

Meeting Date: March 2021

APPLICANT INFORMATION:

Name of applicant(s): Maman Washington Square LLC

Trade name (DBA): Maman

Premises address: 23 East 10th Street aka 67 University Place

Cross Streets and other addresses used for building/premise:
Broadway and East 11th Street (premises is on the corner of East 10th Street)

CONTACT INFORMATION:

Principal(s) Name(s): Benjamin Sormonte - and see attached list

Office or Home Address: [REDACTED]

City, State, Zip: New York, New York 10013

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**

See attached list

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

Maman recently opened its restaurant bakery on February 8, 2021. The new Maman is continuing the tradition of its founders Benjamin Sormonte and Elisa Marshall - Guests are greeted by the scent of culinary splendor that wafts throughout the space with a rustic décor, aroma and comfort of cuisines inspired by family traditions and the highest quality of locally sourced ingredients. Maman will host events ranging from cake decorating, learning how to make cheese fondue, creating and photographing floral arrangements to birthday parties, bridal showers and baby showers.

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:

LL Chinese Restaurant Holdings LLC dba Lucky Lee's from March 2019 to December 2019 - a Chinese restaurant with a beer and wine license

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: N/A

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:

Yellow Gate Inc dba Atithi Indian Cuisine from June 1986 to 1997 with a full liquor license
87th Pizzeria Corp from July 1998 to June 1999 with a beer and wine license
87th Pizzeria Corp dba Patsy's Pizzeria from July 1998 to 2019 with a beer and wine license

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: 14 Year Built : 1923

Describe neighboring buildings:
Mixed

Zoning Designation: C1-7

Zoning Overlay or Special Designation (applicable) None

Block and Lot Number: 562 / 1

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 : N/A

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? 50

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

no yes **See enclosed Certificate of Occupancy**

If yes, what is the maximum occupancy for the premises? 50

If yes, what is the use group for the premises? Use Group 6

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: The establishment recently opened on February 8, 2021 and installed signage showing the trade name - Maman

INTERIOR OF PREMISES:

2,100 total square feet
1,300 square feet ground floor
600 square feet cellar

What is the total licensed square footage of the premises? 200 square feet exterior sidewalk cafe space

If more than one floor, please specify square footage by floors: See above

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

200 square feet sidewalk cafe

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

How many entrances are there? 1 How many exits? 1 How many bathrooms ? 2*
*1 for patrons and 1 for employees

Is there access to other parts of the building? no X yes, explain: Emergency egress in cellar

OVERALL SEATING INFORMATION:

*Interior tables= 7 and seats= 24
Exterior Sidewalk Cafe tables= 4 and seats= 8

Total number of tables? 11 Total table seats? 32

Total number of bars? 1 Total bar seats? None

Total number of "other" seats? please explain : N/A

Total OVERALL number of seats in Premises : 32

BARS:

How many *stand-up bars / bar seats are being applied for on the premises? Bars 1 Seats None

How many service bars are being applied for on the premises? None

Any food counters? no X yes, describe : Counter for take out items

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: Bakery

What are the Hours of Operation?

Sunday: Monday: Tuesday: Wednesday: Thursday: Friday: Saturday:
8am to 11pm 730am to 11pm 730am to 11pm 730am to 11pm 730am to 11pm 730am to 11pm 8am to 11pm

Will the business employ a manager? ___ no X yes, name / experience if known : Maddy Gentile
See enclosed resume

Will there be security personnel? X 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 X yes

If yes, please describe : N/A

Will you have TV's ? X no ___ yes (how many?) _____

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

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

Do you have or plan to install soundproofing? ___ no X yes

IF YES, will you be using a professional sound engineer? N/A

Please describe your sound system and sound proofing: 5 small speakers playing only background music.
The ceiling is concrete and drop ceilings in the space.

Will you be permitting: ___ promoted events ___ scheduled performances ___ outside promoters

___ any events at which a cover fee is charged? X private parties

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

Will you be utilizing ___ ropes ___ movable barriers ___ other outside equipment (describe) _____
N/A

Are your premises within 200 feet of any school, church or place of worship? X 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 ½ " 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: Benjamin Sormonte Phone: ██████████

Address: ██

Email : ████████████████████

Application submitted on
behalf of the applicant by:

Donald M. Bernstein

Signature

Print or Type Name Donald M. Bernstein, Esq.

