Meeting Date:	May 2022
APPLICANT INFO	RMATION:
Name of applicant(s):	28 Seventh Avenue South LLC
Trade name (DBA):	Castamar
Premises address: 28	Seventh Avenue South, New York, NY 10014
	r addresses used for building/premise: ord and Leroy
CONTACT INFOR	MATION:
Principal(s) Name(s):	Delia Diaconu, Executor of the Estate of Samuel Milliken
Office or Home Addres	s: 28 Seventh Ave South
City, State, Zip:	/ York, NY 10014
Telephone #: _	email :mansionscatering@aol.com
Landlord Name / Cont	act:
Landlord's Telephone a	and Fax:
NAMES OF ALL PRIN Delia Diaconu, Executor of the Estate	NΔ
	posed operation (i.e. "We are a family restaurant that will focus on…"): ife offering rich and elegant cuisine. The dining experience is light and refined.

The dishes are characterized by adaptation of classic French Cruisine $\ensuremath{\mathsf{B}}\xspace$ ourgeoise.

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:

3/2017 to 5/2019 Icelandic Fish & Chips LLC, restaurant

5/2019 to 3/2022 - vacant 3/2022 to present - 28 Seventh Ave South under Temporary Retail Permit

Is any license under the ABC Law currently active at this location?	yes 🚺 💙	<_ no
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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?

If yes, please list DBA names and dates of operation: Grillade LLC dba Almanac, 2011 to 2017

Icelandic Fish & Chips, 2017 to 2019

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 🛛 🗶 CommercialMixed (Res/Com) Other:
Number of floor: 2 Year Built : 1920
Describe neighboring buildings: 5 Floor mixed residential and commercial buildings
Zoning Designation:C2-6
Zoning Overlay or Special Designation (applicable)
Block and Lot Number:583 /38
Does the premise occupy more than one building, zoning lot, tax lot or more than one floor? \mathbf{X} yes no
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) no yes : explain There will be tables adjacent to the restaurant and in the parking lane under the Open Restaurants What is the proposed Occupancy? 74
Does the premise currently have a valid Certificate of Occupancy (C of O) and all appropriate permits?
noX yes
If yes, what is the maximum occupancy for the premises? <u>100</u>
If yes, what is the use group for the premises? <u>Eating and drinking establishment</u> , use group 6
If yes, is proposed occupancy permitted? 🗶 yesno, explain :
If your occupancy is 75 or greater, do you plan to apply for Public Assembly permit? yesno
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? 🗶 no yes
(if yes, please describe:

INTERIOR OF PREMISES:

2500 (on y nc udes pub c area doesn't not nc ude ce ark tcher What is the total licensed square footage of the premises?
If more than one floor, please specify square footage by floors:1500 1st Floor, 1000 2nd Floor
If there is a sidewalk café, rear yard, rooftop, or outside space, what is the square footage of the area?
There will be tables adjacent to the restaurant (80 sqft) and in the parking lane (160sqft) under the Open Restaurants program.
If more than one floor, what is the access between floors?Stairs
How many entrances are there? How many exits? _1 How many bathrooms ? _2
Is there access to other parts of the building? 🗙 no yes, explain:
OVERALL SEATING INFORMATION:
Total number of tables? <u>12</u> Total table seats? <u>47</u>
Total number of bars? <u>1</u> Total bar seats? <u>4</u>
Total number of "other" seats? please explain : Outdoor seats under Open Restaurants program
Total OVERALL number of seats in Premises : 87 (includes outdoor and indoor seating)
BARS:
How many *stand-up bars / bar seats are being applied for on the premises? Bars <u>1</u> Seats <u>4</u>
How many service bars are being applied for on the premises?
Any food counters? 🗙 noyes, 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 _**X** Restaurant ___Club/ Cabaret ___Hotel ___Other: _____

