APPLICANT INFORMATION: Name of applicant(s): Coco Shack LLC Trade name (DBA): Coco Shack Premises address: 184 Prince Street, New York, NY 10012 Cross Streets and other addresses used for building/premise: Between Sullivan Street and Thompson Street CONTACT INFORMATION: Principal(s) Name(s): Alessandro Bandini Office or Home Address: City, State, Zip: Telephone #: Landlord Name / Contact: Landlord's Telephone and Fax: NAMES OF ALL PRINCIPAL(s): NAMES / LOCATIONS OF PAST / CURRENT LICENSES HELD Alessandro Bandini Coco Pazzo and Morso (420 E 59th St) (Previously: Centolire (1167 Madison Ave) & The Time Hotel (224 W 48)	
Trade name (DBA): Coco Shack Premises address: 184 Prince Street, New York, NY 10012 Cross Streets and other addresses used for building/premise: Between Sullivan Street and Thompson Street CONTACT INFORMATION: Principal(s) Name(s): Alessandro Bandini Office or Home Address: City, State, Zip: Telephone #: email: Landlord Name / Contact: Landlord's Telephone and Fax: NAMES OF ALL PRINCIPAL(s): NAMES / LOCATIONS OF PAST / CURRENT LICENSES HELD Alessandro Bandini Coco Pazzo (184 Prince St) Coco Pazzo and Morso (420 E 59th St)	
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Telephone #: email :	
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Alessandro Bandini Coco Pazzo (184 Prince St) Coco Pazzo and Morso (420 E 59th St)	
Coco Pazzo and Morso (420 E 59th St)	
Giuseppe Luongo Coco Pazzo and Morso (420 E 59th St) [Previously: Centolire (1167 Madison Ave) & The Time Hotel (224 W 49)	
	9th St)]
Briefly describe the proposed operation (i.e. "We are a family restaurant that will focus on"):	
Moderately priced seafood restaurant with an eye to the Mediterranean and a sensitivity for the Pacific/Atlantic	C
delicacies with fishery to table dynamic.	

WHAT TYPE(S) OF LICENSE(S) ARE YOU APPLYING FOR (MARK ALL THAT APPLY):
✓ a new liquor license (✓ Restaurant Tavern / On premise liquor Other)
an UPGRADE of an existing Liquor License
an ALTERATION of an existing Liquor License
a TRANSFER of an existing Liquor License
a HOTEL Liquor License
a DCA CABARET License
a CATERING / CABARET Liquor License
a BEER and WINE License
a RENEWAL of an existing Liquor License
an OFF-PREMISE License (retail)
OTHER:
If upgrade, alteration, or transfer, please describe specific nature of changes: (Please include physical or operational changes including hours, services, occupancy, ownership, etc.)
If this is for a new application, please list previous use of location for the last 5 years:
Is any license under the ABC Law currently active at this location? yes no
If yes, what is the name of current / previous licensee, license # and expiration date:
R & G SOHO LLC Serial Number 1233248 Expiration Date 4/30/2022
Have any other licenses under the ABC Law been in effect in the last 10 years at this location?
If yes, please list DBA names and dates of operation:
CAFE TINA INC Serial Number 1111943 Operated 2000 - 2011

PREMISES:

