Meeting Date: $1/5/33$
APPLICANT INFORMATION:
Name of applicant(s): Gigi Group LLC : 142 Emant Partners L
Trade name (DBA):
Premises address: 138 Bowery
Cross Streets and other addresses used for building/premise: Bln Broome & Grand 54
CONTACT INFORMATION:
Principal(s) Name(s): Jonethan Meson
Office or Home Address: 138 Bowers
City, State, Zip:
Telephone #: / email : _
Landlord Name / Contact: 142 Emmut Portners LLC
Landlord's Telephone and Fax: (212) 707.8893
NAMES OF ALL PRINCIPAL(s): NAMES / LOCATIONS OF PAST / CURRENT LICENSES HELD
Jonathan Masan NA
Kyan Urban
John Young
Briefly describe the proposed operation (i.e. "We are a family restaurant that will focus on"): Full Service 81 room hote with food and beverage
Service to the rooms feating a ground floor restaurant
Servine nouveau cuisine in a beatiful setting and a
cellar lourge area designed to handle overflow and late
rellar lounge area designed to handle overflow and late night dining all within a state of the art insulated and floating acoustic shell
Ploating acoustic shell

WHAT TYPE(S) OF LICENSE(S) ARE YOU APPLYING FOR (MARK ALL THAT AP	
∠ 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, ow	nership, etc.)
, •	nership, etc.)
• • • • • • • • • • • • • • • • • • • •	
(Please include physical or operational changes including hours, services, occupancy, ow If this is for a new application, please list previous use of location for the last 5 years: new construction - vecent since 2	
(Please include physical or operational changes including hours, services, occupancy, ow If this is for a new application, please list previous use of location for the last 5 years: New Construction - vecent since 2	2014
If this is for a new application, please list previous use of location for the last 5 years:	~ no

PREMISES:

By what right does the applicant have possession of the premises?
Type of Building: Residential CommercialMixed (Res/Com) Other:/o+e/
Number of floor: Year Built: 30/6
Describe neighboring buildings: mixed use commercial resiliation
Zoning Designation: C676
Zoning Overlay or Special Designation (applicable)
Block and Lot Number: 470 / 53
Does the premise occupy more than one building, zoning lot, tax lot or more than one floor? yes $\underline{\varkappa}$ 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 ** yes : explain **
What is the proposed Occupancy?68
Does the premise currently have a valid Certificate of Occupancy (C of O) and all appropriate permits?
If yes, what is the maximum occupancy for the premises? $\frac{789}{}$
If yes, what is the use group for the premises?
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? X yesno
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) (net yet filed)
Will the façade or signage be changed from what currently exist at the premise? no yes
(if yes, please describe: no facede or sign currently exists

INTERIOR OF PREMISES:
What is the total licensed square footage of the premises? Approx 40,000 sf (entire building)
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? interior steirs relevator
How many entrances are there? How many exits? How many bathrooms ? #hotelrooms
Is there access to other parts of the building? no _x yes, explain: entry to Gamen ereas
OVERALL SEATING INFORMATION:
Total number of tables? Total table seats?
Total number of bars? Total bar seats? 26
Total number of "other" seats? 20 please explain: Nese are Jepandent upon varied Can figurations depending upon the Total OVERALL number of seats in Premises: 370 event
Total OVERALL number of seats in Premises: 370 event
BARS:
How many *stand-up bars / bar seats are being applied for on the premises? Bars 3 Seats 26
How many service bars are being applied for on the premises?\
Any food counters? 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)
BarBar & FoodRestaurantClub/ CabaretXHotelOther:

