APPLICANT INFORMATION: Name of applicant(s): Serafina to Go at 8th Street LLC Trade name (DBA): Serafina to Go Premises address: 63 W 8th Street AKA 402 Sixth Avenue Cross Streets and other addresses used for building/premise: 6th Avenue/400-402 Sixth Avenue **CONTACT INFORMATION:** Principal(s) Name(s): Fabio Granato and Vittorio Assaf Office or Home Address: _ New York, NY City, State, Zip: Telephone #: _ email: Landlord Name / Contact Landlord's Telephone and Fax: ___ NAMES / LOCATIONS OF PAST / CURRENT LICENSES HELD NAMES OF ALL PRINCIPAL(s): Fabio Granato See attached rider See attacehed rider_____ Vittorio Assaf

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

We are a quick services Italian Restaurant serving ready made pastas, proteins, and

fresh salads.

	PE(S) OF LICENSE(S) ARE YOU APPLYING FOR (MARK ALL THAT APPLY):
a new	liquor license (Restaurant Tavern / On premise liquor Other)
an UP	GRADE of an existing Liquor License
an AL	TERATION of an existing Liquor License
a TRA	NSFER of an existing Liquor License
a HO	EL Liquor License
_ a DC/	A CABARET License
a CAT	ERING / CABARET Liquor License
X a BEE	R and WINE License
a REI	IEWAL of an existing Liquor License
an OF	F-PREMISE License (retail)
_ OTHE	R:
(Please in	clude physical or operational changes including hours, services, occupancy, ownership, etc.)
(Please in	N/A
If this is fo	N/A ar a new application, please list previous use of location for the last 5 years:
If this is fo	N/A
If this is fo	N/A ar a new application, please list previous use of location for the last 5 years:
If this is fo Liqu	nr a new application, please list previous use of location for the last 5 years: uiteria - Juice Bar ense under the ABC Law currently active at this location? yesx no
If this is for Liques Is any lices If yes, wh	nr a new application, please list previous use of location for the last 5 years: Interia - Juice Bar Inse under the ABC Law currently active at this location? yesX no at is the name of current / previous licensee, license # and expiration date: N/A To other licenses under the ABC Law been in effect in the last 10 years at this location?
If this is for Liques any lice of the second	nr a new application, please list previous use of location for the last 5 years: Interia - Juice Bar Inse under the ABC Law currently active at this location? yes X no at is the name of current / previous licensee, license # and expiration date: N/A To other licenses under the ABC Law been in effect in the last 10 years at this location?

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PREMISES:

By what right does the applicant have possession of the premises?						
Own _X LeaseSub-leaseBinding Contract to acquire real propertyother:						
Type of Building: Residential Commercial X_Mixed (Res/Com) Other:						
Number of floor: 4 Year Built : 1920						
Describe neighboring buildings: Mixed: Residential/Commercial						
Zoning Designation: C4-5						
Zoning Overlay or Special Designation (applicable)N/A						
Block and Lot Number:						
Does the premise occupy more than one building, zoning lot, tax lot or more than one floor? $_$ yes $_$ Xno						
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) noX_ yes : explainsidewalk cafe						
What is the proposed Occupancy?30						
Does the premise currently have a valid Certificate of Occupancy (C of O) and all appropriate permits?						
x 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 $\frac{X}{}$ 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? noX yes						
(if yes, please describe:change stationary awnings						

INTERIOR OF PREMISES: What is the total licensed square footage of the premises? _____720 sq ft If more than one floor, please specify square footage by floors: If there is a sidewalk café, rear yard, rooftop, or outside space, what is the square footage of the area? sidewalk cafe - 240 sq ft If more than one floor, what is the access between floors? $\underline{\hspace{1cm}}$ $\underline{\hspace{1cm}}$ $\underline{\hspace{1cm}}$ $\underline{\hspace{1cm}}$ 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? ____7 Total table seats? ____22___ Total number of bars? ____1 Total bar seats? ____0 Total number of "other" seats? 12 please explain : sidewalk cafe Total OVERALL number of seats in Premises : ______34 BARS: How many *stand-up bars / bar seats are being applied for on the premises? Bars $\underline{1}$ Seats $\underline{0}$ How many service bars are being applied for on the premises? Any food counters? X 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:

Bar Bar & Food X Restaurant Club/ Cabaret Hotel Other:

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

What are the Hou	urs of Opera	ation? *1	1:30am to 11p	om - 7 days a	week*	
Sunday: Mo	onday:	Tuesday:	Wednesday:	Thursday:	Friday:	Saturday:
to	to	to	to	to	to	to
Will the business	employ a r	manager? _	no <u>_X</u> yes,	name / experien	ce if known :	TBD
Will there be second bo you have or p	urity persor plan to insta	nnel? <u>X</u> no all French do	yes(if ye ors, accordion do	s, what nights ar oors or windows	nd how many that open? _	?) noyes
If yes, please des	scribe :	n/a				
Will you have TV	/s? <u>X</u> no	o yes (how many?)			
Type of MUSIC	/ ENTERT#	AINMENT: _	Live Music ·	_Live DJJ	uke Box <u>X</u>	Ipod / CDsnone
Expected Volume (check all that ap		K_ Backgrour	nd (quiet)E	ntertainment lev	el Amp	ified Music
Do you have or p	olan to insta	all soundprod	ofing? <u>X</u> no _	yes		
IF YES, will you I	be using a	professional	sound engineer	?		
Please describe	your sound	l system and	sound proofing:			
			n/a			
Will you be perm $\underline{No} \text{ any events}$					ces <u>No</u> out	side promoters
Do you have pla establishment?					trol on the sid	dewalk caused by your
Will you be utiliz	ingrc	pes <u>X</u> m	novable barriers	other outsid	de equipment	(describe)
Are your premis	ses within 2	00 feet of an	y school, church	or place of wors	hip? <u>X</u> no	yes
If there is a sch please submit premises (no l	a block ple	ot diagram d	or area map sho	n 200 feet of yo wing its' location	ur premises on in proxim	or on the same block ity to your applicant
Indicate the dist	tance in fee	t from the pr	oposed premise:			
Name of Schoo	ol / Church:			*************		
Address:					Distance	:
Name of Schoo	ol / Church:					

Address: <u>V (A</u>	Distance:
Name of School / Church:	
Address:	Distance:
Please provide contact information for Residents / Community Board and co	onfirm that if complaints are made
Contact Person: Fabro Granato Phone:	
Address:	
Email: Fabio @ Serafura Maragem	ent. Com
Application submitted on	
behalf of the applicant by:	
Signature	
Print or Type Name Full 60	inato
Title President	

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

Rider for Victor Assaf and Fabio Granato

Business Name	Business Address
Brasserie Cognac East Corp	963 Lexington Avenue New York, NY 10021
	,
Tribeca Hotel LLC, Tribeca Lobby	95 W Broadway
Bar LLC Primo Mgmt	New York, NY 10007
New Farinella LLC	1132 Lexington Avenue
	New York, NY 10075
Sofia 58 th Street Corp	38 E 85 th Street
	New York, NY 10022
Serafina Broadway LTD	210 W 55 th Street
300 0000000000000000000000000000000000	New York, NY 10019
Sofia Fabulous Pizza Corp	1022 Madison Avenue
Anna de la companya del companya de la companya de la companya del companya de la	New York, NY 10021
Serafina 77 West LLC	2178 Broadway AKA
	222 W 77 th Street
	New York, NY 10024
Serafina Meatpacking LLC	7 9 th Avenue
	New York, NY 10011
Serafina White Plains LLC	199 Main Street
	White Plains, NY 10601
Regency Restaurant LLC/Consulate	224 W 49 th Street
Hotel LLC	New York, NY 10019
Serafina Ludlow Corp	98 Rivington Street
	New York, NY 10002
Serafina Tribeca Restaurant LLC	113 Reade Street
	New York, NY 10013
Sofia 61st Street Corp	33 E 61 st Street
Solia of Street Corp	

The 393 Lafayette Street Meet	21 23 East 4 th Street New York, NY
Serafina 393 Lafayette St Corp	393 Lafayette Street New York, NY 10003
Brasserie Cognac DU Monsieur Balloon Corp	1740 Broadway New York, NY 10019
Serefina East Hampton Corp	102 104 N Main Street East Hampton, NY 11937
Sofia 61 st Street Corp	29 E 61 st Street New York, NY 10021

