APPLICANT INFORMATION:	
Name of applicant(s): 177 1ST AVE LLC	
Trade name (DBA): Figure Eight	
Premises address: 18 Cornelia Street, New York, NY 1	0014
Cross Streets and other addresses u West 4th Street & Bleecker Street	sed for building/premise:
CONTACT INFORMATION:	
Principal(s) Name(s): Simon Xi & Emmeline Zhao	
Office or Home Address:	
City, State, Zip:	
City, State, Zip:	erly Place, New York, NY 10017
City, State, Zip:	Port of August
City, State, Zip: Telephone #: _4 Landlord Name / Contact: 20 Pierre Associates LLC- 11 Wave	Port of August
City, State, Zip: Telephone #: _4 Landlord Name / Contact: 20 Pierre Associates LLC- 11 Wave Landlord's Telephone and Fax:21	2-315-5555
City, State, Zip:	2-315-5555 NAMES / LOCATIONS OF PAST / CURRENT LICENSES HELD
City, State, Zip:	2-315-5555 NAMES / LOCATIONS OF PAST / CURRENT LICENSES HELD 20 Cornelia LLC- Serial #1314974- 20 Cornelia Street CURRENT: 20 Cornelia LLC- Serial #1314974- 20 Cornelia Street; 847 Union St LLC- Serial #- 1317143- 847B Union St, Brooklyn; Sullivan Street Partners I LLC- Serial # 1266084- 128 W Houston St PAST: Nice Tail LLC- Serial #1281723- 1 Penn Plaza; 439 3rd Ave LLC - Serial #1285333- 439 3rd Avenue; 177 1st Ave LLC- Serial

WHAT TYPE(S) OF LICENSE(S) ARE	YOU APPLY	ING FOR (MAN	RK ALL TH	AI APPLI	
a new liquo	license (Restauran	Tavern /	On premise liqu	orOth	er)	
_ an UPGRA	DE of an existing Liquor	_icense				
_ an ALTERA	TION of an existing Liqu	or License				
X a TRANSFI	R of an existing Liquor I	icense				
_ a HOTEL L	quor License					
a DCA CAE	ARET License					
_ a CATERIN	G / CABARET Liquor Lic	ense				
_ a BEER an	WINE License					
_ a RENEWA	L of an existing Liquor L	icense				
an OFF-PF	EMISE License (retail)					
_ ~~~						
OTHER:_	ation, or transfer, please physical or operational o	describe spec	cific nature of cha ing hours, service	nges: es, occupan	cy, owners	hip, etc.)
OTHER : _ If upgrade, alter (Please include	ation, or transfer, please	describe spec hanges includi	ing hours, service	es, occupan		hip, etc.)
OTHER:_ If upgrade, alter (Please include) If this is for a ne	ation, or transfer, please physical or operational o	describe spec changes includi	of location for the	es, occupan	s:	
OTHER:_ If upgrade, alter (Please include) If this is for a new	ation, or transfer, please physical or operational of the physical or operation, please list censed premises has be	describe spec changes including previous use	of location for the	es, occupan	s:	atinka Inc d/b/a
OTHER:_ If upgrade, alter (Please include) If this is for a new The proposed I Pearl Oyster Balls any license u	ation, or transfer, please physical or operational of the physical or operation, please list operated premises has been at a Serial #1029452	describe specthanges including the previous use the previ	of location for the as a restaurant for this location?	e last 5 year or 5+ vears-	s: Powerful K	atinka Inc d/b/a
OTHER:_ If upgrade, alter (Please include) If this is for a new The proposed I Pearl Oyster Balls any license used.	ation, or transfer, please physical or operational of the application, please list censed premises has been ar- Serial #1029452	describe specthanges including the previous use the previous use the previous use the previous licensee, the previ	of location for the as a restaurant for this location?	e last 5 year or 5+ vears-	s: Powerful K	atinka Inc d/b/a
OTHER:_ If upgrade, alter (Please include) If this is for a new The proposed I Pearl Oyster Balls any license used in the proposed I Is any license used I proposed	ation, or transfer, please physical or operational of the physical or operational or opera	describe specthanges including a previous use the previous use the previous use the previous licensee, the previou	of location for the as a restaurant for the location?	e last 5 year or 5+ years- X yes piration date	s: Powerful K	atinka Inc d/b/a