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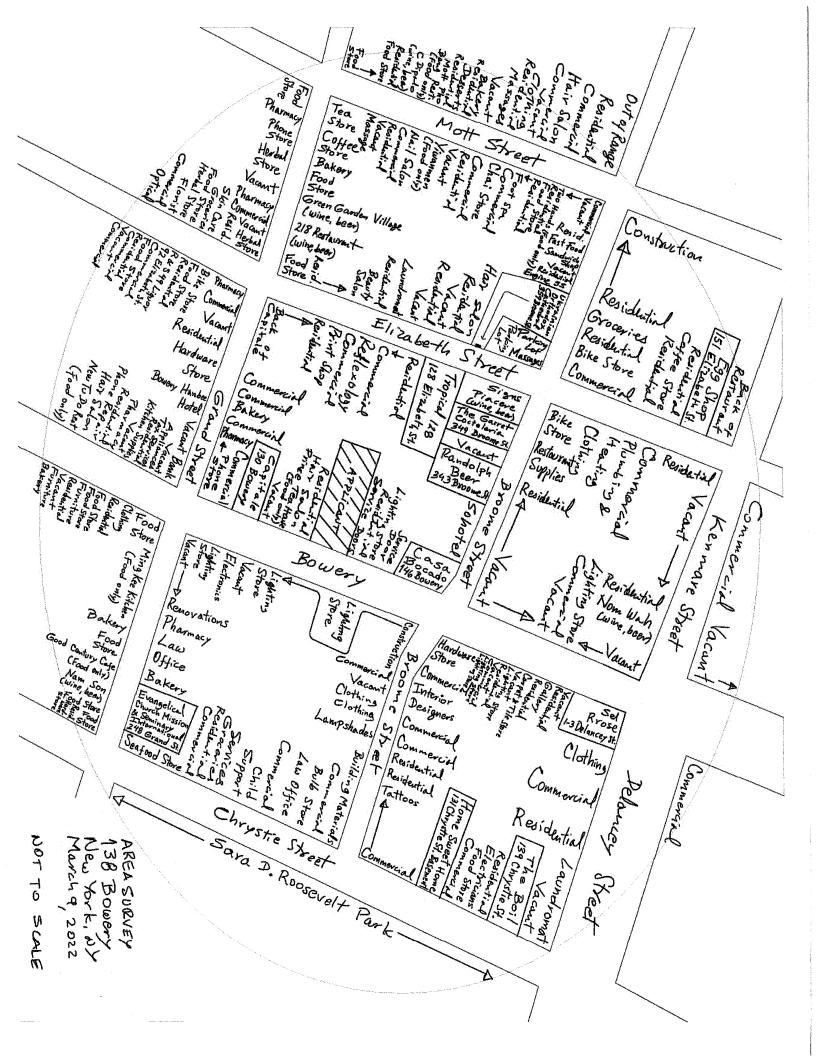
Sunday: Monday:	Tuesday: \	Wednesday:	Thursday <u>;</u>	Friday:	Saturday:
am to Y to Y	to Y	₹ to ∑	\$ to 4	to \checkmark	\mathcal{S}_{to}
Will the business employ	a manager?	no X yes,	ديس کيس name / experie	on Om nce if known : _	TBD.
Will there be security pers Do you have or plan to ins					
Do you have or plan to ins	stall French doors	, accordion do	ors or windows	that open?	≤ no yes
If yes, please describe : _					
Will you have TV's ? 🔀	no yes (ho	ow many?)			
Type of MUSIC / ENTER	TAINMENT: X	Live Music <u></u>	_Live DJJ	uke BoxI	pod / CDsnone
Expected Volume level: (check all that apply)	Background((quiet) <u>×</u> Eı	ntertainment lev	rel 🔀 Amplif	ied Music
Do you have or plan to ins	stall soundproofing	g?no <u>></u>	C yes		
IF YES, will you be using	a professional so	und engineer?	10		
Please describe your sou				TACHED !	REPIRT
Will you be permitting: X	scl+ _ promoted even	ts <u>X</u> sched	uled performan	cesoutsi	de promoters
x any events at which	a cover fee is cha	ırged?*pr	ivate parties		
Do you have plans to mar establishment? no					
Will you be utilizing	ropes mova	able barriers	other outsid	de equipment (describe)
Are your premises within	200 feet of any so	chool, church o	or place of wors	hip? <u> </u>	yes
If there is a school, chu please submit a block p premises (no larger tha	lot diagram or a				
Indicate the distance in fe	et from the propo	sed 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 you will address it immediately. Contact Person: Address: Email: Application submitted behalf of the application of the application. Print or Type Name Title 1/21	Phone:

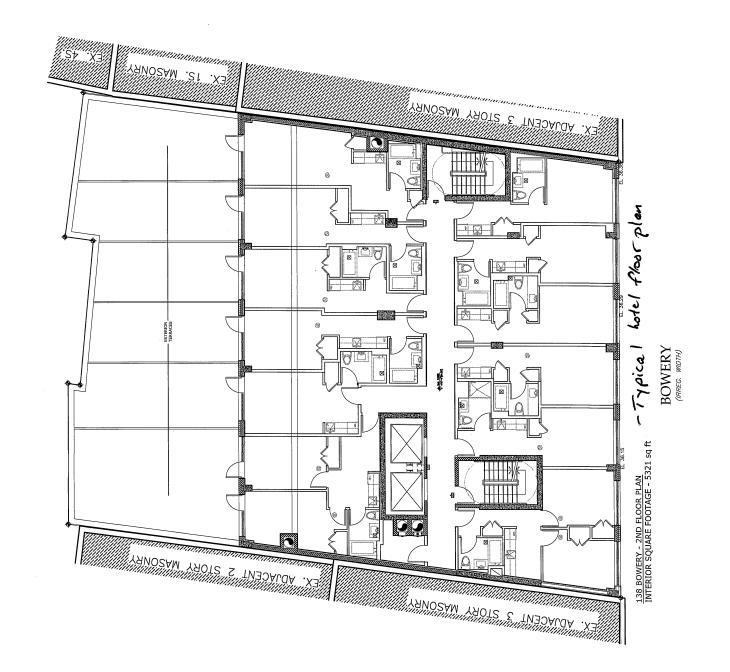
Thank you for your cooperation. Please return this questionnaire along with the other required documents as soon as you can. This will expedite your application and avoid any unnecessary delays. Use additional pages if necessary.

