210

10  
11 **Re: Whitmans Westside LLC**  
12 **d/b/a Whitmans**  
13 *500 W 30<sup>th</sup> Street (10/11)*

14  
15 Dear Chairman Bradley:

16  
17 Manhattan Community Board 4 (MCB4) recommends **denial** of a new On-Premise Liquor License  
18 application for Whitmans Westside LLC. d/b/a Whitmans – 500 W 30<sup>th</sup> Street (10/11), **unless** the  
19 attached stipulations, agreed to and signed by the applicant, are part of the method of operation for this  
20 establishment with a capacity of 70, 25 tables, 50 seats, and 1 stand-up bar with 10 seats.

21  
22  
23 Sincerely,

24  
25  
26 Delores Rubin  
Chair

Burt Lazarin  
Co-Chair  
Business License & Permits  
Committee

Frank Holozubiec  
Co-Chair  
Business License & Permits  
Committee

27  
28

# Manhattan Community Board 4

(All Fields Must Be Completed)

## Liquor License Stipulations Application

<b>CORPORATION NAME</b>		<b>DOING BUSINESS AS (DBA)</b>	
Whitmans Westside LLC		Whitmans	
<b>STREET ADDRESS</b>		<b>CROSS STREETS</b>	<b>ZIP CODE</b>
500 West 30th Street		10th and 11th Avenues	10001
<b>OWNER</b> <i>(Attach a list of all the people that will be associated/listed with the license)</i>	<b>NAME:</b> Larry Kramer	<b>ATTORNEY/ REPRESENTATIVE</b>	<b>NAME:</b> Robert S Bookman
	<b>PHONE:</b> 212-228-8011		<b>PHONE:</b> 212-513-1988
	<b>EMAIL:</b> whitmansrestaurant@gmail.com		<b>EMAIL:</b> rbookman@pandblegal.com
<b>MANAGER</b>	<b>NAME:</b>	<b>LANDLORD</b>	<b>NAME:</b> Will Grosvenor
	<b>PHONE:</b>		<b>PHONE:</b> 212-401-7684
	<b>EMAIL:</b>		<b>EMAIL:</b>
<b>APPLICATION TYPE (Check One)</b>			
<input checked="" type="radio"/> <b>New</b>	Has applicant owned or managed a similar business?	<input checked="" type="radio"/> YES	<input type="radio"/> NO
	What is/was the name and address of establishment?	1. Whitmans - 700 8th Avenue, Booth#3 2. Whitmans - 406 E 9th Street 3. Hecho en DUMBO/King Cross - 354 3rd Avenue	
	What were the dates applicant was involved with this former premise?	1. March 2015 - Present 2. June 2010 - Present 3. December 2008 - Present	
<input type="radio"/> <b>Transfer</b>	What is the prior license # and expiration date?		
	is applicant making any alterations or operational changes?	<input type="radio"/> YES	<input type="radio"/> NO
	<i>If alterations or operational changes are being made, please describe/list all changes.</i>		
<input type="radio"/> <b>Alteration</b>	What is the current license # and expiration date?		
	<i>Please list/describe the nature of all the changes and attach the plans:</i>		
<b>METHOD OF OPERATION</b>			
<b>TYPE OF ALCOHOL</b>	<input checked="" type="radio"/> Liquor/Wine/Beer <input type="radio"/> Beer <input type="radio"/> Wine & Beer		
<b>ESTABLISHMENT TYPE</b>	<input checked="" type="radio"/> Restaurant <input type="radio"/> Cabaret <input type="radio"/> Night Club <input type="radio"/> Hotel <input type="radio"/> Bar/Tavern <input type="radio"/> Catering Establishment <input type="radio"/> Adult Entertainment <input type="radio"/> Wine Bar <input type="radio"/> Dance Club <input type="radio"/> Sports Bar <input type="radio"/> Club (Fraternal Organization – Members Only)		
Has applicant/owner filed with the SLA? If yes, when? If no, when do you plan to file?	YES	<input checked="" type="radio"/> NO	
Is the 500 Foot Rule applicable? If yes, please attach a diagram of the On-Premise liquor license establishments within a 500 ft. radius of your establishment and the Public Interest Statement.	YES	<input checked="" type="radio"/> NO	
Is the 200 Foot Rule applicable? If yes, please attach a diagram of the schools and houses of worship that trigger the rule.	YES	<input checked="" type="radio"/> NO	
Has applicant/owner(s) read MCB4 Policy Regarding Concentration and Location of Alcoholic-Serving Establishments?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	