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
Number of floor: Year Built
Describe neighboring buildings: Mixed Use
Zoning Designation:R6 with commercial overlayl
Zoning Overlay or Special Designation (applicable)
Block and Lot Number:589 / _17
Does the premise occupy more than one building, zoning lot, tax lot or more than one floor? $\frac{X}{}$ yes $$ no
Is the premise located in a historic district? X yes no *Ground floor and basement (basement is for storage only)
(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 _X_ yes : explain
What is the proposed Occupancy?74
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?74
If yes, what is the use group for the premises? 6
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?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 _X_ yes
(if yes, please describe: Similar to previous signage

INTERIOR OF PREMISES:

INTERIOR OF PREMISES:
What is the total licensed square footage of the premises? Approximately 2300 square feet
If more than one floor, please specify square footage by floors: Ground floor- approximately 1300 square feet; Basement- approximately 1000 square
If there is a sidewalk café, rear yard, rooftop, or outside space, what is the square footage of the area?
Roadway seating
If more than one floor, what is the access between floors?
How many entrances are there?1 How many exits? _1 How many bathrooms ?2
Is there access to other parts of the building? X no yes, explain:
OVERALL SEATING INFORMATION:
Total number of tables? 12 Total table seats? 30 *Outdoor seating is 10 tables with 20 table
Total number of bars?1 Total bar seats?15 seats.
Total number of "other" seats? please explain :
Total OVERALL number of seats in Premises :45
BARS:
How many *stand-up bars / bar seats are being applied for on the premises? Bars 1 Seats 15
How many service bars are being applied for on the premises?
Any food counters? X 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)
X Bar Bar & Food X RestaurantClub/ CabaretHotelOther:

		eration?				
				Thursday:		
1am 12am	11am 12am	11am 12am	11am 12am	11am 12am	11am 12am	11am 12am
Will the bus	siness employ	a manager? _>	K_noyes,	name / experie	nce if known:	
Will there b Do you hav	e security pers e or plan to in	sonnel? X no stall French do	o yes(if ye ors, accordion d	es, what nights a oors or windows	nd how many? that open? X)yes
If yes, pleas	se describe : _					
Will you ha	ve TV's ? X	noyes	(how many?) _			
Type of MI	USIC / ENTER	TAINMENT: _	_ Live Music _	_Live DJ	Juke Box I	pod / CDs
Expected V (check all the	olume level: hat apply)	Backgrour	nd (quiet) E	Entertainment lev	/el Amplif	ied Music
Do you hav	e or plan to in	stall soundprod	ofing?no	X_yes		
IF YES, wil	l you be using	a professional	sound engineer	?		
Please des	cribe your sou	and system and	sound proofing	lpod with sim	nle sneakers	
Will you be	permitting:	promoted ev	vents sche	duled performan	ces outs	ide promoters
				duled performan	cesouts	ide promoters
			ventssche		cesouts	ide promoters
any ev	vents at which	a cover fee is o	charged? X	orivate parties c and crowd cor		
any ev	vents at which ve plans to ma ent? no	a cover fee is on a cover fee	charged? X pass vehicular traffices, please attack	orivate parties c and crowd cor	itrol on the side	walk caused by
any ev Do you have stablishme Will you be	vents at which ve plans to ma ent? no utilizing	a cover fee is on a cover fee	charged? X pass vehicular traffices, please attack	orivate parties c and crowd cor n plans)	ntrol on the side	ewalk caused by describe)
Do you have stablishmed Will you be Are your profit there is please sul	vents at which ve plans to ma ent? no utilizing remises within a school, chu	a cover fee is a nage or addres X yes (if ye ropes m	charged? X pass vehicular traffices, please attack ovable barriers a school, church of worship withing area map sho	orivate parties c and crowd cor n plans)other outsi	ntrol on the side de equipment (ewalk caused by describe) yes
Do you have establishmed Will you be Are your professes subpremises	vents at which ve plans to ma ent? no utilizing remises within a school, chu bmit a block p (no larger the	nage or addres X yes (if ye ropes m 200 feet of any rich or place of lot diagram of	charged? X pass vehicular traffices, please attack ovable barriers a school, church of worship withing area map sho	orivate parties or and crowd cor or plans)other outside or place of wors or 200 feet of you	ntrol on the side de equipment (ewalk caused by describe) yes
Do you have establishmed Will you be Are your professes subpremises Indicate the	vents at which ve plans to ma ent? no utilizing remises within a school, chu bmit a block p (no larger the	a cover fee is a mage or addres X yes (if ye ropes m 200 feet of any arch or place of an 8 ½ " x 11") eet from the property of the pro	charged? X pass vehicular traffices, please attack ovable barriers a school, church of worship withing area map should be posed premise:	orivate parties or and crowd cor or plans)other outside or place of wors or 200 feet of you	atrol on the side de equipment (hip? X no our premises o	ewalk caused by describe) yes or on the same in

