

1 **BUSINESS LICNESE & PERMITS COMMITTEE**

Item # 6

2
3 December 5, 2012

4
5 Dennis Rosen
6 Chairman
7 New York State Liquor Authority
8 80 S. Swan Street, 9th Floor
9 Albany, New York 12210

10
11 **Re: Funky Joe's**
12 *455 W 56th Street (9/10)*

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14
15 Dear Chairman Rosen:

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17 Manhattan Community Board 4 (MCB4) recommends denial of a new wine & beer license for Funky Joe's – 455 W
18 56th Street (9/10), unless the following stipulation, agreed to by the applicant, is part of the method of operation for
19 this establishment with a capacity of 75, with 8 tables and 32 seat, and one stand-up bar seating 8.
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21 A signed copy of the questionnaire, stipulations and community agreements are enclosed.

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24 Sincerely,

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27 Corey Johnson
Chair

Paul Seres
Co-Chair
Business License & Permits
Committee

Lisa Daglian
Co-Chair
Business License & Permits
Committee

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Manhattan Community Board 4

(All Fields Must Be Completed)

Liquor License Stipulations Application

APPLICANT Sporn Pet Production Inc.		DOING BUSINESS AS (DBA) Funky Joe's	
STREET ADDRESS 455 W 56 th Street		CROSS STREETS 9 th & 10 th Avenues	
OWNER	NAME: Joseph Sporn	REPRESENTATIVE	NAME: John Springer
	PHONE: 212-501-8388		PHONE: 631-331-3334
	FAX: 212-877-7405		FAX: 631-382-1890
MANAGER	NAME: Pending	LANDLORD	NAME: Applicant owns building
	PHONE: Pending		PHONE:
	FAX:		FAX:

DESCRIPTION OF BUSINESS

Establishment Type:	<input checked="" type="radio"/> Bar/Tavern <input type="radio"/> Bed & Breakfast <input type="radio"/> Eating Place Beer <input type="radio"/> Cabaret <input type="radio"/> Night Club <input type="radio"/> Hotel <input type="radio"/> Restaurant
	<input type="radio"/> Catering Establishment <input type="radio"/> Club (Fraternal Organization -- Members Only)
	<input type="radio"/> Other (Explain): Quiet Neighborhood Gathering Place
Method of Operation:	<input type="radio"/> Restaurant <input type="radio"/> Dance Club <input type="radio"/> Sports Bar <input type="radio"/> Adult Entertainment <input type="radio"/> Wine Bar <input type="radio"/> Pizzeria <input type="radio"/> Cafe
	<input type="radio"/> Other (Explain): Tavern Wine/Beer
License Type:	<input type="radio"/> On-Premise <input type="radio"/> Wine <input type="radio"/> Beer <input checked="" type="radio"/> Wine & Beer

APPLICATION TYPE (check one)	<input checked="" type="radio"/> New	Has applicant owned or managed a similar business?	YES	<input checked="" type="checkbox"/> NO
		What is/was the name of establishment?		
		What is/was the address of the establishment?		
		What were the dates the applicant was involved with this former premise?		
	<input type="radio"/> Transfer	What is the prior license #?		
		What is the expiration date on the prior license?		
		Are you making any alterations or operational changes?	YES	<input type="checkbox"/> NO
		If alterations or operational changes are being made, please attach the plans to this form.		
	<input type="radio"/> Alteration	What is the current license #?		
		What is the expiration date on the current license?		
		Please describe the nature of the alterations and attach the plans		

OPERATIONAL ISSUES

HOURS		MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY
	Operation	12 p.m. - 12am	12 p.m. - 12am	12 p.m. - 12am	12 p.m. - 1 a.m.	12 p.m. - 2 a.m.	12 p.m. - 2 a.m.	12 p.m. - 12am
	Music	Background	Music	Only	During All	Days & Hours	Of	Operation
	Kitchen	Limited	Menu	Available	During All	Days & Hours	Of	Operation

OCCUPANCY	INDOOR				BAR			OUTSIDE	
	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 Bars	Number of Seats	Number of Tables
	75	50 weeknights 75 weekends	8	32	0	1	8	0	0

How many floors are there? What is the capacity for each floor? (please respond in space provided)	<input checked="" type="checkbox"/> 1-2	<input type="checkbox"/> 3-4	<input type="checkbox"/> 5+
Will you be applying or intending to apply for a cabaret license? If yes, will there be dancing? (please respond in space provided)	<input checked="" type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	N/A
Will applicant have bottle service?	<input checked="" type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	N/A
Will you be hosting private parties and promotional events?	<input checked="" type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	N/A
Will outside promoters be used?	<input checked="" type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	N/A
Will the security plan submitted be implemented?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	N/A
Will State certified security personnel be used?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	N/A
Will New York Nightlife Association recommendations and NYPD Best Practices be followed?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	N/A
Will the applicant be using delivery bicycles? If yes, have you applied to DOT for bicycle rack? Delivery bicycles are to be clearly marked with the name of the restaurant and staff will wear attire clearly noting name. (please respond in space provided)	<input checked="" type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	N/A
Will the applicant be applying for a Sidewalk Café now or in the future? (please respond in space provided)	<input checked="" type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	N/A
If yes to the above, are plans attached and submitted to DCA? How many tables/seats? (please respond in space provided)	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	<input checked="" type="checkbox"/> N/A
Will applicant provide contact information to neighbors and respond to complaints that arise?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	N/A

