



THE CITY OF NEW YORK
 MANHATTAN COMMUNITY BOARD NO. 3
 59 East 4th Street - New York, NY 10003
 Phone: (212) 533-5300 - Fax: (212) 533-3659
 www.cb3manhattan.org - info@cb3manhattan.org

Dominic Pisciotta, Board Chair

Susan Stetzer, District Manager

Community Board 3 Liquor License Application Questionnaire

Please complete and return (with requested diagram) to the Community Board office by fax or email. In addition, bring **6 copies (double sided) plus supporting material requested to the meeting.** Failure to complete and return this form on time will result in your item being placed at the end of the agenda. **Application must be complete to be heard, including petitions and all items on check list below. Use N/A for answer if appropriate.**

Conspicuously display the enclosed posters on the outside of your establishment for 7 days prior to the meeting. Bring a photo with a newspaper showing date as proof of the posting.

Check which you are applying for: new liquor license upgrade of an existing liquor license
 alteration of an existing liquor license sale of assets of existing liquor licensed business

If applying for transfer, you must bring letter from current owner confirming that you are buying business.

Type of license: OP Beer/Wine Liquor Is location currently licensed? Yes No

If alteration, describe nature of alteration: 2nd Floor (Private Parties) 3rd Fl. Additional
Additional Svc. Bar Bar

Previous or current use of the location: Restaurant

Corporation and trade name of current/previous license: 93 Ludlow ST. INC

APPLICANT:

Name of applicant and all principals: 93 Ludlow ST. INC.
Tomas Dyskiewicz

Trade name (DBA): _____

Premises address: 95 Delancy ST NY NY 10002

Between what streets: Ludlow + Orchard ST

PREMISES:

Type of building and number of floors: (K-2 Fl Stone Blds) Basement Enclosed Roof top

Prior use of premises: Retail

Any outside area or sidewalk cafe used for the sale or consumption of alcoholic beverages? (includes roof & yard) Yes No If Yes, describe and show on diagram: Roof TOP (enclosed)

Does premises have a valid Certificate of Occupancy and all appropriate permits? Yes No Letter 3

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

Zoning designation: C6-2A Maximum number of persons that can legally occupy the premises? 2nd FL Number of tables? 10 Number of seats at tables? 40 seats

BARS: 3rd FL. (enclosed) 25 TABLES 100 seats
1st FL. - FLOOR - 12 TABLES 48 seats.

How many *stand-up bars/ bar seats are located on the premises (and how many seats)? 1st Floor 3rd Floor

How many service bars? (1) 2nd Floor (1) 3rd Floor

Describe all bars (length, shape and location): 2nd FLR. service bar 17' | 3rd FLR. 27'
1st FLR 25'

Any food counters? Yes No If Yes, describe: _____

* A **stand up bar** is any bar or counter (whether seating or not) over which a member of the public can order, pay for and receive an alcoholic beverage.

KITCHEN:

Does premises have a full kitchen or food preparation area? (If any, show on diagram)

Is food available for sale? Yes No If yes, describe type of food and submit a menu (attached)

Spanish Restaurant - TAPAS

PROPOSED METHOD OF OPERATION:

What type of establishment will this be? (i.e.: restaurant, tavern, sports bar, etc.) _____

Restaurant

Will any other business besides food or alcohol service be conducted at said premises? Yes No

If yes, details: _____

What are the proposed days/hours of operation? (Specify days and hours each day) MON-SUN

2:00 PM TO 4:00 AM

Will the business employ a manager? Yes No

How many employees? 27 employees

Will there be security personnel? Yes No (If Yes, how many?) 3 per night / 5 (Five) weekend.

Do you have or plan to install French doors, accordion doors, or windows? none of these

Will there be TV's? Yes No (If Yes, how many?) _____

If there are block associations or tenant associations in the immediate vicinity of your location, you must contact them. Please attach proof (copies of letters and poster) that you have advised these groups of your application. Petitions should clearly state the name, address, license for which you are applying, and the hours and method of operation of your establishment at the top of each page. (Attach additional sheets of paper as necessary). You may contact the Community Board at info@cb3manhattan.org for any contact information that is on file.