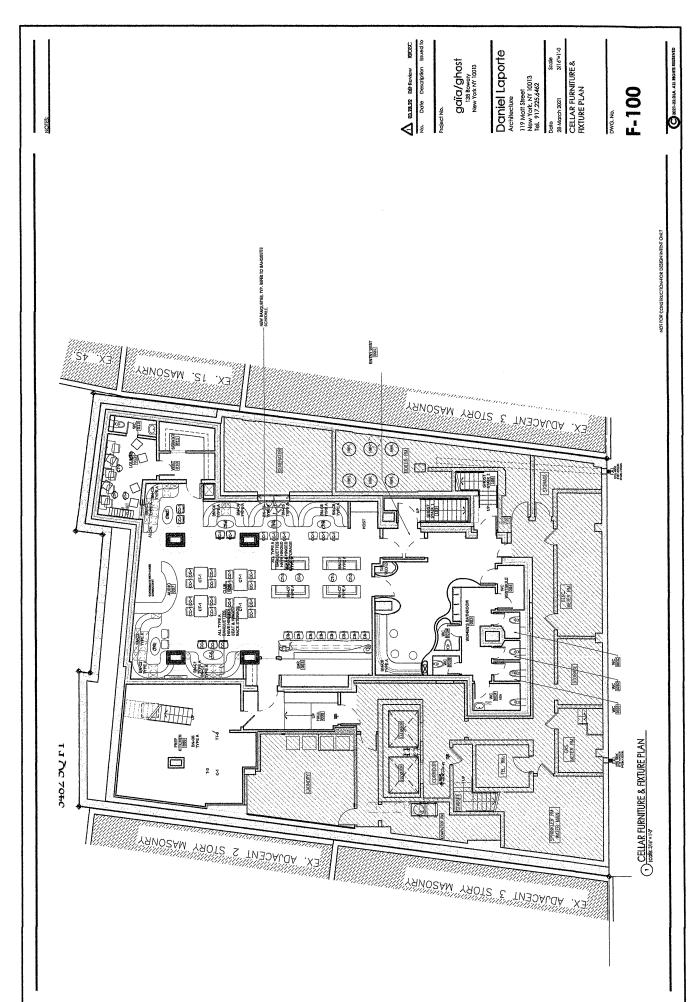
Community Board 2, Manhattan

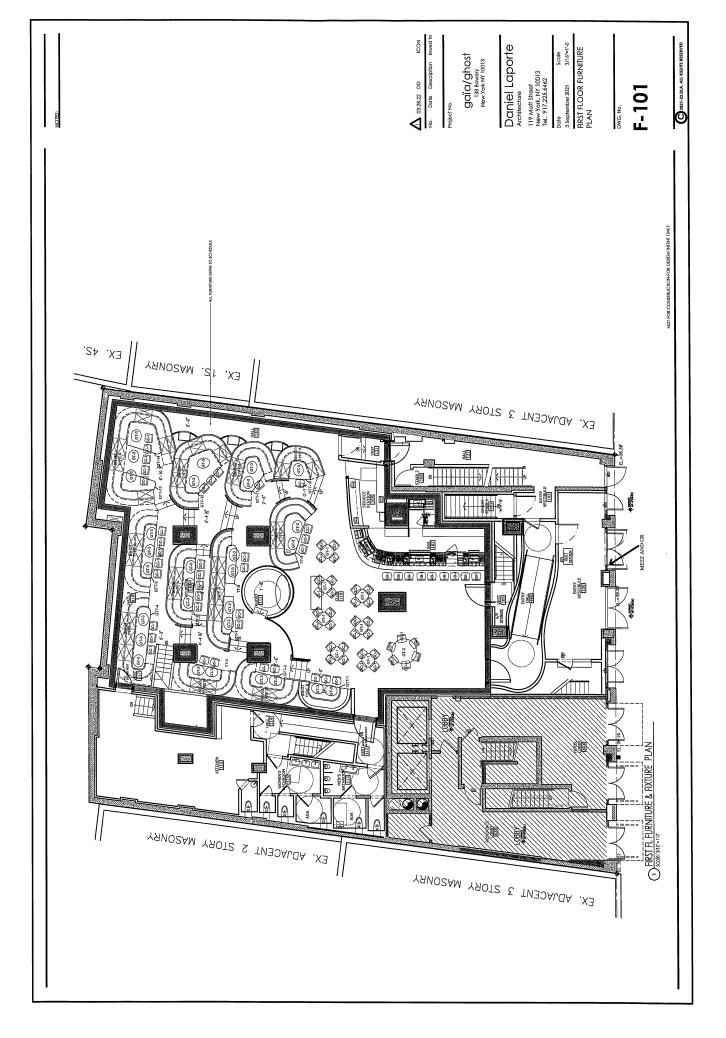
Community Board 2, Manhattan SLA Licensing Committee Carter Booth, Co-Chair Robert Ely, Co-Chair

