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COMMUNITY BOARD No. 2, MANHATTAN

3 WASHINGTON SQUARE VILLAGE

NEW YORK, NY 10012-1899

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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 **5 business days** before the Committee meeting. In addition, bring **10 copies plus supporting material requested** 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. Speak to Florence Arenas at the Board Office. **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: June 7, 2022

APPLICANT INFORMATION:

Name of applicant(s): DL&Y LLC

Trade name (DBA): Da Long Yi Hot Pot

Premises address: 159 Canal Street, Suite 200, New York, NY 10013

Cross Streets and other addresses used for building/premise:
Elizabeth Street and Bowery Street

CONTACT INFORMATION:

Principal(s) Name(s): YuXin Jiang (LLC Manager), Ze Chen (LLC Member)

Office or Home Address: 159 Canal Street, Suite 200

City, State, Zip: New York, NY 10001

Telephone #: [REDACTED] email : Jameschen@dalongyinc.com

Landlord Name / Contact: [REDACTED]

Landlord's Telephone and Fax: [REDACTED]

NAMES OF ALL PRINCIPAL(s):	NAMES / LOCATIONS OF PAST / CURRENT LICENSES HELD
<u>YuXin Jian</u>	<u>DL&Y LLC, 159 Canal Street, Suite 200, New York, NY 10013</u>
<u>Ze Chen</u>	<u>DL&Y LLC, 159 Canal Street, Suite 200, New York, NY 10013</u>
<u> </u>	<u> </u>

Briefly describe the proposed operation (i.e. "We are a family restaurant that will focus on..."):
It is franchise - "Da Long Yi Hot Pot". It's one of the most famous brands for Hot Pot Restaurant in
China. They have over 300 stores in the whole world.

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.)

Upgrading Restaurant Wine License to On-Premise Liquor License. There are no physical or operational changes including hours, services, occupancy and ownership.

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: _____

DL&Y LLC d/b/a Da Long Yi Hot Pot, Serial # 1320757, Expiration date: 01/31/2024

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:

N/A

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: 5 Year Built : 2017

Describe neighboring buildings:
_____ Commercial and Office Buildings _____

Zoning Designation: C6-1G

Zoning Overlay or Special Designation (applicable) _____

Block and Lot Number: 203 / 2

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? 87

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? 128

If yes, what is the use group for the premises? 5

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? 3500 SF

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?

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

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

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

OVERALL SEATING INFORMATION:

Total number of tables? 21 Total table seats? 87

Total number of bars? 0 Total bar seats? 0

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

Total OVERALL number of seats in Premises : 87

BARS:

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

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

Any food counters? ___ no ___ yes, describe : _____

For Alterations and Upgrades:

Please describe all current and existing bars / bar seats and specific changes: There are no changes
on the seatings and the diagram of the premises is the same, no bar will be added.

* 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 Operation?

Sunday: 11:30am 10:30pm Monday: 11:30am 10:30pm Tuesday: 11:30am 10:30pm Wednesday: 11:30am 10:30pm Thursday: 11:30am 10:30pm Friday: 11:30am 11:30pm Saturday: 11:30am 11:30pm

Will the business employ a manager? [X] no ___ yes, name / experience if known : _____

Will there be security personnel? [X] no ___ yes(if yes, what nights and how many?) _____

Do you have or plan to install French doors, accordion doors or windows that open? [X] no ___ yes

If yes, please describe : _____

Will you have TV's ? ___ no [X] yes (how many?) _____ 3

Type of MUSIC / ENTERTAINMENT: ___ Live Music ___ Live DJ ___ Juke Box [X] Ipod / CDs ___ none

Expected Volume level: [X] Background (quiet) ___ Entertainment level ___ Amplified Music (check all that apply)

Do you have or plan to install soundproofing? [X] no ___ yes

IF YES, will you be using a professional sound engineer? _____

Please describe your sound system and sound proofing: Basic Sound System _____

Will you be permitting: [NO] promoted events [NO] scheduled performances [NO] outside promoters

[NO] any events at which a cover fee is charged? [NO] private parties

Do you have plans to manage or address vehicular traffic and crowd control on the sidewalk caused by your establishment? [X] no ___ yes (if yes, please attach plans) There will not be traffic and crowd on the sidewalk caused by establishment.

