

DATE: _____

APPLICANT INFORMATION:

Name of applicant(s): Moose Goose Holding LLC

Trade name (DBA): The Grey Dog

Premises address: 49 Carmine St.

Cross Streets and other addresses used for building/premise:

Bleecker ST. — Bedford ST.

CONTACT INFORMATION:

Principal(s) Name(s): David Ethan

Office or Home Address: 49 Carmine St.

City, State, Zip: NY NY 10014

Telephone #: [REDACTED] email: [REDACTED]

Landlord Name / Contact: 49 Carmine Street LLC

Landlord's Telephone and Fax: [REDACTED]

NAMES OF ALL PRINCIPAL(s):

DAVID ETHAN

PETER STIEN

LCS FUND 1 LLC

LAGNIAPPE CAPITAL STUDIO LLC

NAMES / LOCATIONS OF PAST / CURRENT LICENSES HELD

THE GREY DOG INC 90 UNIVERSITY PL.

THE GREY DOG CHALSEN 242-244 W 165 ST

THE GREY DOG MULBERRY 244 MULBERRY ST

THE GREY DOG FARMER 55 W 265 ST.

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

We are a Family Restaurant That will focus on American
Cuisine

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:

The applicant has operated The Grey Dog restaurant in this
location since 2015 with a RW 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: RW # 1274764

exp 2/28/22 Grey Dog Carmine Inc

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:

OP # 1034185 49 Carmine ST. REST CORP 3/13 - 2/15

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: 4 Year Built: 1910

Describe neighboring buildings: Mixed Use

Zoning Designation: R6

Zoning Overlay or Special Designation (applicable) _____

Block and Lot Number: 586 / 42

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 _____

What is the proposed Occupancy? 74

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

☐ no ☒ yes

If yes, what is the maximum occupancy for the premises? 74

If yes, what is the use group for the premises? 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 N/A

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: _____)

INTERIOR OF PREMISES:

What is the total licensed square footage of the premises? APPROX 3100 SQ FT

If more than one floor, please specify square footage by floors: 1st 1800 Bsmr 1300

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

NO

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

How many entrances are there? 2 How many exits? 2 How many bathrooms? 2

Is there access to other parts of the building? ☒ no ☐ yes, explain: _____

OVERALL SEATING INFORMATION:

Total number of tables? 19 Total table seats? 48

Total number of bars? 0 Total bar seats? 0

Total number of "other" seats? 0 please explain: _____

Total OVERALL number of seats in Premises: 48

BARs:

How many *stand-up bars / bar seats are being applied for on the premises? Bars 0 Seats 0

How many service bars are being applied for on the premises? 1

Any food counters? ☒ 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: _____

What are the Hours of Operation?

Sunday: 7^A to 12^A Monday: 7^A to 12^A Tuesday: 7^A to 12^A Wednesday: 7^A to 12^A Thursday: 7^A to 12^A Friday: 7^A to 12^A Saturday: 7^A to 12^A

Will the business employ a manager? ☐ no ☒ yes, name / experience if known: _____

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?) _____

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? N/A

Please describe your sound system and sound proofing: Flad + a few small
speakers

Will 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 establishment? ☒ no ☐ yes (if yes, please attach plans)

Will you be utilizing ☒ ropes ☒ movable barriers ☒ other outside equipment (describe) ☒

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

Michael Kelly

Title

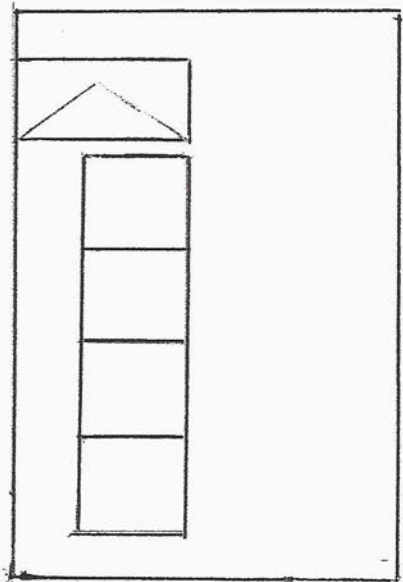
Representative

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.