Name of School / Church:	
Address:	Distance:
Name of School / Church:	
Address:	Distance:
Please provide contact information fo you will address it immediately.	or Residents / Community Board and confirm that if complaints are made
Contact Person:	Phone:
Address:	
Email :	
	Application submitted on behalf of the applicant by: Signature
Print or Ty	ype NameSimon Xi
	Title_ LLC Managing 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 Donna Raftery, Co-Chair Robert Ely, Co-Chair

Jum Fager

177 1ST AVE LLC d/b/a FIGURE EIGHT 18 Cornelia Street, New York, NY 10014

MENU

Snacks

F8 Hush Puppies Sweet corn, scallion, chili mayo

Prawns in a Blanket Atlantic shrimp sausage, Chinese mustard, napa kraut

> Sticky Rice Stuffed Dates Pecan, osmanthus glaze

House Country Bread Shellfish herb oil

Small

Oysters

Cold with mandarin orange mignonette and mustard cocktail sauce

Hot deviled oysters with tien tsin chili, ginger and fish sauce

Cold Shanghainese 'Smoked' Mackerel Ginger pickled cucumbers, Shanghai BBQ sauce, house milk buns

Chicken Fried Green Tomatoes House sweet and sour sauce, low country remoulade

Shrimp and Burnt End Dumplings Black vinegar, ginger, maple

Sea Island Red Pea and Mung Bean Salad Roasted long hots, li hing mui, dates

Larger

Salt & Pepper Shrimp and Millet Grits Figure Eight S&P spice, shellfish oil

Steamed Montauk Fluke Ginger-scallion-sov, wilted lettuces

Grilled Tilefish

Chinese black bean sauce, lotus root

Carolina Egg Drop Fish Stew Striped bass, larou, tomato

> Red Braised Pork Ribs Shaoxing, broccoli slaw

Just here for the Crabs

Fried Chesapeake Blue Crabs
Salted egg and Old Bay
or
Figure Eight S&P spice

Crab Dip Potato, dried chili, caramelized cheese curds

Crab Balls

Scallion, ginger, sweet and sour sauce

Crab Toast House milk bread, sesame, old bay

Sides

Braised Collard Green Salad Crunchy soybean, fried shallot, smoked red braised pork

