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

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</u> 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)

| APPLICANT INFO | RMATION | | | | | |
|--|-----------------------|--|--|--|--|--|
| Name of applicant(s): | Night Owl C | comedy LLC | | | | |
| Trade name (DBA): | Comedy Cellar | | | | | |
| Premises address: | 118 West Third Street | | | | | |
| Cross Streets and othe | | used for building/premise: | | | | |
| CONTACT INFOR | | | | | | |
| Principal(s) Name(s): | | man, Elizabeth Furiati | | | | |
| Office or Home Addres | ss: c/o Come | dy Cellar, 117 MacDougal Street | | | | |
| City, State, Zip: New | York, NY 100 | 012 | | | | |
| Telephone #: | | | | | | |
| Landlord Name / Con | ntact: | | | | | |
| Landlord's Telephone | and Fax: _ | | | | | |
| NAMES OF ALL PRINCIPAL(s): Noam Dworman | | NAMES / LOCATIONS OF PAST / CURRENT LICENSES HELD Dynamic Music Corp d/b/a Olive Tree Cafe & Comedy Cellar 117 MacDougal Street, New York, NY 10012 (Active) | | | | |
| | | GBND Enterprises Inc. d/b/a The Village Underground 130 West Third Street, New York, NY 10012 (Active) | | | | |
| Elizabeth Furiati | | None | | | | |
| | | ion (i.e. "We are a family restaurant that will focus on"): milar to the Comedy Cellar at 117 MacDougal and the Village Underground at | | | | |
| | | | | | | |
| | | | | | | |

Meeting Date: November 1/3, 2022

| WHAT TYPE(S) OF LICENSE(S) ARE YOU APPLYING FOR (MARK ALL THAT APPLY): | | | | | | |
|--|--|--|--|--|--|--|
| X a new liquor license (Restaurant X 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.) N/A | | | | | | |
| If this is for a new application, please list previous use of location for the last 5 years: Japanese restaurant | | | | | | |
| | | | | | | |
| Is any license under the ABC Law currently active at this location? X yes no | | | | | | |
| If yes, what is the name of current / previous licensee, license # and expiration date: | | | | | | |
| Miyabi Sushi Japanese Restaurant NY Inc. d/b/a Miyabi Sushi (1279571); 07/31/2024 | | | | | | |
| Have any other licenses under the ABC Law been in effect in the last 10 years at this location? yes _X_no | | | | | | |
| If yes, please list DBA names and dates of operation: | | | | | | |
| Unknown; the Miyabe Sushi license has been in effect since 2014. | | | | | | |
| | | | | | | |

PREMISES:

| By what right does the applicant have possession of the premises? | | | | | | | | |
|--|--|--|--|--|--|--|--|--|
| Own _X_ Lease Sub-lease Binding Contract to acquire real property other: | | | | | | | | |
| Type of Building: Residential Commercial _X_Mixed (Res/Com) Other: | | | | | | | | |
| Number of floor:5 Year Built :1900 | | | | | | | | |
| Describe neighboring buildings: <u>Mixed commercial and residential buildings with a commercial unit on the ground floor and apartments above.</u> | | | | | | | | |
| Zoning Designation: R7-2 with C1-5 Overlay (Store C1-5) | | | | | | | | |
| Zoning Overlay or Special Designation (applicable) C1-5 | | | | | | | | |
| Block and Lot Number: 543 / 20 | | | | | | | | |
| Does the premise occupy more than one building, zoning lot, tax lot or more than one floor? yes \underline{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 : No proposed Exterior changes | | | | | | | | |
| Will any outside area or sidewalk café be used for the sale or consumption of alcoholic beverages? (including sidewalk, roof and yard space) _X_ no yes : explain | | | | | | | | |
| What is the proposed Occupancy? | | | | | | | | |
| Does the premise currently have a valid Certificate of Occupancy (C of O) and all appropriate permits? | | | | | | | | |
| no _X yes | | | | | | | | |
| If yes, what is the maximum occupancy for the premises?145 | | | | | | | | |
| If yes, what is the use group for the premises? <u>Use Group 6 eating and drinking</u> | | | | | | | | |
| If yes, is proposed occupancy permitted? X yes no, explain : | | | | | | | | |
| If your occupancy is 75 or greater, do you plan to apply for Public Assembly permit? X yesno | | | | | | | | |
| The state of the Certificate of Occupancy? — X — yes — — no (if yes, please provide copy of application to the NYC DOB) *Application not filed * Revise PA Layout * R | | | | | | | | |
| Will the façade or signage be changed from what currently exist at the premise? no _X_ yes | | | | | | | | |
| (if yes, please describe: A new sign with the name, "Comedy Cellar" will be installed | | | | | | | | |