**OPERATIONAL DETAILS** (\*Closing time will be when establishment is vacated of all patrons)

HOURS* <i>(Indoor Only)</i>		MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY
	Operation	10am - 12am	10am-1am	10am-2am	10am-2am	10am-2am	10am-2am	10am-12am
	Kitchen	9am-12am	9am-1am	9am-2am	9am-2am	9am-2am	9am-2am	9am-12am
	Music	11am-12am	11am-1am	11am-2am	11am-2am	11am-2am	11am-2am	11am-12am

If you plan to have music, what type(s)?  
(Circle all that apply)

BACKGROUND

LIVE MUSIC

DJ

JUKE BOX

KARAOKE

**OCCUPANCY**

	Capacity (Certificate of Occupancy)	Maximum # of Persons You Anticipate Occupying Premises (Including Employees)	Number of Tables	Number of Seats	Number of Service Only Bars	Number of Stand-Up Bars	Number of Seats at Stand-Up Bar
<b>INSIDE</b>		70	25	50	0	1	10
<b>OUTSIDE</b> <i>(Other than sidewalk café)</i>		N/A	N/A	N/A	N/A	N/A	N/A
<b>SIDEWALK CAFÉ</b>		N/A	N/A	N/A	N/A		

How many floors are there? What is the capacity for each floor?

1st Floor - 70

How frequently will the owner(s) be at the establishment?

As much as possible

Will you be applying or intending to apply for a cabaret license with DCA? If yes, will there be dancing?

YES

NO

Will applicant have bottle or table service for beverage alcohol?

YES

NO

Will you be hosting private, promotional or corporate events?

YES

NO

Will outside promoters be used on a regular basis? If yes please describe.

YES

NO

Will you have a security plan? If, yes please attach.

YES

NO

Will security plan be implemented?

YES

NO

Will State certified security personnel be used?

YES

NO

Will New York Nightlife Association and NYPD Best Practices be followed?

YES

NO

N/A

Will applicant be using delivery bicycles? If yes, how many?

YES

NO

Will delivery bicycles be clearly marked with the name of the restaurant and will staff wear attire clearly noting name as described by NYC Law?

YES

NO

Where will delivery bicycles be stored during the day when not in use?

In garage of building

LOCATION & ZONING			
Is this a Special District? If yes, is it Clinton, West Chelsea or Hudson Yards?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	Hudson Yards
Does the building have a Certificate of Occupancy ("C of O") or a letter of no objection?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	
Is a Public Assembly permit required?	<input type="radio"/> YES	<input checked="" type="radio"/> NO	
Are your plans filed with DOB?	<input type="radio"/> YES	<input checked="" type="radio"/> NO	

Community Notification/Relations				
<b>NOTIFICATION:</b> List all block associations; tenant associations, co-op boards or condo boards of residential buildings; and community groups that applicant has notified regarding its application. For each please list both the organization and individual you contacted	# 1	HKNA Association - Kathleen Treat		
	# 2			
	# 3			
	# 4			
	# 5			
Please provide dates when applicant met with the groups listed above.		contacted by email on 12/14/15		
Who was your contact person at each group you met with?		Kathleen Treat		
When did applicant post the notice that was provided?				
Where did applicant post the notice that was provided?				
Will applicant provide owner cell phone number to neighbors and respond to complaints that arise? Please provide number in space provided.		<input type="radio"/> YES	<input checked="" type="radio"/> NO	TBD
Will applicant inform the Community Board office of its job openings and/or provide a hyperlink to applicants jobs webpage?		<input type="radio"/> YES	<input checked="" type="radio"/> NO	TBD

