

**APPLICANT INFORMATION:**

Name of applicant(s): Figaro NYC LLC

Trade name (DBA): TBD

Premises address: 184 Bleecker Street, New York, NY 10012

Cross Streets and other addresses used for building/premise:  
MacDougal and Sullivan Streets

**CONTACT INFORMATION:**

Principal(s) Name(s): Florence Zabokritsky

Office or Home Address: [REDACTED]

City, State, Zip: [REDACTED]

Telephone #: [REDACTED] email : [REDACTED]

Landlord Name / Contact: [REDACTED]

Landlord's Telephone and Fax: [REDACTED]

**NAMES OF ALL PRINCIPAL(s):      NAMES / LOCATIONS OF PAST / CURRENT LICENSES HELD**

Florence Zabokritsky \_\_\_\_\_

Mario Skaric \_\_\_\_\_

Briefly describe the proposed operation (i.e. "We are a family restaurant that will focus on..."):

We are an upscale restuarant serving modern American cuisine in a relaxed family friendly, but classy environment.

**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.)

N/A  
\_\_\_\_\_  
\_\_\_\_\_

If this is for a new application, please list previous use of location for the last 5 years:

Fast Casual Restaurant  
\_\_\_\_\_

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: \_\_\_\_\_  
\_\_\_\_\_

Have any other licenses under the ABC Law been in effect in the last 10 years at this location?  
 yes  no

If yes, please list DBA names and dates of operation:

Qdoba Mexican Grill: 1/2010 to 12/31/2012  
\_\_\_\_\_  
Le Figaro Cafe: 1/2004 to 12/31/2009  
\_\_\_\_\_

**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:  Residential  Commercial  Mixed (Res/Com)  Other: \_\_\_\_\_

Number of floor: 5 Year Built : 1910

Describe neighboring buildings:  
Mixed: Residential/Commercial

Zoning Designation: R7-2

Zoning Overlay or Special Designation (applicable) Commercial Overlay: C1-5

Block and Lot Number: 526 / 56

Does the premise occupy more than one building, zoning lot, tax lot or more than one floor?  yes  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 : \_\_\_\_\_

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 sidewalk cafe

What is the proposed Occupancy? 125

Does the premise currently have a valid Certificate of Occupancy (C of O) and all appropriate permits?

no  yes Pending

If yes, what is the maximum occupancy for the premises? \_\_\_\_\_

If yes, what is the use group for the premises? \_\_\_\_\_

If yes, is proposed occupancy permitted?  yes  no, explain : \_\_\_\_\_

If your occupancy is 75 or greater, do you plan to apply for Public Assembly permit?  yes  no

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)

Will the façade or signage be changed from what currently exist at the premise?  no  yes

(if yes, please describe: Appropriate signage will be added in accordance with all applicable local laws and regulations

**INTERIOR OF PREMISES:**

What is the total licensed square footage of the premises? 4,000 sq ft

If more than one floor, please specify square footage by floors: GF: 2500 sq ft and basement: 1500 sq ft

If there is a sidewalk café, rear yard, rooftop, or outside space, what is the square footage of the area?

sidewalk cafe - 500 sq ft

If more than one floor, what is the access between floors? Staircases

How many entrances are there? 1 How many exits? 4 How many bathrooms? 3

Is there access to other parts of the building? X no \_\_\_ yes, explain: \_\_\_\_\_

**OVERALL SEATING INFORMATION:**

Total number of tables? 25 Total table seats? 100

Total number of bars? 1 Total bar seats? 8

Total number of "other" seats? 40 please explain: sidewalk cafe

Total OVERALL number of seats in Premises : 148: 108 inside and 40 outside

**BARS:**

How many \*stand-up bars / bar seats are being applied for on the premises? Bars 1 Seats 8

How many service bars are being applied for on the premises? 0

Any food counters? X no \_\_\_ yes, describe : \_\_\_\_\_

**For Alterations and Upgrades:**

Please describe all current and existing bars / bar seats and specific changes: \_\_\_\_\_

N/A

\* 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 X Restaurant \_\_\_ Club/ Cabaret \_\_\_ Hotel \_\_\_ Other: \_\_\_\_\_

What are the Hours of Operation?

Sunday:      Monday:      Tuesday:      Wednesday:      Thursday:      Friday:      Saturday:  
10am to 11pm 10am to 11pm 10am to 11pm 10am to 11pm 10am to 11pm 10am to 2am 10am to 2am

Will the business employ a manager?  no  yes, name / experience if known: Mario Skaric/15 yrs

Will there be security personnel?  no  yes (if yes, what nights and how many?) \_\_\_\_\_

Do you have or plan to install French doors, accordion doors or windows that open?  no  yes

If yes, please describe: \_\_\_\_\_

Will you have TV's ?  no  yes ( how many? ) 1

Type of MUSIC / ENTERTAINMENT:  Live Music  Live DJ  Juke Box  Ipod / CDs  none

Expected Volume level:  Background (quiet)  Entertainment level  Amplified Music  
(check all that apply)

Do you have or plan to install soundproofing?  no  yes

IF YES, will you be using a professional sound engineer? \_\_\_\_\_

Please describe your sound system and sound proofing: small speakers, enough for background music

Will you be permitting: No promoted events No scheduled performances No outside promoters

No any events at which a cover fee is charged? Yes private parties

Do you have plans to manage or address vehicular traffic and crowd control on the sidewalk caused by your establishment?  no  yes ( if yes, please attach plans)