Title Counsel for applicant

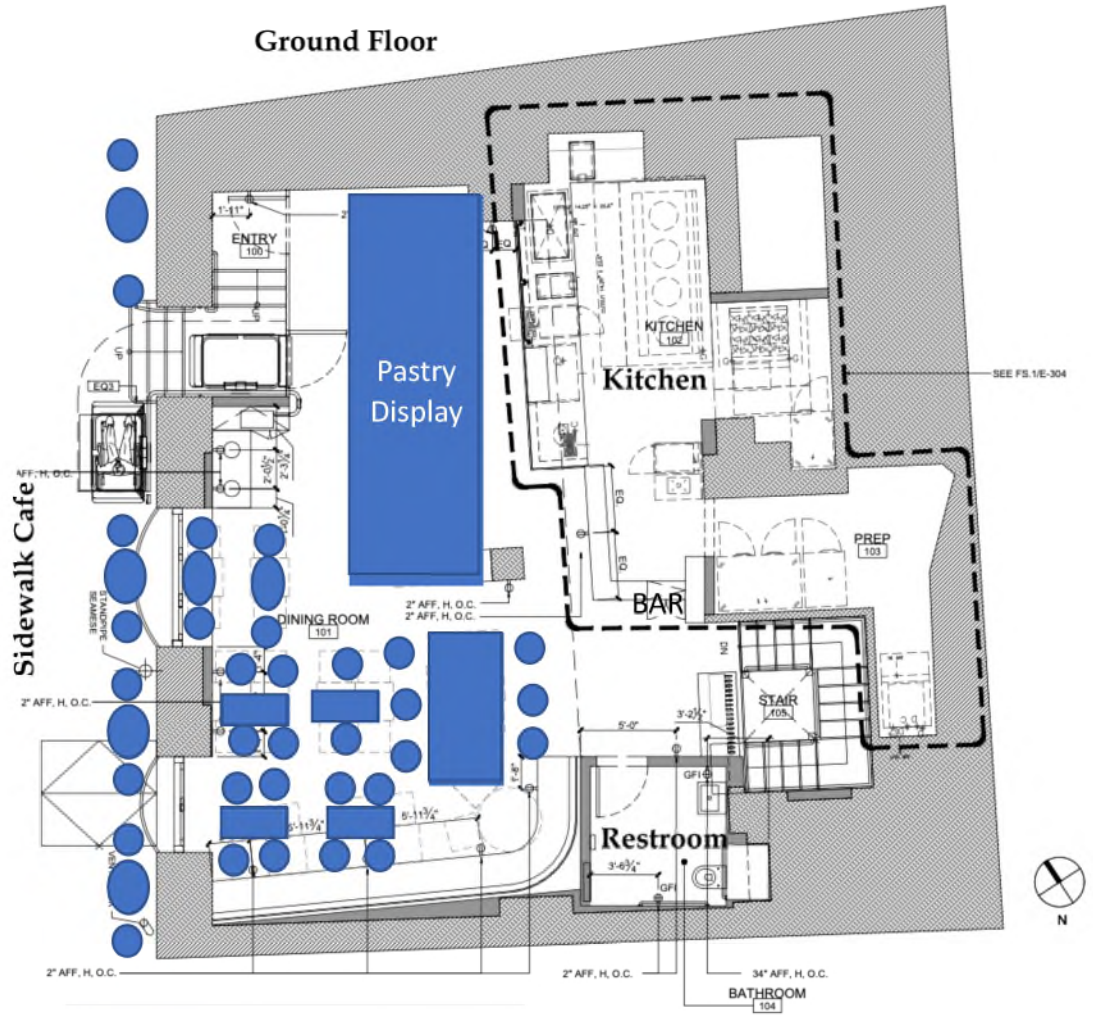
Thank you for your cooperation. Please return this questionnaire along with the other required documents as soon as you can. This will expedite your application and avoid any unnecessary delays. Use additional pages if necessary.



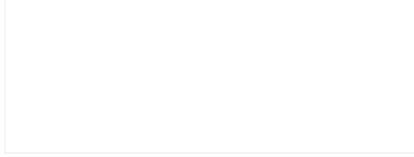
Community Board 2, Manhattan
SLA Licensing Committee
Carter Booth, Co-Chair
Robert Ely, Co-Chair

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Customer Bar 6'x 2' - No Bar Stools
Total tables= 11 and seats= 32



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Cellar - Not for patron use