<b>BUILDING DESIGN</b>			
State the name and type of business previously located in the space.			
Has a liquor-licensed establishment previously occupied this space at any time? If yes, please provide the name of the business.	YES	<input checked="" type="radio"/> NO	
Do you plan any changes to the existing façade? If yes, please describe.	YES	<input checked="" type="radio"/> NO	
Will applicant have a vestibule within the establishment?	YES	<input checked="" type="radio"/> NO	
Will applicant use a storm enclosure?	<input checked="" type="radio"/> YES	NO	in winter for cold weather
Will applicant not place any items or obstructions on the sidewalk, for example, sandwich boards, sidewalk signs, freestanding menus and plants, as per the law?	<input checked="" type="radio"/> YES	NO	
Will applicant comply with the NYC noise code?	<input checked="" type="radio"/> YES	NO	
Will the establishment have any of the following: (circle all that apply)	FRENCH DOORS		GARAGE DOORS
	WINDOWS THAT CAN BE OPENED		
Will applicant close all windows, French doors, garage doors when any music or amplified sound (including televisions) is played inside the establishment?	<input checked="" type="radio"/> YES	NO	
Will applicant close all windows, French doors, garage doors by 11 PM Friday and Saturday and 10 PM on all other days even if no music or amplified sound is played inside the establishment?	<input checked="" type="radio"/> YES	NO	
Has applicant obtained an acoustical report from a certified sound engineer to assess potential noise disturbance to the neighboring residents and buildings?	YES	<input checked="" type="radio"/> NO	
Will applicant follow the recommendations of a certified sound engineer to mitigate potential noise disturbance to the neighboring residents and buildings, including placing speakers on the floor of the establishment?	<input checked="" type="radio"/> YES	NO	
Will the kitchen exhaust system extend to the roof?	YES	<input checked="" type="radio"/> NO	Preciptors
Will the establishment have an illuminated sign?	<input checked="" type="radio"/> YES	NO	
Will the establishment have a canopy extending over the sidewalk?	YES	<input checked="" type="radio"/> NO	
Where will the air conditioner be located? What type is it?	Inside		
When was the air conditioner installed?	New		

*LONG*

**OUTDOOR ITEMS - OTHER THEN SIDEWALK CAFÉ**

Has the applicant/owner(s) read MCB 4 Rear Yard Rooftop Policy?	<input checked="" type="radio"/>	NO	
Will applicant use any outdoor spaces: rooftop, rear yard, patio, porch, balcony, pavilion, tents, deck or gazebo? If yes, which one(s)?	YES	<input checked="" type="radio"/>	
Are the floorplans for the outdoor space(s) included?	YES	<input checked="" type="radio"/>	
Will applicant close and vacate the outdoor space(s) by 11PM on Friday & Saturday and 10 PM on all other days?	YES	NO	N/A
Will the service and consumption of alcohol in any outdoor space only be via seated food service?	YES	NO	N/A
Will applicant not allow standing space for patrons to drink or smoke in any outdoor space(s)?	YES	NO	N/A
Will there be no amplified music, as per the law?	YES	NO	N/A
If amplified sound is played inside the establishment, will windows and doors be closed?	YES	NO	N/A
Will applicant agree to post signs outside asking customers to respect the neighbors'?	YES	NO	N/A
Will applicant agree to train staff to encourage a peaceful environment?	YES	NO	N/A
Will applicant provide effective sound control (landscaping enclosure, soundproofing tenants apartments)	YES	NO	N/A
Will there be a lighting plan that allows safe usage of the outdoor space without disrupting neighbors?	YES	NO	N/A

