APPLICANT INFORMATION: Name of applicant(s): Sabiangboon 8 Inc Trade name (DBA): Pinto Garden Premises address: 117 W 10th St, New York, NY 10011 Cross Streets and other addresses used for building/premise: Between Greenwich Ave & 6th Ave CONTACT INFORMATION: Principal(s) Name(s): Teerawong Nanthavatsiri, President Office or Home Address: New York, NY 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 Teerawong Nanthavatsiri T & K Hospitality LLC DBA Pinto, 118 Christopher St ("Chef Yo") 117 Pinto Inc, 117 W 10th St DDD888 Inc DBA Pinto, 128 Montague St, Brooklyn, NY Briefly describe the proposed operation (i.e. "We are a family restaurant that will focus on..."): Located in the heart of the West Village, Pinto Garden will serve Authentic Thai cuisine prepared with seasonal, locally sourced ingredients to make you feel like visiting Thailand without leaving NYC.

Meeting Date: January 7th, 2021 @ 6:30 PM

WHAT TYPE(S) OF LICENSE(S) ARE YOU APPLYING FOR ( MARK ALL THAT APPLY):					
<u>X</u>	a new liquor license (X Restaurant Tavern / On premise liquor Other)				
<u>X</u>	an UPGRADE of an existing Liquor License				
_	an ALTERATION of an existing Liquor License				
<u>X</u>	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)				
<u>X</u>	C OTHER : OP License (beer, wine & liquor)				
If upgrade, alteration, or transfer, please describe specific nature of changes: (Please include physical or operational changes including hours, services, occupancy, ownership, etc.)					
	No changes on current Method of Operation. Partners parting and the remaining officer,				
	Chef Yo will continue to run the business under a new company. Upgrading license to				
	full liquor to add cocktails to current drink menu.				
If this is for a new application, please list previous use of location for the last 5 years:					
N/A. This is a transfer application.					
Is any license under the ABC Law currently active at this location? X yes no					
If yes, what is the name of current / previous licensee, license # and expiration date:					
Current licensee: 117 Pinto Inc, RW 1296279, Exp 09/30/2022. Currently active license.					
Have any other licenses under the ABC Law been in effect in the last 10 years at this location?  X yesno					
If yes, please list DBA names and dates of operation:					
Cafe Asean Corporation DBA Cafe Asean, RW 1029074, from 1995 to 2015					

## PREMISES:

By what right does the applicant have possession of the premises?					
Own _X Lease Sub-lease Binding Contract to acquire real property other:					
Type of Building: Residential Commercial X_Mixed (Res/Com) Other:					
Number of floor:3 Year Built :1910					
Describe neighboring buildings: Mixed Residential and Commerical Buildings					
Zoning Designation:R6					
Zoning Overlay or Special Designation (applicable)N/A					
Block and Lot Number:606 /92					
Does the premise occupy more than one building, zoning lot, tax lot or more than one floor? X yes no    1st floor & basement   Is the premise located in a historic district? yes _X 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) X no yes : explain					
What is the proposed Occupancy?					
Does the premise currently have a valid Certificate of Occupancy (C of O) and all appropriate permits?					
no _X_ yes Letter of No Objection from DOB					
If yes, what is the maximum occupancy for the premises?74 Max					
If yes, what is the use group for the premises?6_					
If yes, is proposed occupancy permitted? X yes no, explain :					
If your occupancy is 75 or greater, do you plan to apply for Public Assembly permit? yesno N/A					
Do you plan to file for changes to the Certificate of Occupancy? yes $X$ 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? X no yes					
(if yes, please describe:					

INTERIOR OF PREMISES:					
What is the total licensed square footage of the premises? 2,000 sq ft					
If more than one floor, please specify square footage by floors: 1st Fl: 1,200 sq ft Basement: 800 sq ft					
If there is a sidewalk café, rear yard, rooftop, or outside space, what is the square footage of the area?					
Enclosed backyard garden, 400 sq ft					
If more than one floor, what is the access between floors? Stairs					
How many entrances are there?1 How many exits?1 How many bathrooms ?1					
Is there access to other parts of the building? X no yes, explain:					
OVERALL SEATING INFORMATION:					
Total number of tables? <u>25</u> Total table seats? <u>62</u>					
Total number of bars?1_ Total bar seats?0					
Total number of "other" seats? please explain :					
Total OVERALL number of seats in Premises :62					
BARS:					
How many *stand-up bars / bar seats are being applied for on the premises? Bars 1 Seats 0					
How many service bars are being applied for on the premises?0_					
Any food counters? X no yes, describe :					
For Alterations and Upgrades: N/A					
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:					

\_\_\_\_ Bar \_\_\_Bar & Food \_X\_Restaurant \_\_\_Club/ Cabaret \_\_\_Hotel \_\_\_Other: \_\_\_\_