Seafood Boil Warm Potato Salad Shrimp butter; Figure Eight spice mix

> Sauteed Morning Glory Triple garlic

Turnip Cake Tater Tots Soy dipping sauce, smoked house ketchup

Sorghum Combread scallop butter

Sweets

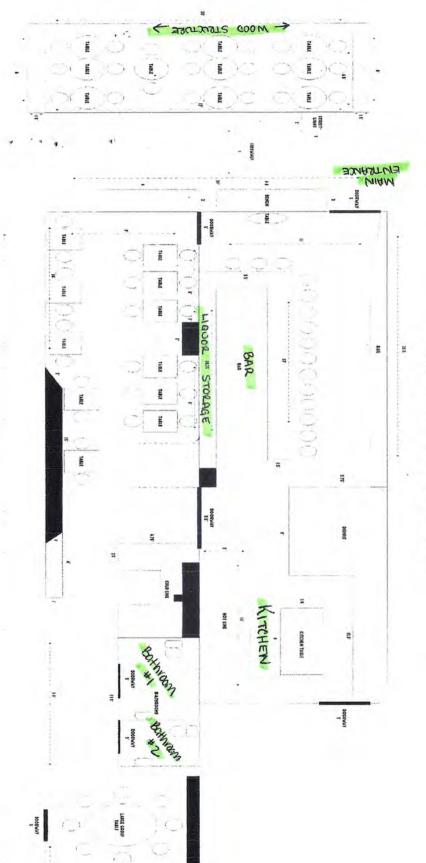
Not Quite Krispy Kreme Crullers Caramel duck sauce and chocolate sauce

Peach Cobbler
Toasted rice ice cream

Pecan and Sorghum Pie Whipped crème fraiche

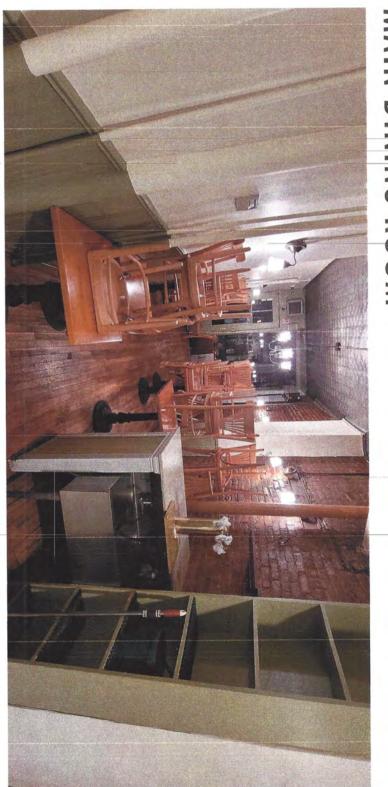
Cheerwine Float
Toasted rice ice cream

177 1ST AVE LLC d/b/a FIGURE EIGHT- GROUND FLOOR DIAGRAM 18 Cornelia Street, New York, NY 10014

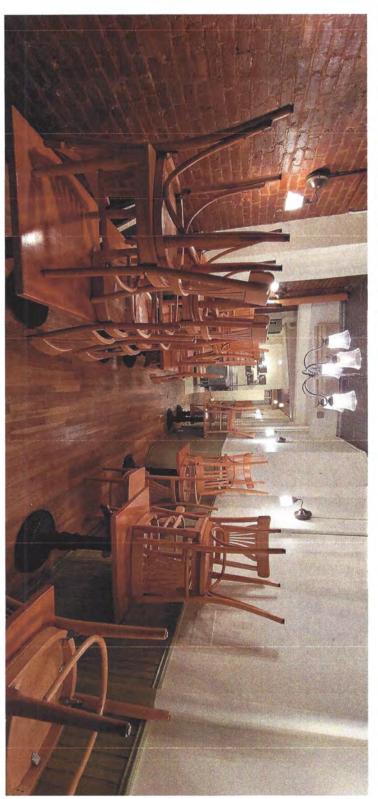


<u>SEATING</u>
INDOORS- 12 Tables, 45 Total Seats (30 Seats at Tables, 15 Bar Seats)
OUTDOORS: 10 Tables; 20 Total Seats