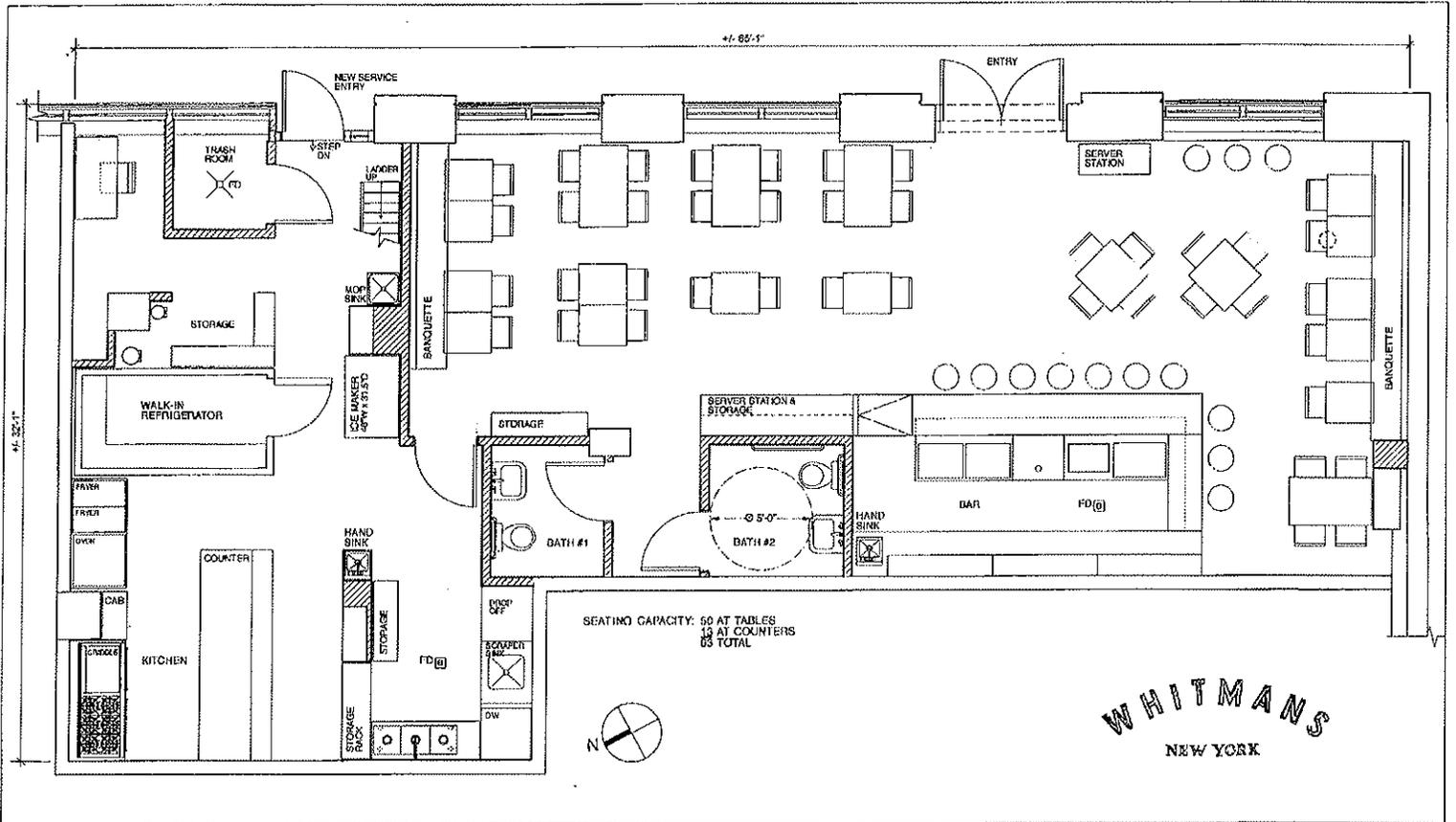
**OUTDOOR ITEMS – SIDEWALK CAFÉ**

Has the applicant/owner(s) read MCB4 Sidewalk Café Policy?	YES	<input checked="" type="radio"/>	
Will applicant be applying for a sidewalk café now or in the future?	YES	<input type="radio"/>	NO <i>AS OF 10/1/18</i> <i>AS OF 10/1/18</i> <i>LSK</i>
Is applicant in this application seeking to include a sidewalk café in its liquor license?	YES	<input checked="" type="radio"/>	
If yes, has applicant submitted an application and plans to NYC Dept. of Consumer Affairs? Please attach application and plans.	YES	NO	N/A
Will applicant close and vacate the sidewalk café by 11 PM on Friday & Saturday and 10 PM on all other days?	YES	NO	N/A
Will applicant be serving alcohol in the sidewalk café? If so, will you have waiter service?	YES	NO	N/A
Will the café have a 3 ft. wide serving aisle running the entire length of the sidewalk café?	YES	NO	N/A
Will applicant mark the perimeter of the café on the sidewalk?	YES	NO	N/A
Will the service and consumption of alcohol in the sidewalk café only be via seated food service?	YES	NO	N/A
Will the sidewalk café not provide standing space for drinking or smoking?	YES	NO	N/A
Will applicant use any portable natural gas heaters? If so, do you have the requisite approvals from DOB & the Fire Department?	YES	NO	N/A
Will applicant have a lighting plan that will allow safe usage of the outdoor space without disrupting neighbors?	YES	NO	N/A
Will all furniture, plants and barricades be stored inside between the evening closing hours and the morning opening hours?	YES	NO	N/A