By what right does the applicant have possession of the premises?
Own 🗸 Lease Sub-lease Binding Contract to acquire real property other:
Type of Building: VResidential Commercial Mixed (Res/Com) Other:
Number of floor:5 Year Built :1900
Describe neighboring buildings: Mixed Use
Zoning Designation:R7-2
Zoning Overlay or Special Designation (applicable)
Block and Lot Number: 503 / 18
Does the premise occupy more than one building, zoning lot, tax lot or more than one floor? $_$ yes \checkmark no
Is the premise located in a historic district? yes no
(if yes, have all exterior changes or changes governed by the Landmarks Preservation Commission (LPC) been approved by the LPC? yes no, please explain : _Signage will be repaced and will seek LPC approval if needed.
Will any outside area or sidewalk café be used for the sale or consumption of alcoholic beverages? (including sidewalk, roof and yard space) no yes : explain
What is the proposed Occupancy? 25
Does the premise currently have a valid Certificate of Occupancy (C of O) and all appropriate permits?
noyes
If yes, what is the maximum occupancy for the premises?10
If yes, what is the use group for the premises?
If yes, is proposed occupancy permitted? yes no, explain : Working with architect on review of occupancy.
If your occupancy is 75 or greater, do you plan to apply for Public Assembly permit? yesno
Do you plan to file for changes to the Certificate of Occupancy? yes no (if yes, please provide copy of application to the NYC DOB) (possibly, but not ready now)
Will the façade or signage be changed from what currently exist at the premise? no yes
(if yes, please describe: An awning will be added with restaurant name.

INTERIOR OF PREMISES:
What is the total licensed square footage of the premises? 1000 SF
If more than one floor, please specify square footage by floors: 500 SF 1st Floor / 500 SF Basement
If there is a sidewalk café, rear yard, rooftop, or outside space, what is the square footage of the area?
N/A
If more than one floor, what is the access between floors? Stairs for employees only.
How many entrances are there? 2 How many exits? 2 How many bathrooms ? 2
Is there access to other parts of the building? ves, explain:
OVERALL SEATING INFORMATION:
Total number of tables? 8 Total table seats? 16
Total number of bars? 1 Total bar seats? 5
Total number of "other" seats? please explain :
Total OVERALL number of seats in Premises :
BARS:
How many *stand-up bars / bar seats are being applied for on the premises? Bars 1 Seats 5
How many service bars are being applied for on the premises? 0
Any food counters? \checkmark no yes, describe :
For Alterations and Upgrades:
Please describe all current and existing bars / bar seats and specific changes:
* 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 food and alcoholic beverages.
PROPOSED METHOD OF OPERATION:
What type of establishment will this be? (check all that apply)
Bar Bar & Food 🗸 Restaurant Club/ Cabaret Hotel Other:

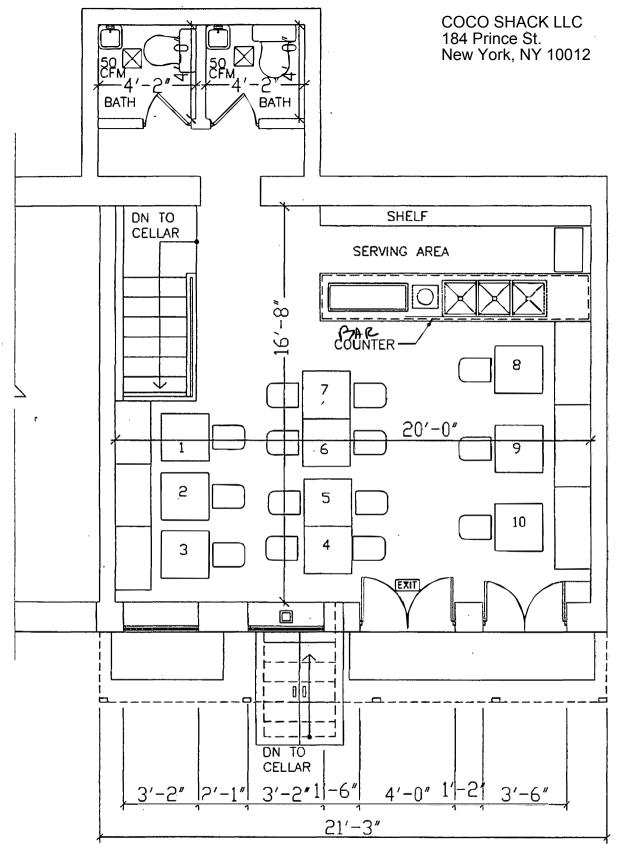
vnat are the Hours of Operation?
Sunday: Monday: Tuesday: Wednesday: Thursday: Friday: Saturday:
<u>am</u> to <u>11 pm</u> <u>11 am</u> to <u>11 pm</u> to <u>12 am</u> to <u>12 am</u> to <u>12 am</u>
Vill the business employ a manager? no yes, name / experience if known :⊤BD
Vill there be security personnel? <a href="mailto:white=" m<="" mailto:white="mailto:white=" td="">
f yes, please describe : French doors across the front of the premises.
Vill you have TV's ? no _✓ yes (how many?) _ 1
ype of MUSIC / ENTERTAINMENT: Live MusicLive DJJuke Box Ipod / CDsno
Expected Volume level:
oo you have or plan to install soundproofing? V_no yes
F YES, will you be using a professional sound engineer?
Please describe your sound system and sound proofing:
Vill you be permitting: promoted events scheduled performances outside promoters
any events at which a cover fee is charged? private parties
Do you have plans to manage or address vehicular traffic and crowd control on the sidewalk caused by your stablishment? no yes (if yes, please attach plans)
Vill you be utilizing ropes movable barriersother outside equipment (describe)
are your premises within 200 feet of any school, church or place of worship? 🗹 no yes
f there is a school, church or place of worship within 200 feet of your premises or on the same bloolease submit a block plot diagram or area map showing its' location in proximity to your application or emises (no larger than 8 $\frac{1}{2}$ " x 11").
ndicate the distance in feet from the proposed premise:
Name of School / Church:
Address:

Distance:
Distance:
nfirm that if complaints are made
 ;

Thank you for your cooperation. Please return this questionnaire along with the other required documents as soon as you can. This will expedite your application and avoid any unnecessary delays. Use additional pages if necessary.

RH

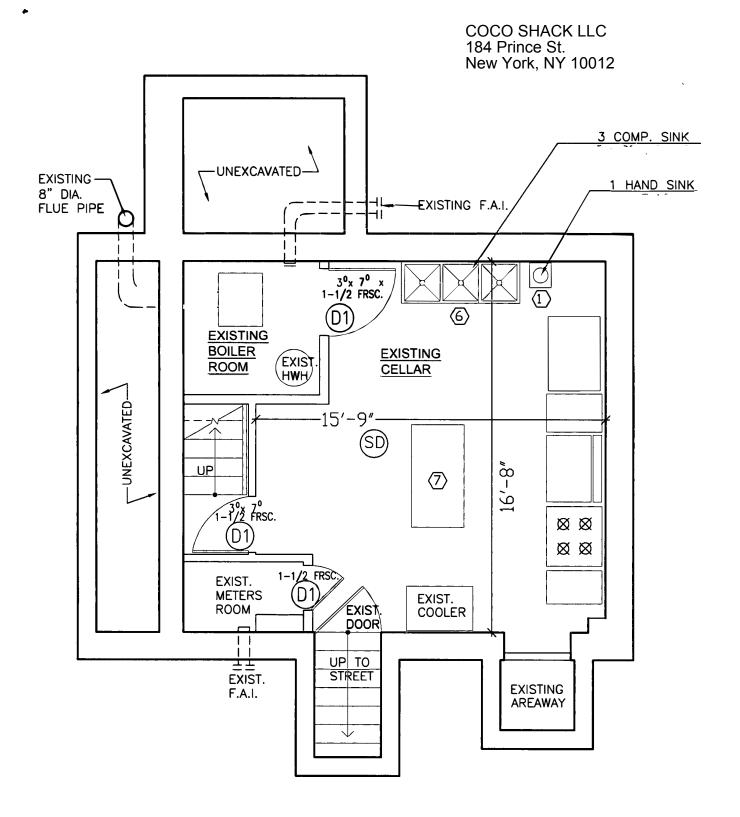
Community Board 2, Manhattan SLA Licensing Committee Carter Booth, Co-Chair Robert Ely, Co-Chair



PRINCE STREET

FIRST FLOOR PLAN

SCALE: 1/4"=1'-0"



PRINCE STREET

<u>CELLAR FLOOR PLAN</u>

SCALE: 1/4"=1'-0"