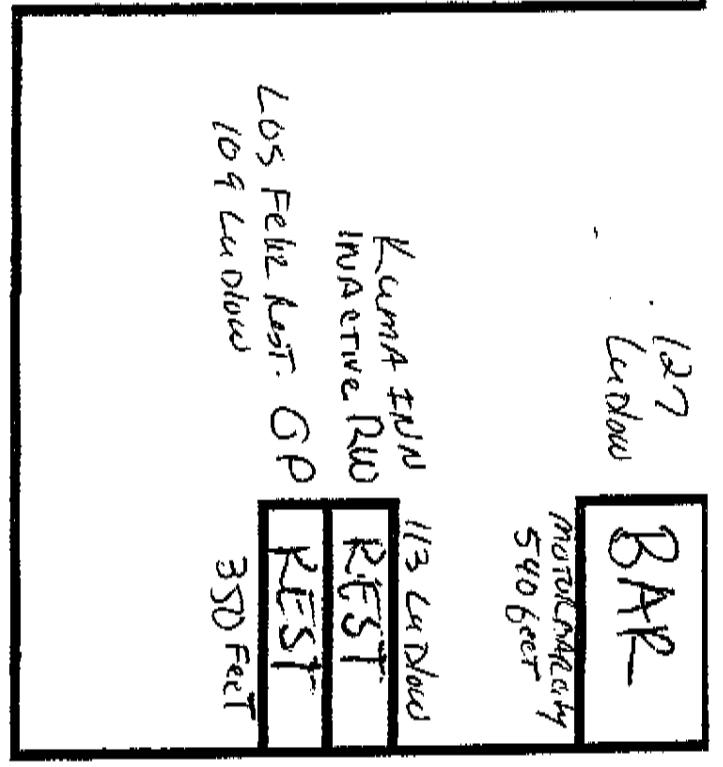
INFORMATION REGARDING NEARBY LOCATIONS:

Premises is within a 500 foot radius of three or more establishments with OP license. Yes No

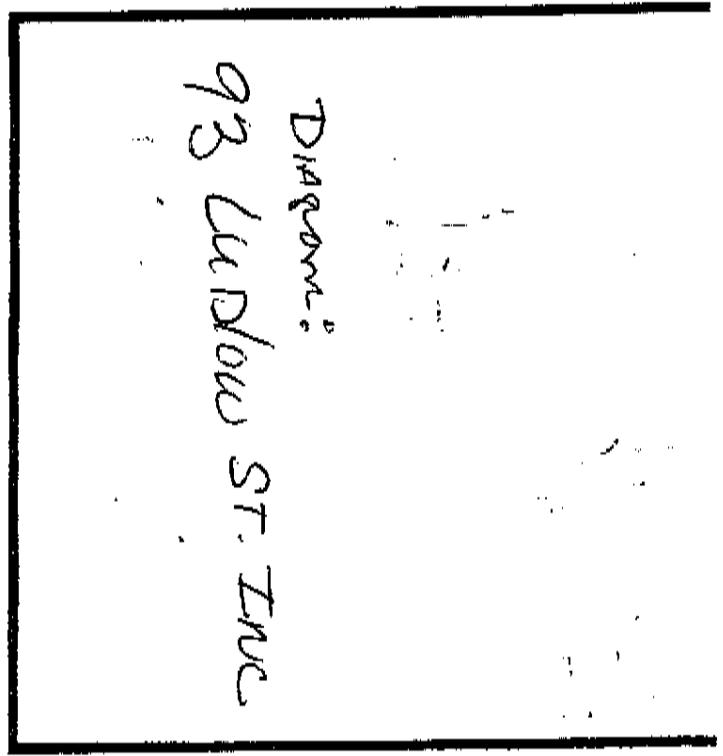
Premises is within 200 feet of any school or place of worship? Yes No

If there is a school place of worship within 200 feet of your premises on the same block, submit a block plot diagram or area map showing its location in proximity to your applicant premises (8 1/2" x 11") and indicate the distance and name and address.