Will all furniture be stored inside between December 21 <sup>st</sup> and March 21 <sup>st</sup> , and any other day when it rains or snows?	YES	NO	N/A
Will applicant use umbrellas?	YES	NO	N/A
If construction or construction protection has reduced the sidewalk width, will applicant always maintain an 8 foot clear path of sidewalk between the perimeter of the café and the closes obstruction including construction barricades?	YES	NO	N/A

ADDITIONAL STIPULATIONS: (Office Use Only)

- ANY SIGN ENCLASURE WILL EXTEND  
NO MORE THAN 18" FASW  
BUILDING FACADE

*To the extent any additional stipulation on pages 7 and 8 of this application conflicts with any response on pages 1 - 6 of this application, the stipulations on pages 7 and 8 control.*



ARCHITECT:  
**SHADOW ARCHITECTS**  
 SHADOW ARCHITECT, P.A.  
 110 W 23RD STREET #404, NEW YORK, NY 10011  
 212.233.3710 TEL. 212.858.0099 FAX  
 WWW.SHADOWARCHITECTS.COM

WHITMANS RESTAURANT & BAR  
 500 WEST 30TH STREET, GROUND FL.  
 NEW YORK, NY 10001

CLIENT:  
 WHITMANS WESTSIDE LLC  
 DBA WHITMANS

DATE: 08.17.15  
 PROJ. #: 1425-1  
 SCALE: NOT TO SCALE

SCHEMATIC  
 PROPOSED  
 FLOOR PLAN

# WHITMANS

NEW YORK  
406 East 9th St.  
(212) 228-8011

## STARTERS

### WEDGE SALAD 12\$ 6\$

iceberg lettuce, house-made blue cheese dressing, applewood smoked bacon, croutons

### KALE SALAD 12\$ 7\$

kale, golden raisins, shallots, parmesan cheese, lemon dressing, croutons

### LOCAL BEER SAUSAGE 12\$ 7\$

served with spicy mustard and beer-soaked caramelized onions

### BOWL OF LOCAL PICKLES 12\$ 4\$

### FRIED PICKLES 12\$ 5\$

## SANDWICHES

### BLT 12\$ 7\$

applewood smoked bacon, lettuce, tomato, special sauce, on Blue Ribbon pullman bread