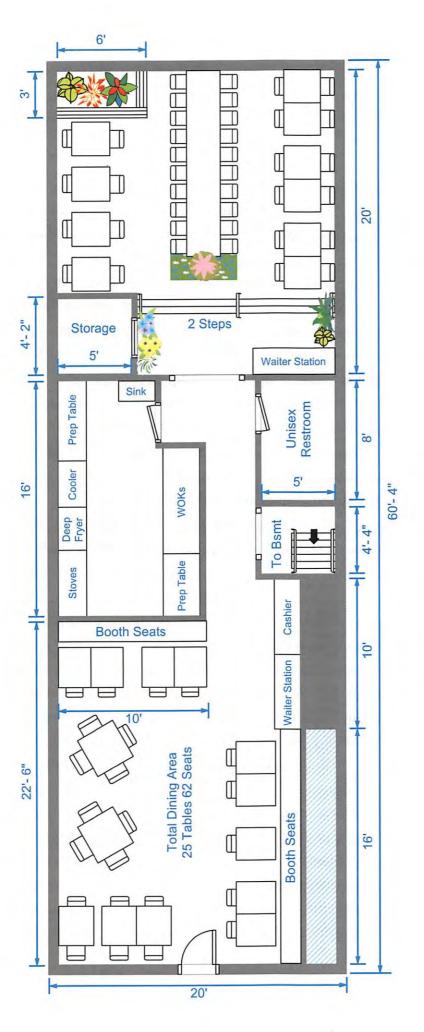
What type of establishment will this be? (check all that apply)

What are th	e Hours of Op	eration? 12	PM - 11 PM, 7 [	DAYS			
Sunday:	Monday:	Tuesday:	Wednesday:	Thursday:	Friday:	Saturday:	
to	to	to	to	to	to	to	
Will the bus	iness employ	a manager? _	X_ no yes,	name / experier	nce if known	:N/A	
Will there be security personnel? X no yes( if yes, what nights and how many?) N/A Do you have or plan to install French doors, accordion doors or windows that open? X no yes							
If yes, please describe : N/A							
Will you have TV's ? X no yes ( how many? )							
Type of MU	JSIC / ENTER	TAINMENT: _	Live Music	_Live DJJ	uke Box <u>X</u>	lpod / CDsnone	
Expected Volume level: X Background (quiet) Entertainment level Amplified Music (check all that apply)							
Do you have	e or plan to ins	stall soundprod	ofing? X_no _	yes			
IF YES, will	you be using	a professional	sound engineer?	N/A			
Please desc	cribe your sou	nd system and	sound proofing:				
			vents sched				
•	•	•	ss vehicular traffic es, please attach		trol on the sic	lewalk caused by your	
Will you be	utilizing	ropes m	ovable barriers	other outsid	le equipment	(describe)	
Are your pre	emises within	200 feet of any	school, church o	or place of worsh	nip? X no	yes	
please sub	mit a block p		r area map shov			or on the same block ty to your applicant	
Indicate the	distance in fe	et from the pro	posed premise:				
Name of Sc	chool / Church:	N/A					
Address:					Distance:		

Name of School / Church:	
Address:	Distance:
Name of School / Church:	
Address:	Distance:
you will address it immediately.  Contact Person: <u>Teerawong Nanthavatsiri (Ch</u>	
Address: 117 W 10th St, New York, NY 100	011
A STATE OF THE STA	on submitted on the applicant by:
Si	gnature
Print or Type Name	Sam Park
TitleI	Representative

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.

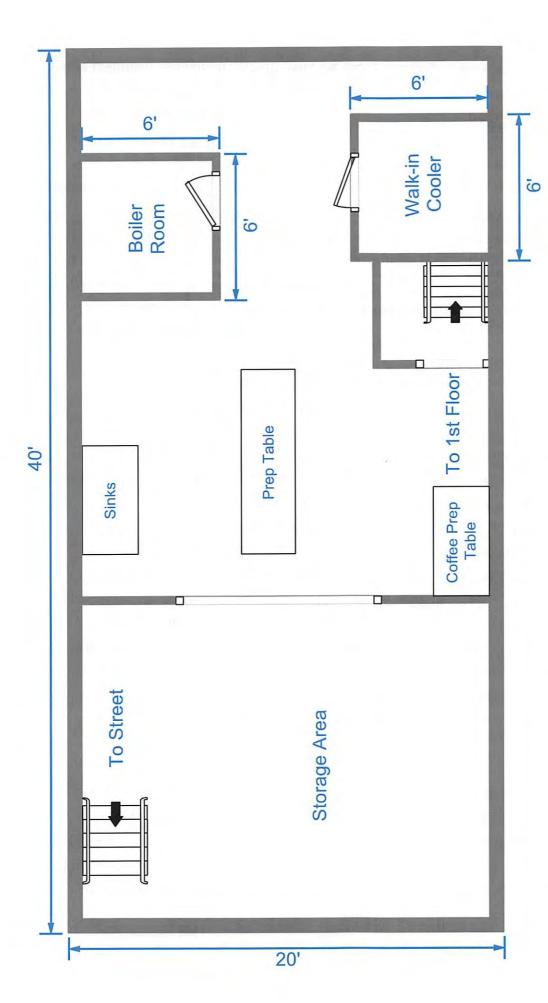
Community Board 2, Manhattan SLA Licensing Committee Carter Booth, Co-Chair Robert Ely, Co-Chair



Sabiangboon 8 Inc d/b/a Pinto Garden

1st Floor Plan

117 W 10th St, New York, NY 10011



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