If you plan to have music, what type(s)?	<input checked="" type="checkbox"/> BACKGROUND	<input type="checkbox"/> LIVE MUSIC	<input type="checkbox"/> DJ
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BUILDING DESIGN

Doors and windows will be closed when any amplified music is played and in the event of no amplified sound, will be closed by 11 PM Friday and Saturday and 10 PM on all other days.	<input checked="" type="checkbox"/> YES	<input 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 checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	N/A Noise will not be an issue but applicant will consult a sound engineer if needed
Do you agree to comply with DOB rules concerning a storm enclosure? Storm enclosures can be used between November 15 and April 15, but they may NOT project more than 18 inches from the store front.)	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	N/A

OUTDOOR ITEMS			
Will applicant use the rooftop, rear yard or any outdoor space?	YES	<input checked="" type="checkbox"/> NO	N/A
If yes to the above, the rear yard, rooftop, and any outdoor space will be closed and vacated by 11 PM on Friday & Saturday and 10 PM on all other days.	YES	NO	<input checked="" type="checkbox"/> N/A
The service and consumption of alcohol in the rear yard, on the rooftop, or in any other outdoor space will be only via seated food service.	YES	NO	<input checked="" type="checkbox"/> N/A
The rear yard, rooftop, and any other outdoor space will not allow standing space for patrons to drink or smoke.	YES	NO	<input checked="" type="checkbox"/> N/A
Applicant will do everything in their power to provide an effective sound baffling or sound controlled environment through landscaping or some type of enclosure, where possible; provided they do not violate any fire or building code regulations? This includes possibly working with landlords for soundproofing tenants apartments (such as installing soundproofing windows, acoustical tiles, etc.).	YES	NO	<input checked="" type="checkbox"/> N/A
Applicant will enforce a quiet environment in the outdoor space, so as not to disturb nearby residents (e.g. there will be no amplified music, as per the law, and windows and doors to areas that play amplified music shall be closed). The applicant will make every effort possible to limit the noise emanating from diners by posting signs outside and also on menus asking for respect of the neighbor's privacy and peace. The staff will also encourage a peaceful environment amongst the outdoor diners.	YES	NO	<input checked="" type="checkbox"/> N/A
Applicant will have a lighting plan that will allow safe usage of the outdoor space without disrupting neighbors?	YES	NO	<input checked="" type="checkbox"/> N/A

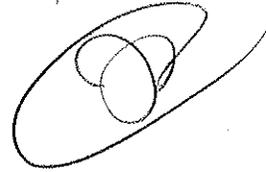
LOCATION & ZONING			
Primary Zoning District:	Residential	Overlay (If Applicable):	Commercial
Is this a Special District? If yes, is it Clinton, West Chelsea or Hudson Yards?	<input checked="" type="checkbox"/> YES	NO	N/A
Does the building have a Certificate of Occupancy ("C of O") or a letter of no objection?	YES	<input checked="" type="checkbox"/> NO	N/A
Is the 500 Foot Rule or 200 Foot Rule Triggered? If yes, which? Please attach a diagram of the establishments that triggers the rule.	YES	NO	<input checked="" type="checkbox"/> N/A
Is a Public Assembly permit required?	YES	<input checked="" type="checkbox"/> NO	N/A
Are your plans filed with DOB?	<input checked="" type="checkbox"/> YES	NO	N/A
Building Type	<input type="checkbox"/> Residential <input type="checkbox"/> Commercial <input type="checkbox"/> Mixed Use <input type="checkbox"/> Other, describe: Change Of Use App Pending		
Adjacent Buildings	<input type="checkbox"/> Residential <input type="checkbox"/> Commercial <input checked="" type="checkbox"/> Mixed Use <input type="checkbox"/> Other, describe:		
NOTIFICATION: What organizations / community groups have you notified regarding your application?	# 1		
	# 2		
	# 3		

ADDITIONAL INFORMATION: (Applicant Use)

The applicant, who owns the building, intends to run a quiet neighboring gathering place and promises to run the proposed premise in a manner that is lawful and mindful of the importance of ensuring the best quality of life for his residential tenants and neighbors

ADDITIONAL NOTES: (Office Use Only)

- license 1st floor & cellar
- R/W - Tavern
- will supply acoustician report & follows recs.
- can come back in 6 months re: hours
- security at door - full time security, add'l as needed.
- enforce ~~com~~ quiet neighborhood environment
- detailed floor plan - by end of week.
- will post job listing.



Note change in hrs