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? [X] 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: Zeder Phone: 

Address: 159 Canal - Suite 200 New York NY 10013

Email: Janos.zeder@Dabbney7.com

Application submitted on behalf of the applicant by:

Zeder
Signature

Print or Type Name Zeder

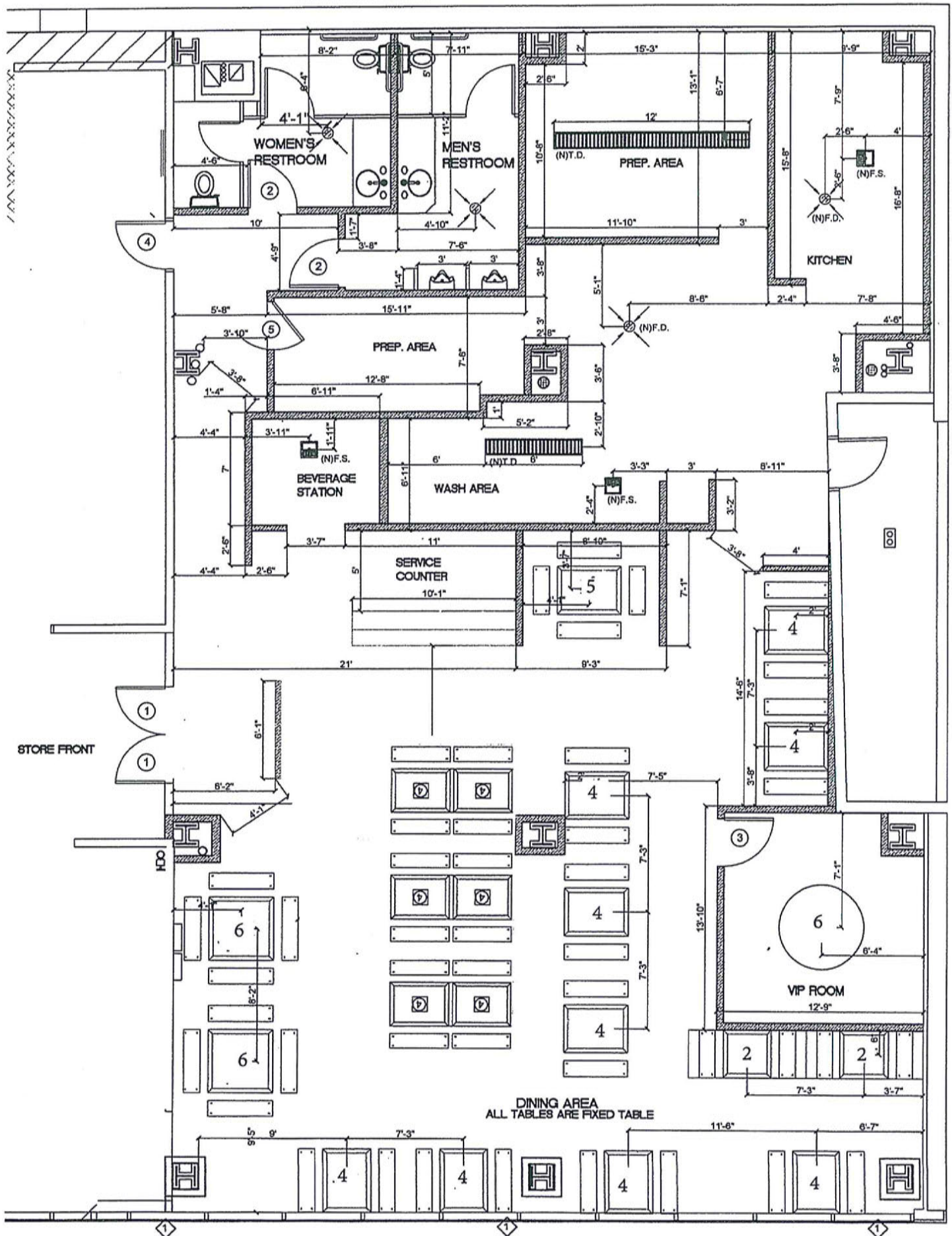
Title HC Member

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



NORTH NEW FLOOR PLAN
 SCALE: 1/4"=1'-0"

Interior Diagram for DL&Y LLC d/b/a Da Long Yi Hot Pot
 159 Canal Street, Suite 200, New York, NY 10013