INTERIOR OF PREMISES:

| What is the total licensed square footage of the premises? 2,269 square feet | | | | |
|---|--|--|--|--|
| If more than one floor, please specify square footage by floors: First floor: 1,315 sq.ft., basement: 954 sq.ft. | | | | |
| If there is a sidewalk café, rear yard, rooftop, or outside space, what is the square footage of the area? | | | | |
| N/A | | | | |
| If more than one floor, what is the access between floors? Sidewalk hatch to basement | | | | |
| How many entrances are there?1 How many exits?2 How many bathrooms ?2 | | | | |
| Is there access to other parts of the building? no _X_ yes, explain: There is an exit to the residential area of the building, which will remain locked at all times. | | | | |
| OVERALL SEATING INFORMATION: | | | | |
| Total number of tables? 34 Total table seats? 68 | | | | |
| Total number of bars?1 Total bar seats?0 | | | | |
| Total number of "other" seats? please explain : | | | | |
| Total OVERALL number of seats in Premises :68 | | | | |
| BARS: | | | | |
| How many *stand-up bars / bar seats are being applied for on the premises? Bars0_ Seats0_ | | | | |
| How many service bars are being applied for on the premises?1 | | | | |
| Any food counters? X no yes, describe : 1 service counter | | | | |
| For Alterations and Upgrades: N/A | | | | |
| 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 _X_Bar & FoodRestaurantClub/ CabaretHotel _X_Other: _Comedy club | | | | |

Note: The 4 am closing time Is for special circumstances only. If a well known comedian stops in they will allow them to perform later. In the ordinary course, the closing time will be Midnight (Sunday-Thursday)and 2:00 am (Friday and Saturday).

| Sunday: | Monday: | Tuesday: | Wednesday: | Thursday: | Friday: | Saturday: | | |
|--|----------------------------------|--------------------------------|--|---|-----------------------------------|--|--|--|
| 6pm to 4am | 6pm to 4am | 6pm to 4am | 6pm to 4am | 6pm to 4am | <u>6pm</u> to <u>4am</u> | 6pm to 4am | | |
| will manage. Will there b | She has 26 yea e security per | ars experience ma sonnel? n | no _X_ yes, anaging the Comedo o _X yes(if ye ors, accordion de | ly Cellar on 117 M es, what nights a | acDougal Street. and how many1 | 2; all nights | | |
| If yes, pleas | se describe : _ | | | | | | | |
| Will you ha | ve TV's ? X | no yes | (how many?) _ | | | | | |
| Type of MU | JSIC / ENTER | RTAINMENT: _ | Comedy F X_ Live Music _ | Performances Live DJ | Juke Box X | Ipod / CDsnone | | |
| Expected Volume level: X Background (quiet) X Entertainment level Amplified Music (check all that apply) for comedy performances | | | | | | | | |
| Do you have or plan to install soundproofing?no _X yes | | | | | | | | |
| IF YES, will you be using a professional sound engineer? X | | | | | | | | |
| Please describe your sound system and sound proofing: The plan is not finalized yet, but it will be fully soundproofed similar to the other establishments. | | | | | | | | |
| All promot | ion of events | will be internal | vents <u>X</u> sched l. charged? <u>X</u> p | · | ces outs | ide promoters | | |
| • | • | • | ss vehicular traffi es, please attach | | ntrol on the side | ewalk caused by your | | |
| Will you be utilizing X ropes movable barriers other outside equipment (describe) Timing entrances and staggered seating to avoid any buildup of crowds on the street. Ropes will be used to maintain an open sidewalk for passage by pedestrians. | | | | | | | | |
| Are your pr | emises within | 200 feet of any | school, church | or place of wors | hip? X no | yes | | |
| please sub | mit a block p | • | r area map shov | • | • | or on the same block, y to your applicant | | |
| Indicate the | distance in fe | eet from the pro | posed premise: | N/A | | | | |
| Name of So | chool / Church | ı: | | · · · · · · · · · · · · · · · · · · · | | | | |
| Address: | | | | · · · · · · · · · · · · · · · · · · · | Distance: | | | |

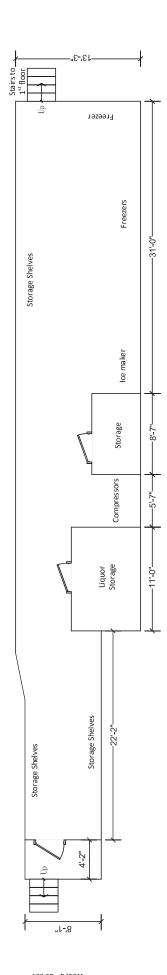
| Name of School / Church: | |
|--|---|
| Address: | Distance: |
| Name of School / Church: | |
| Address: | Distance: |
| Please provide contact information for Residents / Commuyou will address it immediately. | unity Board and confirm that if complaints are made |
| Contact Person: Liz Furiati | Phone: |
| Address: c/o Comedy Cellar, 117 MacDougal Street, Ne | ew York, NY 10012 |
| Email : liz@comedycellar.com | |
| Application sub- behalf of the app | |
| Elizabeth Fu | vriati |
| Signatur | re e |
| Print or Type Name_Elizabeth | Furiati |
| Title LLC Men | nber |

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

13'-0"

INTERIOR DIAGRAM – 1st Floor (Proposed) 118 West 3rd Street New York, NY October 7, 2022 NOT TO SCALE



INTERIOR DIAGRAM – Basement 118 West 3rd Street New York, NY October 7, 2022

NOT TO SCALE