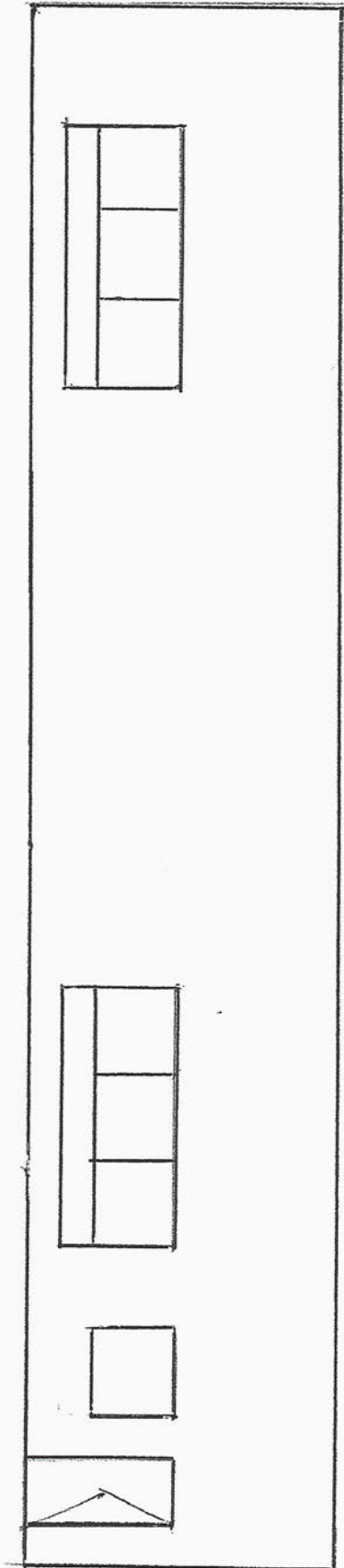
Carter Booth

R. Ely

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

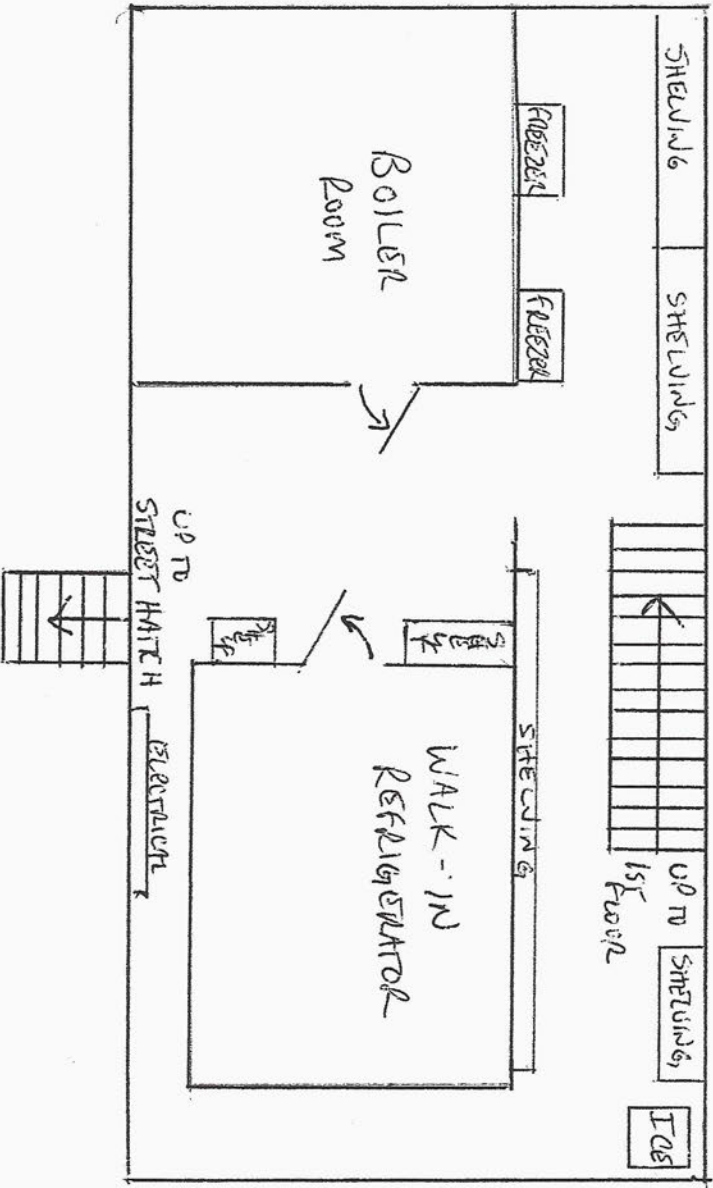


Carmine St.



Bedford St.

ELEVATIONS



Basement