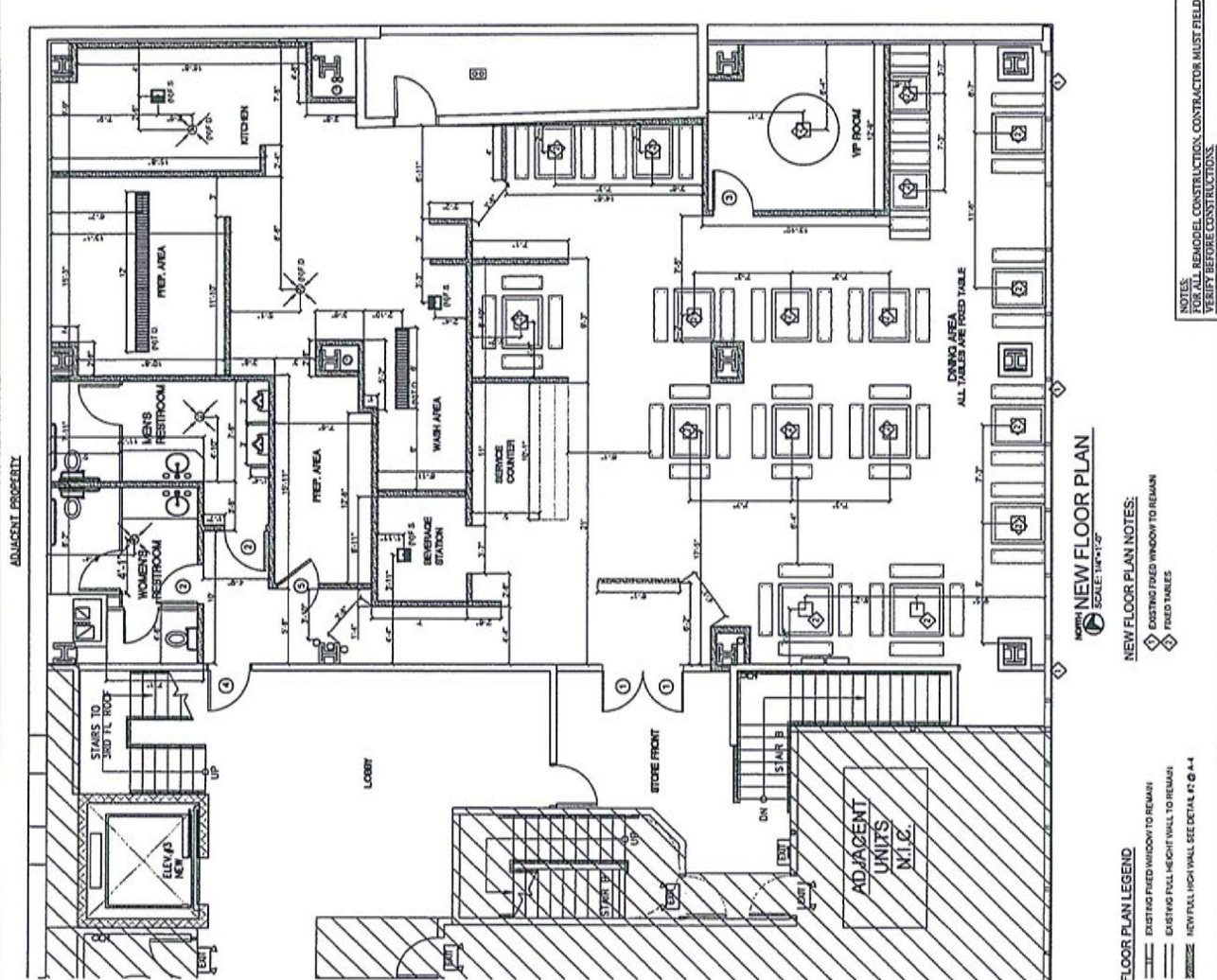


NEW FLOOR PLAN
DOOR SCHEDULE

JOB NAME
DALONGY RESTAURANT T.I.
159 CANAL STREET, UNIT E
NEW YORK, NY 10013

JOB NO.
Job Begin: 6/05/2018
Scale
Plot Date: 6/22/2018

SHEET NO.
A-2



NOTES:
FOR ALL REMODEL CONSTRUCTION, CONTRACTOR MUST FIELD
VERIFY BEFORE CONSTRUCTIONS.