What are	the	Hours	of O	perat	tion'	?
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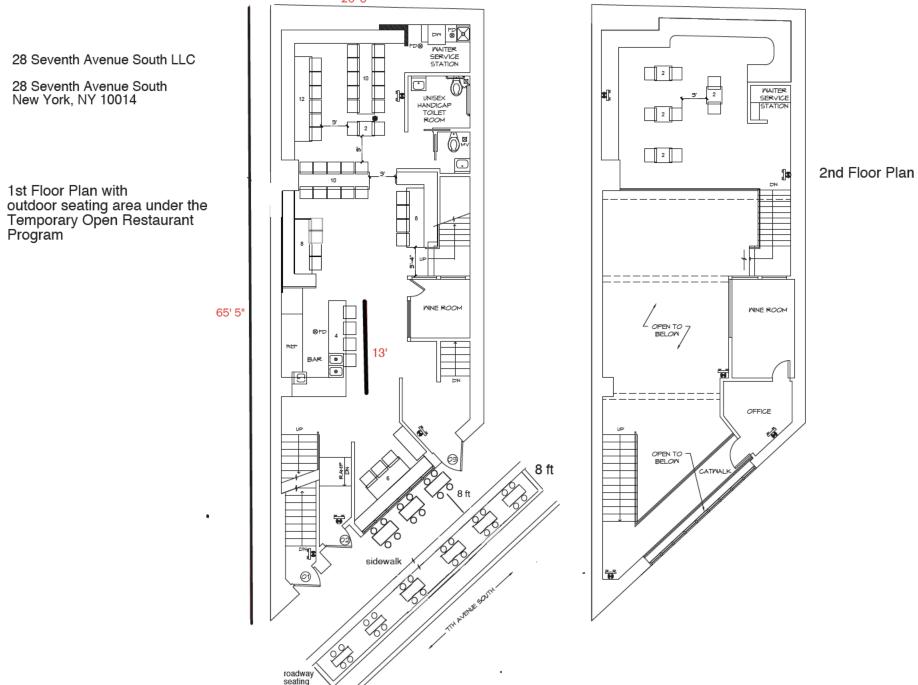
Sunday:	Monday:	Tuesday:	Wednesday:	Thursday:	Friday:	Saturday:
11am_to ^{12 midnig}	^{ht} 1am to ^{12 midnight}	^{12 midnigh} to	^t 1 <u>1am</u> to <u>12 midnight</u>	1 <u>1am _{to} 1am</u>	11 <u>am</u> to ^{1am}	1 <u>1am</u> to <u>1am</u>
Will the bus	iness employ	a manager? _	no <u>X</u> yes,	name / experie	ence if known :	
Will there b Do you hav	e security pers e or plan to ins	onnel? <u>X</u> no stall French do	o yes(if ye ors, accordion de	es, what nights oors or window	and how many s that open?	?) yes
Will you hav	ve TV's ? 🗡	no <u> </u>	(how many?)			
Type of ML	JSIC / ENTER	TAINMENT:	_ Live Music 🗴	Live DJ	Juke Box 🗙	lpod / CDsnone
Expected V (check all th		X Backgrour	nd (quiet) E	intertainment le	evel Ampl	fied Music
Do you hav	e or plan to ins	stall soundproc	fing?no _	X yes		
IF YES, will	you be using	a professional	sound engineer	? <u>N</u> o.		
	cribe your sour mus c p anned.	nd system and	sound proofing:	There s cork so	ound proof ng thro	bughout the who e bu_d ng.
-			vents <u>scheo</u> charged? <u>X</u> p	-	nces <u>out</u> s	side promoters
			s vehicular traffi es, please attach		ntrol on the sid	ewalk caused by your
Will you be	utilizing	ropes <u> </u>	ovable barriers	other outs	ide equipment	(describe)
Are your pro	emises within :	200 feet of any	school, church	or place of wors	ship? 🗶 no	yes
please sub	mit a block p		r area map show			or on the same block, y to your applicant
Indicate the	distance in fe	et from the pro	posed premise:			
Name of Sc	chool / Church:					
Address:					Distance:	

Name of School / Church:	
Address:	Distance:
Name of School / Church:	
Address:	Distance:
Please provide contact information for Residents / Community Board and o you will address it immediately. Delia Diaconu, Executor of the Estate of Samuel Milliken Contact Person:Phone: 28 Seventh Ave South, New York, NY 10014 Address: mansioncatering@aol.com Email : Application submitted on behalf of the applicant by: 	
TitleAttorney	

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.

Cart Sooth

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



20' 6"