Will you be utilizing Noropes No movable barriers No other outside equipment (describe) No

Are your premises within 200 feet of any school, church or place of worship?  no  yes

***If there is a school, church or place of worship within 200 feet of your premises or on the same block, please submit a block plot diagram or area map showing its' location in proximity to your applicant premises ( no larger than 8 1/2 " x 11").***

Indicate the distance in feet from the proposed premise:

Name of School / Church: \_\_\_\_\_

Address: \_\_\_\_\_ Distance: \_\_\_\_\_

Name of School / Church: \_\_\_\_\_

Address: \_\_\_\_\_ Distance: \_\_\_\_\_

Name of School / Church: \_\_\_\_\_

Address: \_\_\_\_\_ Distance: \_\_\_\_\_

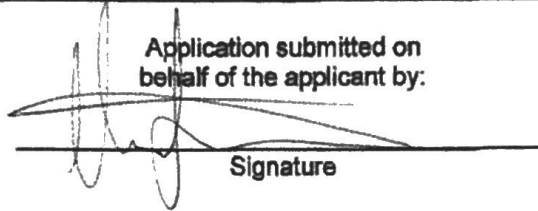
Please provide contact information for Residents / Community Board and confirm that if complaints are made you will address it immediately.

Contact Person: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Email : \_\_\_\_\_

Application submitted on  
behalf of the applicant by:



Signature

Print or Type Name MARIO SKARIC

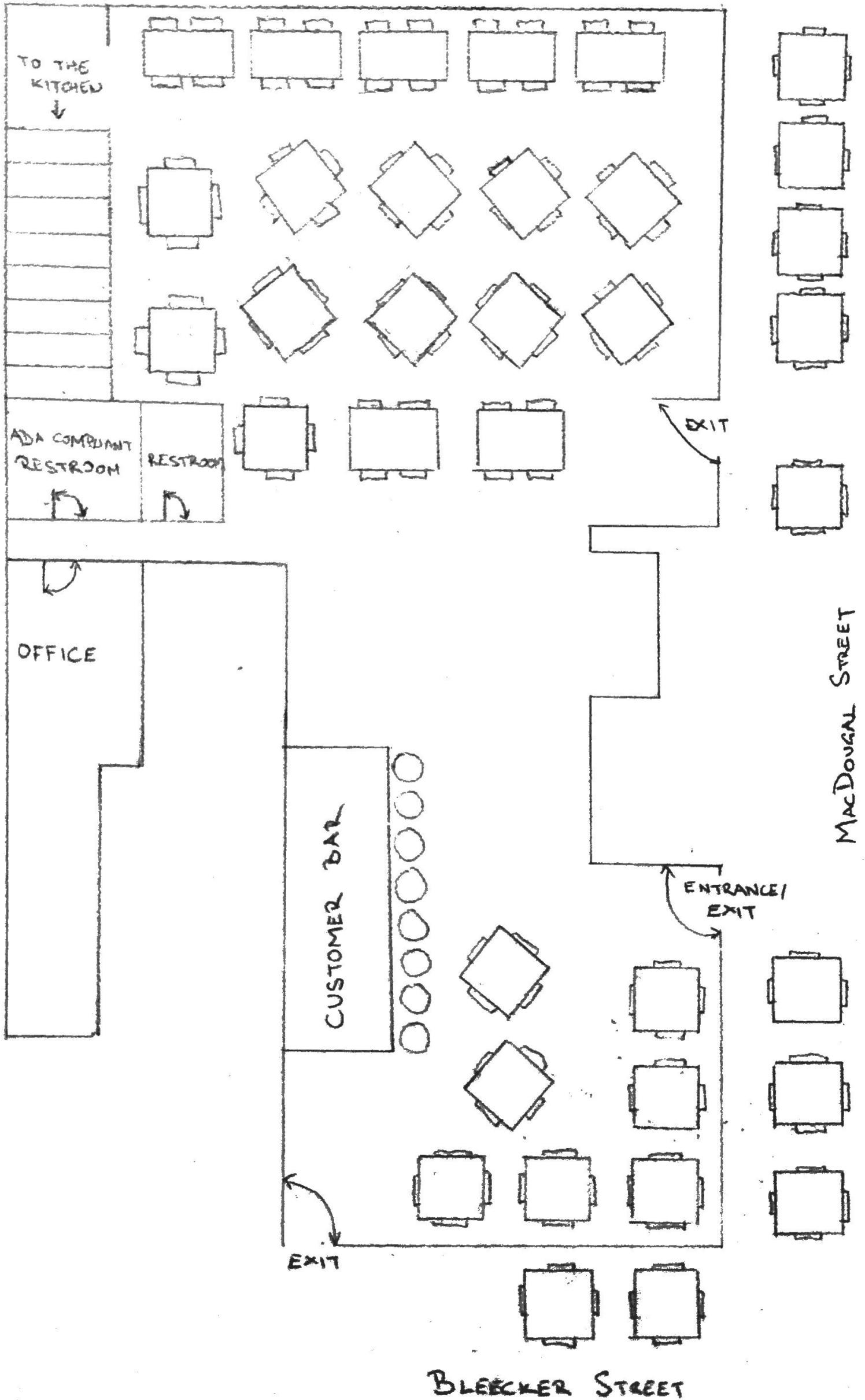
Title PRINCIPAL

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.



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BASEMENT/  
KITCHEN