ORCHARD :

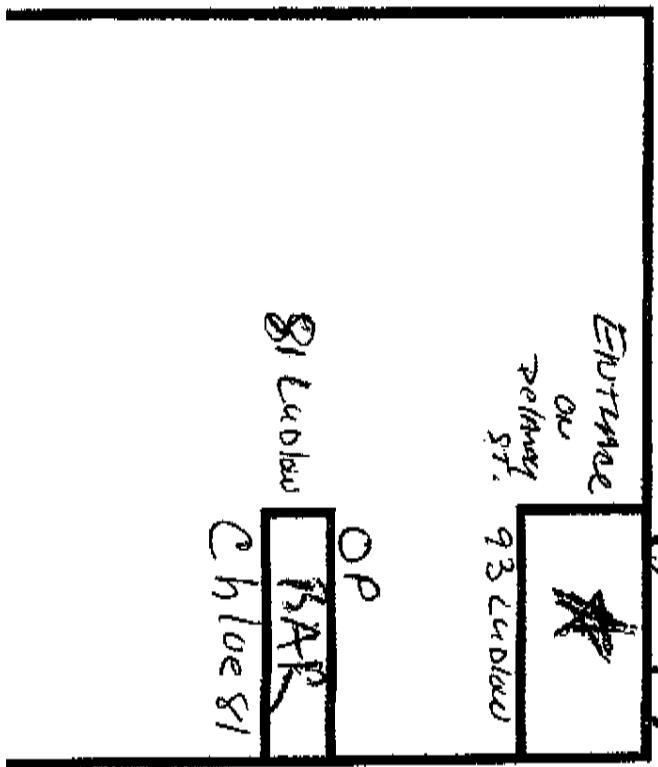


LUDLOW ST



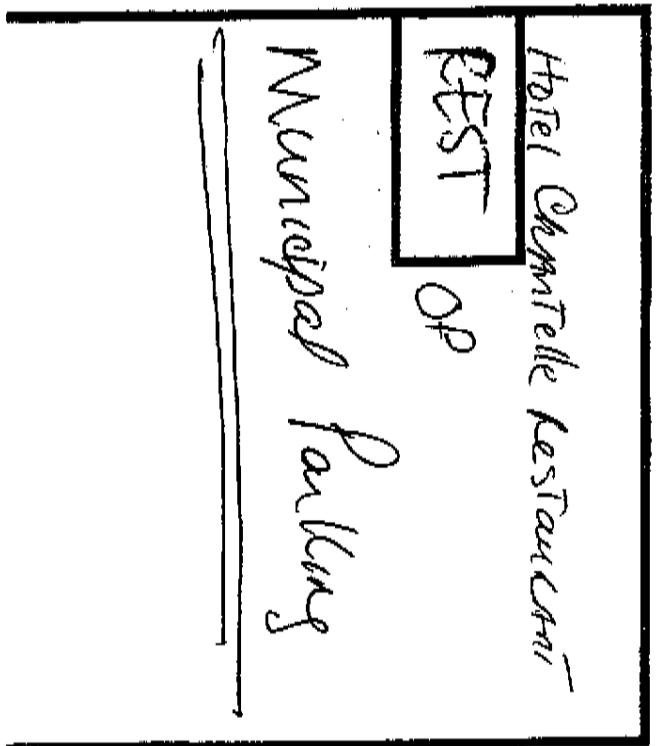
11/28/2011

DELANCEY ST



150 Feet

LUDLOW ST.



**LISTING OF ESTABLISHMENTS WITH SLA Liquor Licenses
Within (2) Blocks within 500 feet of 95 Delancey St. NY, NY**

1. Kuma Inn 113 Ludlow St NY, NY 10002 (RW inactive)
2. Chloe 81 81 Ludlow St NY, NY 10002 OP
3. Los Feliz Restaurant 109 Ludlow St. NY, NY 10002 OP
4. Hotel Chantelle Restaurant 92 Ludlow St. NY NY 10002 OP

PUBLIC INTEREST STATEMENT:

The opening of this new **FIRST CLASS** Restaurant with 2 floors and an enclosed Rooftop Garden dining / seating area will provide a new economic vitality and development to this location, which has been vacant for an extended period of time.

This Establishment is located at the corner of **DELANCEY** and **LUDLOW** St. . The building Façade will be renovated , from it current deteriorated state. This new business will provide Increase Retail Diversity , as the menu will offer Spanish/ European Tapas dishes .