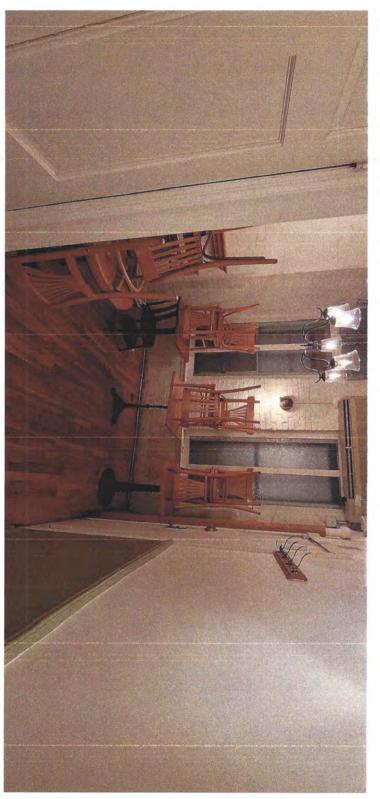
MAIN DINING ROOM



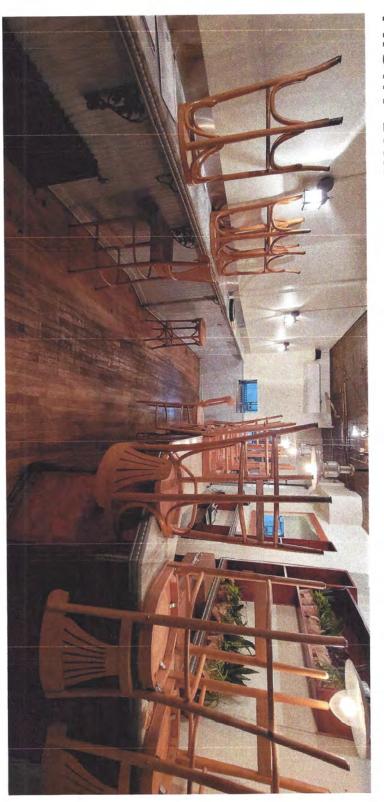
MAIN DINING ROOM



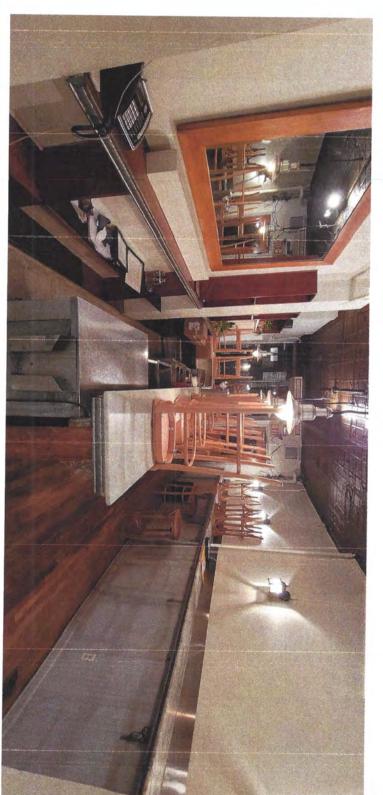
BACK DINING ROOM



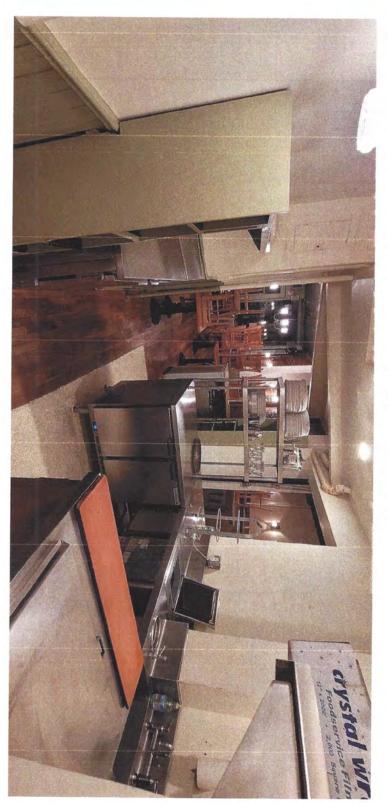
FRONT BAR



FRONT BAR



COLD KITCHEN & SERVICE STATION



OUTDOOR DINING





OUTDOOR DINING



Jeanine Kiely, Chair Susan Kent, First Vice Chair Valerie De La Rosa, Second Vice Chair Bob Gormley, District Manager



Antony Wong, Treasurer Eugene Yoo, Secretary Ritu Chattree, Assistant Secretary

Community Board No. 2, Manhattan

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Greenwich Village * Little Italy * SoHo * NoHo * Hudson Square * Chinatown * Ganseyoort Market

COMMUNITY BOARD 2 APPLICATION FOR A STATE LIQUOR AUTHORITY LICENSE ADDENDUM FOR OUTDOOR SEATING

For a Liquor License Application that includes any outdoor areas, please complete the following:

- Submit a diagram of outdoor seating indicating length and width of area(s) and location of all tables and chairs. Include all obstructions (trees, fire hydrants, proximity to bus stops, bike racks, signs, etc.).
- Submit photos of the premises where the sidewalk café and/or roadbed will be located. Required photos show one frontal, one left and one right side view of proposed sidewalk café and/or roadbed.
 - Photos must show complete sidewalk and/or roadway area where sidewalk café and/or roadbed will be including views to curb and neighboring properties.
 - For rear yard, show photos of yard and surrounding area, including upper view of adjacent buildings.

Sidewalk café will have no tables and				cate for both streets)
1,100 1,00 2,00 2,00	seats on			