DOOR SCHEDULE

NO.	QTY.	SIZE	TYPE	MATERIAL	RATED	HARDWARE	REMARKS
1	3	2'-0" x 7'-2" (PWR)	C	EXISTING FRONT DOOR TO REMAIN	A	(D, E, F)	SEE NOTES #1, #2, #3, #5
2	2	2'-0" x 7'-2" x 1'-3"	B	RESTROOM DOOR	A	(C, G)	SEE NOTES #7, #8
3	1	2'-0" x 7'-2" x 1'-3"	A	WOOD DOOR	A	(D, E, F)	
4	1	2'-0" x 7'-2" x 1'-3"	B	EXISTING BACK DOOR TO REMAIN	A	(D, E, F)	SEE NOTES #6, #8, #9
5	1	2'-0" x 7'-2" x 1'-3"	D	SIS DOUBLE SWITCH KITCHEN DOOR	A	(C, G)	



- NOTES:
1) PROVIDE H.C. SOU OUTFRONT DOOR
2) PROVIDE SIGN STATING "THE DOOR TO REMAIN UNLOCKED DURING BUSINESS HOURS" @ 7" MIN. HT. LETTER
3) ALL EXTERIOR DOORS OPEN OUTWARD & SHALL BE TIGHT FITTING TO SPECTRUM-FIT THE ENTRANCE OF FLEETS & BOOTHS
4) PROVIDE SIGN LOCATED ABOVE & WITHIN 2" OF PANIC BAR READING "PULL ONLY, ALARM SOUNDS WHEN OPENED"
5) EXIT DOOR SHALL BE OPERABLE FROM THE INSIDE WITHOUT THE USE OF KEYS OR TOOLS AND SHALL BE SELF-CLOSING AND SELF-RELEASING LOCKING ON EXIT DOORS
6) THE BOTTOM 18" OF ALL DOORS TO HAVE A SMOOTH UNINTERRUPTED SURFACES FOR 12" MIN.
7) DOORS HANGING SHALL BE, (SEE TYPE, REVISION, OR SUPPLEMENT) MAXIMUM EFFORT TO OPERATE DOORS SHALL NOT EXCEED 4 LBS FOR EXTERIOR DOORS AND 2 LBS FOR INTERIOR DOORS
8) ALL MEANS OF EGRESS DOORS SHALL COMPLY WITH THE REQUIREMENTS:
a. UNLOCKABLE FROM THE INSIDE WITH THE KEY OR KEYCARD AND FRAMES WITH NO MIRRORS, CURTAINS, DRAPES, DECORATIONS, REQUIRED BUT DOORS SHALL HAVE NOT LESS THAN 20" IN CLEAR WIDTH, 60" IN CLEAR HEIGHT, AND SHALL BE CAPABLE OF OPENING IN BOTH DIRECTIONS. THE MAXIMUM SWINGING DOOR LEAF WIDTH SHALL BE 42".
c. EGRESS DOORS SHALL BE OF THE PHOTOED OR SPOKE-HINGED SWINGING TYPE OR BULLING OR HUNG OR HUNG INTERIOR SWINGING EGRESS DOORS, OTHER THAN FIRE DOORS, SHALL NOT EXCEED 5 POUNDS FOR OTHER SWINGING DOORS. SHALL AS SLEEPING AND FOLLOWING DOORS, THE DOOR LATCH SHALL RELEASE WHEN SUBJECTED TO A 15-POUNDS FORCE. THE DOOR SHALL SWING TO A FULL-OPEN POSITION WHEN SUBJECTED TO A 15-POUNDS FORCE.
8) THE HARDWARE MUST BE SINGLE ACTION FROM INSIDE OR DOOR BELT

ROOM FINISH SCHEDULE

ROOM NAME	FLOOR	BASE	WALL	PAINT	CEILING
DINING AREA	QUANTITY TILE	QUANTITY TILE	QUANTITY TILE	QUANTITY TILE	QUANTITY TILE
VP ROOM	QUANTITY TILE	QUANTITY TILE	QUANTITY TILE	QUANTITY TILE	QUANTITY TILE
KITCHEN AREA	QUANTITY TILE	QUANTITY TILE	QUANTITY TILE	QUANTITY TILE	QUANTITY TILE
WOMEN/MEN RESTROOMS	QUANTITY TILE	QUANTITY TILE	QUANTITY TILE	QUANTITY TILE	QUANTITY TILE
DAY STORAGE AREA	QUANTITY TILE	QUANTITY TILE	QUANTITY TILE	QUANTITY TILE	QUANTITY TILE
PREP/WASH AREA	QUANTITY TILE	QUANTITY TILE	QUANTITY TILE	QUANTITY TILE	QUANTITY TILE

FINISH SCHEDULE NOTES:
1. FINISH AND MATERIAL SPECIFICATIONS ARE TO BE COMPLETED BY THE ARCHITECT. CONTRACTOR SHALL VERIFY THE QUALITY OF THE FINISH AND MATERIALS. CONTRACTOR SHALL BE RESPONSIBLE FOR OBTAINING ALL NECESSARY PERMITS AND APPROVALS FROM THE LOCAL AUTHORITY.
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