

DATE: 12/19/2022

APPLICANT INFORMATION:

Name of applicant(s): CARA JECH LLC

Trade name (DBA): MAD MORTON

Premises address: 13 MORTON ST A/K/A 47 7<sup>th</sup> AVE SOUTH

Cross Streets and other addresses used for building/premise: CORNER OF MORTON ST + 7<sup>th</sup> AVE SOUTH

CONTACT INFORMATION:

Principal(s) Name(s): EIMEAR CONWAY

Office or Home Address: [REDACTED]

City, State, Zip: [REDACTED]

Telephone #: [REDACTED] email: [REDACTED]

Landlord Name / Contact:

Landlord's Telephone and Fax:

NAMES OF ALL PRINCIPAL(s):	NAMES / LOCATIONS OF PAST / CURRENT LICENSES HELD
EIMEAR CONWAY	ANGEL OF HARLEM - DP - 2272 FDB 7/15 - Present
	CARA FOODS LLC - DP - 389 5th Ave 2006 - Present.
	PAST GALWAY HOOKER 133 7th AVE SOUTH
	MAD MORTON 13 MORTON ST AKA 47 7 <sup>th</sup> Ave South JAN 2020 - present

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

**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: CHANGE IN METHOD OF OPERATION - CLOSE AT 2AM

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:

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: \_\_\_\_\_

APPLICANT - 1/21/20 - PRESENT

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:

SOY + SAKE 2008-2015, DRAGON FLY 2000-2008,  
CHARLIESMA 1984-1999

**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: 4 Year Built: 1925

Describe neighboring buildings: MIXED USE + RESIDENTIAL

Zoning Designation: C2-6

Zoning Overlay or Special Designation (applicable) \_\_\_\_\_

Block and Lot Number: 587, 7502

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 There is an enclosed.

What is the proposed Occupancy? Free Service Restaurant with bar Sidewalk cafe

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? 107

If yes, what is the use group for the premises? 6

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 Existing

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? 2665

If more than one floor, please specify square footage by floors: 1st-1925, Basement 740

If there is a sidewalk café, rear yard, rooftop, or outside space, what is the square footage of the area?  
ENCLOSED CAFE 21 TABLES WITH 52 SEATS

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

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

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

**OVERALL SEATING INFORMATION:**

Total number of tables? 13 Total table seats? 26

Total number of bars? 1 Total bar seats? 16

Total number of "other" seats? 52 please explain: ENCLOSED - SIDEWALK CAFE

Total OVERALL number of seats in Premises: 94

**BARS:**

How many \*stand-up bars / bar seats are being applied for on the premises? Bars 1 Seats 16

How many service bars are being applied for on the premises? 0

Any food counters?  no  yes, 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  Restaurant  Club/ Cabaret  Hotel  Other: \_\_\_\_\_

What are the Hours of Operation?

Sunday: Monday: Tuesday: Wednesday: Thursday: Friday: Saturday:

11:30AM to 2AM 11:30AM to 2AM 11:30AM to 2AM 11:30AM to 2AM 11:30AM to 2AM 11:30AM to 2AM 11:30AM to 2AM

Will the business employ a manager?  no  yes, name / experience if known: Siimear Conway (owner)  
AOIGE VERSION

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: ENCLOSED SIDEWALK CAFE WINDOWS

Will you have TV's?  no  yes (how many?) 2

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 EXISTING

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

Please describe your sound system and sound proofing: \_\_\_\_\_

Will you be permitting: no promoted events no scheduled performances no outside promoters

no any events at which a cover fee is charged? yes private parties

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) EXISTING OPERATION

Will you be utilizing no ropes no movable barriers no 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 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: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

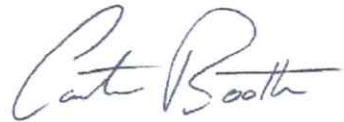
Email : \_\_\_\_\_

Application submitted on behalf of the applicant by:

  
\_\_\_\_\_  
Signature

Print or Type Name MICHAEL KELLY  
Title REPRESENTATIVE

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

# MAD MORTON

## SHARE

### Shishito Peppers 15

sea salt, lemon, cured egg yolk

### Chicken Fried Mushrooms 14

breaded oyster fried mushrooms, ranch and dill sauce

### Calamari 18

house-made marinara sauce & chipotle aioli, pickled red chilies

### Buffalo Cauliflower 14

roasted cauliflower, blue cheese dip

### Tuna Tartare 20

tuna, guacamole, soy citrus dressing, house-made tortilla chips

### Brussel Sprouts 14

pan fried sprouts, peanut butter and soy sauce

### Spinach & Artichoke Dip 16

three cheese cream sauce, truffle pita

### Tacos 16

choice of : chicken, baja fish with pico de gallo, hot sauce on soft corn tortilla

## MAC N CHEESE

### Lobster Mac & Cheese 18

### Bacon Mac & Cheese 14

### Classic Mac & Cheese 12

### Trio of Mac & Cheese 28

three cheese sauce topped with breadcrumbs

## LOADED FRIES

### Lobster Cheese Fries 16

### Garlic Cheese Fries 11

### Truffle Parmesan Fries 12

### Chilli Cheese Fries 16

## SNACKS / BAR MENU

### Wings 16

choice of : buffalo, sweet chili or honey bbq with blue cheese dip

### Mozzarella Sticks 14

marinara sauce and parmesan cheese

### Chicken Tenders 15

butter milk fried chicken, house-made honey mustard sauce

### Guacamole 15

house-made tortilla chips, pico de gallo

### Chili Nachos 20

house-made chili, jalapeno cheese, pico de gallo served with homemade tortilla chips

## ENTRÉE

### Brick Chicken 26

half boneless chicken, basil aioli, baby bell peppers

### New York Strip Steak Frites 32

Chimichurri or peppercorn sauce, french fries, house salad

### Penne alla Vodka 16

chicken + 8 shrimp + 10

### Salmon 28

seared Atlantic salmon, seasonal vegetables, mash potatoes, balsamic glaze

### Lobster Ravioli 26

homemade tomato sauce, fresh basil, parmesan cheese

## SANDWICHES

served with fries

### Mad Morton Burger 20

house-made beef burger, lettuce tomato, onion, pickles, Mad Morton sauce on a brioche bun, American cheese

### Veggie Burger 18

house made veggie patty, guacamole, lettuce, tomato, onion, pickles on a brioche bun

### Steak Sandwich 22

grilled Strip Steak, bacon, caramelized onion, toasted ciabatta

### Fried Chicken Sandwich 18

butter milk fried chicken, chipotle slaw, pickles

## SALADS

### Caesar Salad 14

Romaine lettuce, Parmesan cheese, herb croutons, creamy Caesar dressing

### Kale Salad 15

shaved kale, watermelon, granny smith apple, toasted walnuts, feta cheese and pomegranate with champagne dressing

### MAD Morton Salad 14

mixed greens, onions, orange wedges, candied walnuts, apple cider vinaigrette

Add to any salad Chicken + 8 Steak + 8 Salmon + 10 Shrimp + 10

## SIDES

### French Fries roasted garlic aioli 8

### Sweet Potato Fries roasted garlic aioli 9

### Mashed Potatoes 8

### Sauteed Seasonal Vegetables 8

### Sweet Potato Wedges cilantro, lime butter, walnuts 10

Consuming raw or undercooked meats, poultry, seafood, shellfish, or eggs may increase your risk of foodborne illness.