Hours of sidewalk café:				
Describe any obstructions			s stop etc).	
besonbe any obstructions ((troos, me riyarant,	proximity to bu	s stop, cto)	
		T. A.T.		3.7.6 at Au
Roadbed will have no more				for both streets):
	10	- In	Chunnat	
10 tables and2				
10 tables and2tables and				
	seats on			
tables and Hours of roadbed: _11am-3	seats on pm_ to 5pm-11pm		Street	
tables and	seats on pm_ to 5pm-11pm		Street	
tables and Hours of roadbed: _11am-3	seats on pm_ to 5pm-11pm		Street	
tables and Hours of roadbed: _11am-3 Describe any obstructions	seats on pm_ to 5pm-11pm (trees, fire hydrant,	proximity to bus	s stop, etc):	
tables and Hours of roadbed: _11am-3 Describe any obstructions of Rear yard will have no mo	seats on pm_ to 5pm-11pm . (trees, fire hydrant, re than ta	proximity to bus	s stop, etc):	
tables and Hours of roadbed: _11am-3 Describe any obstructions	seats on pm_ to 5pm-11pm . (trees, fire hydrant, re than ta	proximity to bus	s stop, etc):	
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tables and Hours of roadbed:11am-3 Describe any obstructions of the control of	seats on pm_ to 5pm-11pm . (trees, fire hydrant, re than ta to ne business frontage on the sidewalk be	proximity to buse ables and are:No enclosed on the	s stop, etc):seatsYes ree (3) or more sides?	X_NoYes
tables and Hours of roadbed:11am-3 Describe any obstructions Rear yard will have no more Hours of rear yard: s seating extend beyond the	seats on pm_ to 5pm-11pm . (trees, fire hydrant, re than ta to ne business frontage on the sidewalk be	proximity to buse ables and are:No enclosed on the	s stop, etc):seatsYes ree (3) or more sides?	X_NoYes