### UPSTATE BURGER 12\$ 8\$

beef short rib burger, seared onion, bibb lettuce, tomato, new pickles, special sauce, on potato bun

### THE HOUND 12\$ 12\$

applewood smoked bacon infused patty, arugula, smoked gruyere, potato crisps, on potato bun

### EAST VILLI CHEESE STEAK 12\$ 12\$

chip steak, sautéed onions, melted cheese, on toasted hoagie roll, served with fries

### JUICY LUCY 12\$ 12\$

beef short rib blend stuffed with pimento cheese; caramelized onion, bibb lettuce, tomato, spicy pickles, sauce, on sesame bun

### BLUICY 12\$ 12\$

beef short rib blend stuffed with crumbled blue cheese; red onion, arugula, tomato, pickles, sauce, on sesame bun

### SPICY PATTY 12\$ 12\$

short rib and brisket blend patty blended with habanero, jalapeño, and serrano peppers; avocado, arugula, pickled red onion, on sesame bun

### THE MANGOLD 12\$ 12\$

grilled beef brisket blend, melted cheddar, red onions, horseradish cream sauce on toasted sesame seed bun

### PATTY MELT 12\$ 12\$

short rib patty, smoked gruyere, cheddar, american cheese, Blue Ribbon pullman bread, served with chips and a pickle

### BACON, EGG & CHEESE 12\$ 10\$

beef short rib burger, applewood smoked bacon, egg, american cheese, on potato bun

### PB&B BURGER 12\$ 9\$

beef short rib blend, peanut butter, applewood smoked bacon, on potato bun

### TURKEY BURGER 12\$ 12\$

ground turkey with minced shallots cooked in sesame oil; avocado, sprouts, cilantro mayo, on toasted sesame bun

### GRILLED CHICKEN CLUB 12\$ 11\$

grilled free-range chicken cutlet, applewood smoked bacon, bibb lettuce, tomato, pickles, special sauce, on toasted sesame bun, served with chips or crack kale

### MAMAS BOY 12\$ 12\$

pulled free-range chicken, coffee bbq sauce, fennel-jalapeño slaw, on Blue Ribbon pullman bread, served with chips or crack kale

### SUCCOTASH MAIDE-RITE 12\$ 11\$

cumin roasted organic carrots, fresh corn, edamame, poblano, cilantro, avocado, on Blue Ribbon pullman bread, served with chips or crack kale

### CHICKEN ON GREENS 12\$ 11\$

grilled free-range chicken broast, served on a bed of sautéed kale or baby arugula, parmesan cheese, lemon-oil dressing

### GRILLED CHEESE 12\$ 7\$

smoked gruyere, cheddar, american cheese, Blue Ribbon pullman bread, served with pickle and house-made chips

