

Meeting Date: _____

APPLICANT INFORMATION:

Name of applicant(s):
_____ WAVERLY RESTAURANT-DINER LTD. _____

Trade name (DBA):
_____ WAVERLY RESTAURANT-DINER _____

Premises address:
_____ 385 6th AVENUE, NEW YORK, NEW YORK 10014 _____

Cross Streets and other addresses used for building/premise:
_____ CORNER OF WAVERLY PLACE AND 6TH AVENUE _____

CONTACT INFORMATION:

Principal(s) Name(s):
_____ JOHN CAPTAN _____

Office or Home Address: _____ [REDACTED] _____

City, State, Zip: _____ [REDACTED] _____

Telephone #: _____ [REDACTED] _____ email: _____ [REDACTED] _____

Landlord Name / Contact:
_____ 135 WAVERLY REALTY LLC _____

Landlord's Telephone and Fax: _____ [REDACTED] _____

NAMES OF ALL PRINCIPAL(s):	NAMES / LOCATIONS OF PAST / CURRENT LICENSES HELD
<u>CHRISTINE SERAFIS</u>	<u>73-20 31st AVENUE, JACKSON HEIGHTS, NEW YORK 11370</u>
<u>JOHN CAPTAN</u>	<u>30-56 74th STREET, JACKSON HEIGHTS, NEW YORK 11370</u>
<u>ANGELA CAPTAN</u>	<u>30-56 74th STREET, JACKSON HEIGHTS, NEW YORK 11370</u>

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

_____ Waverly Restaurant Diner has been in business since 2003. It's a restaurant which
_____ focuses on their cuisine. The beer and wine license is merely an accomodation to our
_____ patrons to offer a glass of wine or beer to enjoy with their meal.

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.)

No change to use and occupancy. John Captan and Angela Captan have been employed by Village Red Restaurant Corp. for 20 years.

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

N/A

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: _____

Village Red Restaurant Corp. No.: 1153261 Expires: August 31, 2023

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:

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: 3 Year Built : 19100

Describe neighboring buildings:
_____ MIXED _____

Zoning Designation: C4-5

Zoning Overlay or Special Designation (applicable) _____

Block and Lot Number: 593 / 28

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 (Pandemic) Structure

What is the proposed Occupancy? 16

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? 72

If yes, what is the use group for the premises? STORE

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: _____

INTERIOR OF PREMISES:

What is the total licensed square footage of the premises? Approximately 850 Square Footage

If more than one floor, please specify square footage by floors: Basement 850 Square Footage

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? STAIRCASE

How many entrances are there? 1 How many exits? 3* How many bathrooms? 2

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

* 1 Emergency Exit and 1 Delivery Entrance

OVERALL SEATING INFORMATION:

Total number of tables? 22 Total table seats? 68

Total number of bars? 0 Total bar seats? 0

Total number of "other" seats? 16 please explain: Outdoor Structure (Pandemic)

Total OVERALL number of seats in Premises: 68

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: 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 Restaurant Club/ Cabaret Hotel Other: _____

What are the Hours of Operation?

Sunday: Monday: Tuesday: Wednesday: Thursday: Friday: Saturday:
24 HOURS 24 HOURS
6AM to 12AM 6AM to 12AM 6AM to 12AM 6AM to 12AM 6AM to 12AM ____ to ____ ____ to ____

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? _____

Please describe your sound system and sound proofing: _____

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

____ any events at which a cover fee is charged? ____ private parties N/A

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) N/A

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 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: ANGELA CAPTAN Phone: [REDACTED]

Address: [REDACTED]

Email : [REDACTED]

Application submitted on behalf of the applicant by:


Signature

Print or Type Name JOHN CAPTAN

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.





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