Terri Cude, Chair Daniel Miller, First Vice Chair Susan Kent, Second Vice Chair Bob Gormley, District Manager



Antony Wong, Treasurer Keen Berger, Secretary Erik Coler, Assistant Secretary

COMMUNITY BOARD NO. 2, MANHATTAN

3 WASHINGTON SQUARE VILLAGE

NEW YORK, NY 10012-1899

www.cb2manhattan.org

P: 212-979-2272 F: 212-254-5102 E: info@cb2manhattan.org Greenwich Village * Little Italy * SoHo * NoHo * Hudson Square * Chinatown * Gansevoort Market

COMMUNITY BOARD 2 APPLICATION FOR A LIQUOR LICENSE

Please fill out this questionnaire and return to the Community Board 2 office by fax or mail to arrive at least <u>5</u> <u>business days</u> before the Committee meeting. In addition, bring <u>10 copies plus supporting material</u> <u>requested</u> to the SLA committee meeting.

Failure to complete and return the questionnaire and supporting materials on time will result in your item being removed from the agenda.

Failure to provide a completed questionnaire or failure to present before CB2 will result in notifying the State Liquor Authority (SLA) of your noncompliance with the community review process.

If you need to reschedule, please notify the Community Board 2 office no later than the Friday prior to the following months meeting. <u>Speak to Florence Arenas at the Board Office</u>. A maximum of 1 layover request will be granted per application. Failure to reappear without notification will result in a recommendation to deny this application.

The following supporting materials are **required** for this application:

- 1. A list of all other licensed premises within 500 ft. of this location including Beer and Wine.
- 2. Floor plans of the premise, including all tables and chairs and kitchen lay out to be licensed. Please also include any schematics for sidewalk café, backyard garden space and/or rooftop areas if applicable.
- 3. Provide any plans filed or to be filed with the Buildings Department.
- 4. Proposed menu, if applicable.
- 5. Certificate of Occupancy or Letter of No Objection for the premises.
- 6. Letter of Understanding or Letter of Intent from the Landlord.
- 7. Provide proof of community outreach with signatures or letters from Residential Tenants at location and from surrounding buildings. (i.e. a letter from the neighborhood block association or petition in support.)
- 8. A copy of your NYS Liquor Authority application as it will be submitted to the SLA. (excluding financial information)

Meeting Date: <u>06/10/21</u>

APPLICANT INFORMATION:
Name of applicant(s): Uno Nove Otto Corp (Allen Chan) & Djamel Omari (General Manager)
Trade name (DBA): TBD
Premises address: 117 Perry St, New York, NY 10014
Cross Streets and other addresses used for building/premise:
Hudson St & Greenwich St
CONTACT INFORMATION:
Principal(s) Name(s): Allen Chan
Office or Home Address:
City, State, Zip:
Telephone #: email : <u>unonoveottoallen@gmail.com</u>
Landlord Name / Contact:
Landlord's Telephone and Fax:
NAMES OF ALL PRINCIPAL(s): NAMES / LOCATIONS OF PAST / CURRENT LICENSES HELD
Allen Chan

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

We are a wine bar & restaurant focused on serving small, family style, share plates. The cuisine is Italian and will serve a variety of reasonably priced pastas, appetizers, meats, fish and sides. Beverages will be heavily wine focused, but cocktails & beer will be offered as well.

WHAT TYPE(S) OF LICENSE(S) ARE YOU APPLYING FOR (MARK ALL THAT APPLY):

- X a new liquor license (X 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.)

<u>N/A</u>

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

Wine Bar & Restaurant with full on-premise license through mid-2020

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? <u>X</u> yes _____no

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

<u> Aria Wine Bar (03/03/2020 – 05/31/2020)</u>

PREMISES:

By what right does the applicant have possession of the premises?				
Own X LeaseSub-leaseBinding Contract to acquire real property other:				
Type of Building: Residential Commercial _X_Mixed(Res/Com) Other:				
Number of floor: <u>6</u> Year Built : <u>1900</u>				
Describe neighboring buildings: <u>Adjacent buildings on Perry St are mixed use res/com with ground floor restaurants</u>				
Zoning Designation: <u>C1-6A</u>				
Zoning Overlay or Special Designation (applicable)				
Block and Lot Number: <u>633</u> / <u>38</u>				
Does the premise occupy more than one building, zoning lot, tax lot or more than one floor?yes X no				
Is the premise located in a historic district? X yes no				
(if yes, have all exterior changes or changes governed by the Landmarks Preservation Commission (LPC) been approved by the LPC? yes X no, please explain : <u>No Exterior Changes</u>				
Will any outside area or sidewalk café be used for the sale or consumption of alcoholic beverages? (including sidewalk, roof and yard space) <u>X</u> no <u>yes</u> : explain				
What is the proposed Occupancy? <u>N/A</u>				
Does the premise currently have a valid Certificate of Occupancy (C of O) and all appropriate permits?				
_ <u>X_</u> noyes				
If yes, what is the maximum occupancy for the premises? 72				
If yes, what is the use group for the premises? <u>UG6 Per LNO</u>				
If yes, is proposed occupancy permitted? yes <u>X</u> no, explain : <u>LNO</u>				
If your occupancy is 75 or greater, do you plan to apply for Public Assembly permit?yes \underline{X} no				
Do you plan to file for changes to the Certificate of Occupancy? yes <u>X</u> _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? <u>X</u> no yes				
(if yes, please describe:				

INTERIOR OF PREMISES:

What is the total licensed square footage of the premises? <u>approximately 1,600 ft²</u> If more than one floor, please specify square footage by floors: <u>1st floor ~800 ft²</u>, <u>basement ~800 ft²</u> If there is a sidewalk café, rear yard, rooftop, or outside space, what is the square footage of the area?

If more than one floor, what is the access between floors?			
Stairs to basement			
How many entrances are there? <u>1</u> How many exits? <u>2</u> How many bathrooms ? <u>3</u>	2		
Is there access to other parts of the building? <u>X</u> no yes, explain:			
OVERALL SEATING INFORMATION:			
Total number of tables? 14 Total table seats? 40	ż		
Total number of bars? <u>1</u> Total bar seats? <u>1</u>	5		
Total number of "other" seats? please explain :			
Total OVERALL number of seats in Premises : <u>21</u>			
BARS:			
How many *stand-up bars / bar seats are being applied for on the premises? Bars <u>1</u> Seats <u>1</u>			
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:			
Existing L-Shaped bar on the right side of the space with space for 14 seats			
* 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	e Hours of Ope	ration?				
Sunday:	Monday:	Tuesday:	Wednesday:	Thursday:	Friday:	Saturday:
<u>11am-11pm</u>	<u>11am-11pm</u>	<u>11am-11pm</u>	<u>11am-11pm</u>	<u>11am-12am</u>	<u>11am-12am</u>	<u>11am-12am</u>
Will the busir	ness employ a	manager?	_no _ X _yes, na	ame/experience	if known: <u>Dja</u>	<u>mel Omari (see CV)</u>
Will there be security personnel? X no yes(if yes, what nights and how many?)						
Do you have	or plan to insta	all French doo	rs, accordion doo	ors or windows t	hat open? X	noyes
			how many?)			
Type of MUS	SIC / ENTERT		Live Music	Live DJJu	uke Box <u>X</u> I	pod / CDsnone
Expected Volume level: X Background (quiet) Entertainment level Amplified Music (check all that apply)						
Do you have or plan to install soundproofing? <u>X</u> no yes						
IF YES, will you be using a professional sound engineer?						
Please describe your sound system and sound proofing: Small ceiling mounted speakers will play ambient background music						
Will you be p	ermitting:	promoted eve	ents schedu	uled performanc	es outs	ide promoters
any eve	nts at which a	cover fee is cl	narged? priv	ate parties		
			s vehicular traffic s, please attach p		rol on the side	walk caused by your
Will you be ut	tilizing ro	opes mo	ovable barriers	other outside	e equipment (describe)
Are your prer	mises within 20	00 feet of any	school, church oi	place of worsh	ip? <u>X</u> 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 $\frac{1}{2}$ " x 11").

Indicate the distance in feet from the p	roposed premise:
Name of School / Church:	
Address:	Distance:
Please provide contact information for you will address it immediately.	Residents / Community Board and confirm that if complaints are made
Contact Person: Djamel Omari	Phone:
Address:	
Email:	
	Application submitted on behalf of the applicant by:
4	S.Ce
Sigr	nature
	n Chan

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.

at Booth

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

Notes:

- 1) We will not be making any structural changes. There are no DOB filings yet, as no major construction is slated.
- 2) A Certificate of Occupancy does not exist for 117 Perry St. An expeditor is in the process of obtaining a Letter of No Objection.
- 3) Djamel Omari has been reaching out directly to community groups & members. He has asked them to kindly provide emails in support of this new endeavor.
- 4) Djamel Omari's CV is attached for your review.