## DESSERT

### ORGANIC FRESH-BAKED COOKIES AND MILK 12\$ 6\$

## SIDES

### FRIES 12\$ 4\$

### BLUE CHEESE FRIES 12\$ 5\$

### SWEET POTATO FRIES 12\$ 5\$

### ORGANIC POTATO CHIPS 12\$ 4\$

### CRACK KALE 12\$ 4\$

### SAUTÉED KALE 12\$ 5\$

### SAUTÉED CORN 12\$ 5\$

### SUCCOTASH 12\$ 5\$

### SEASONAL VEGETABLES

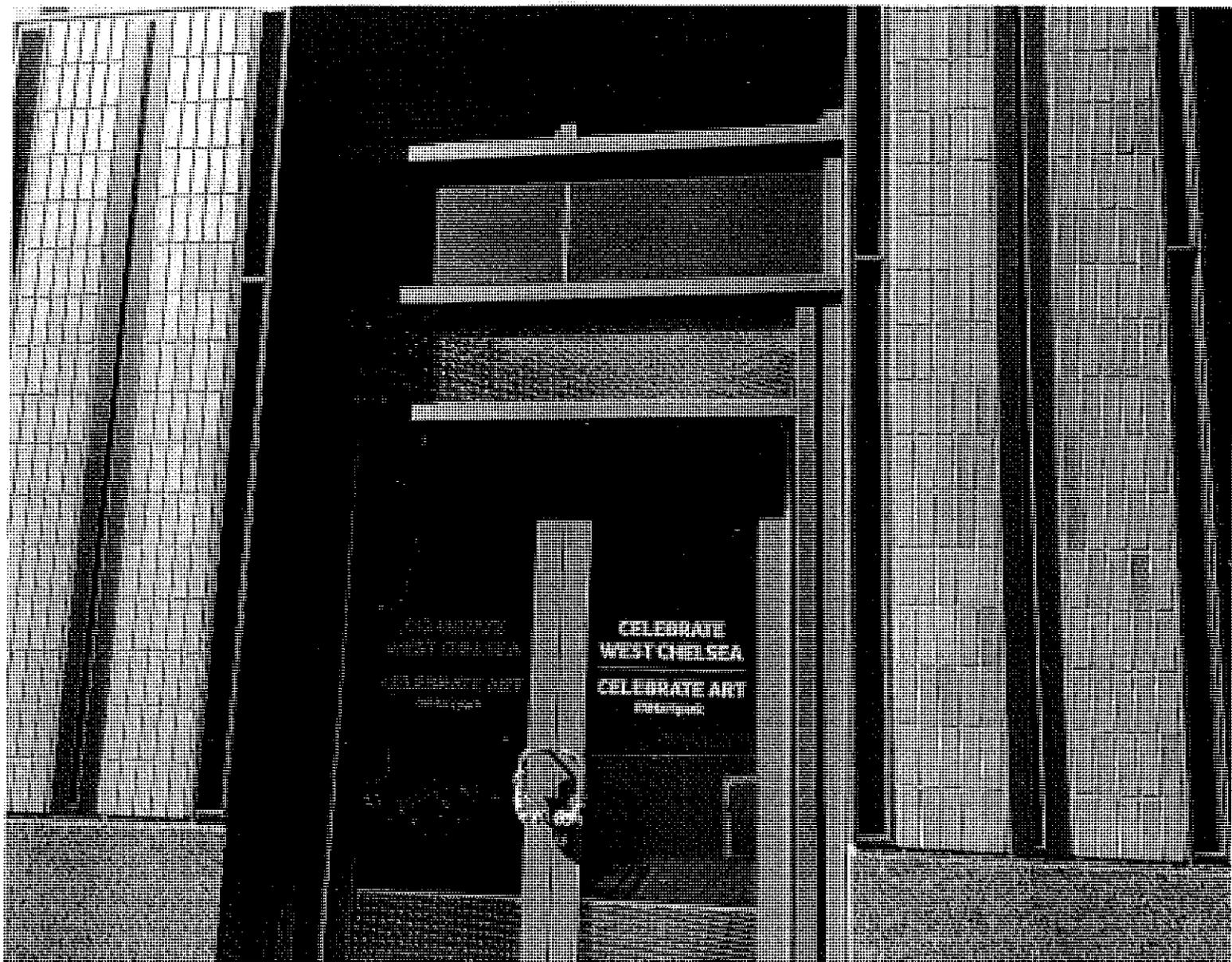
## ADD TO ANYTHING

2\$

bacon  
avocado  
sautéed mushrooms  
fried egg  
smoked gruyere  
pimento

1\$

jalapeño  
american cheese  
swiss cheese  
cheddar  
blue cheese  
poblano



CELEBRATE  
WEST CHELSEA  
CELEBRATE ART  
PROGRAM

CELEBRATE  
WEST CHELSEA  
CELEBRATE ART  
PROGRAM