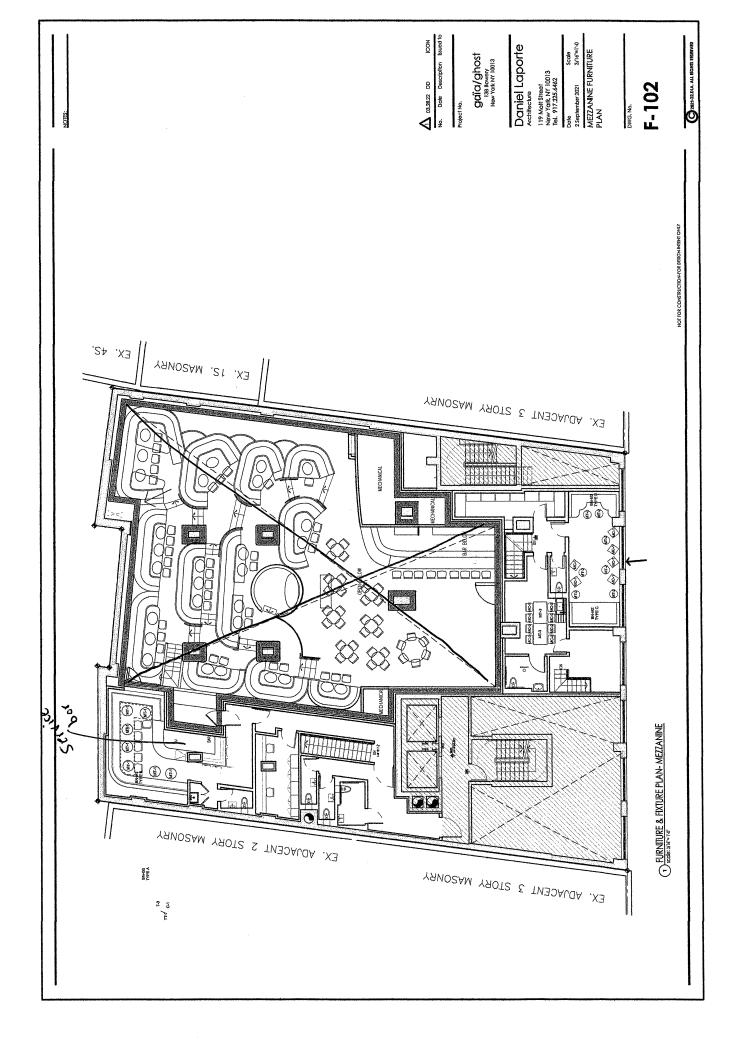


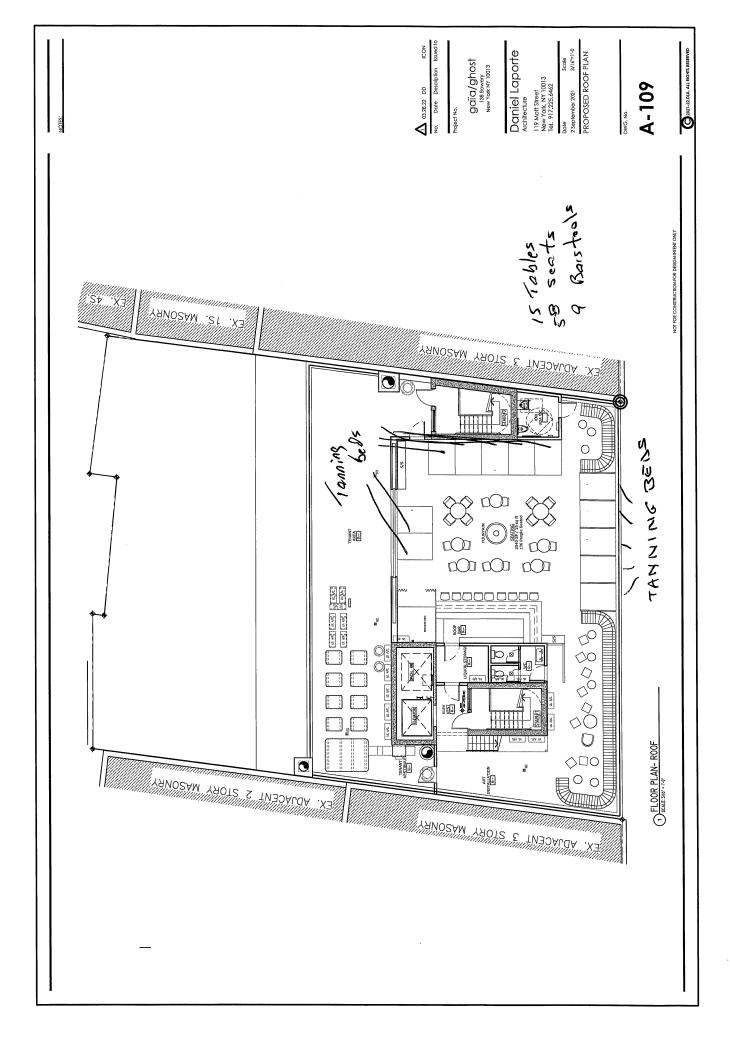
Broome Street Casa Bocado Bouch Construction 146 Bowery Service Door Lighting Store Residential Service Lighting Doors Store APPLICANT Lighting Store Residential BLOCK PLOT 138 BOWCY New York, NY March 9, 2022 Vacant Hair Salon Prince Tea House Electronics Capitale SCALE highting Store 130 Bowery Commercial Vacant Phone Store Grand Street

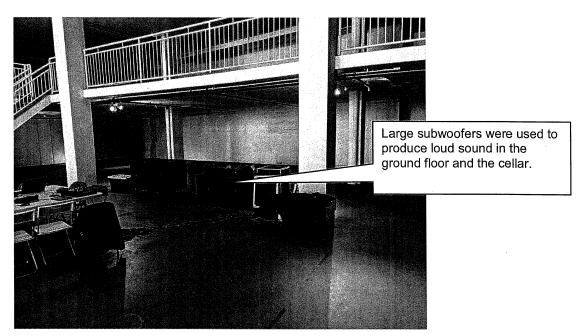


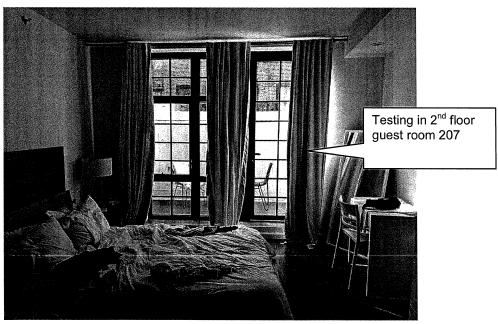






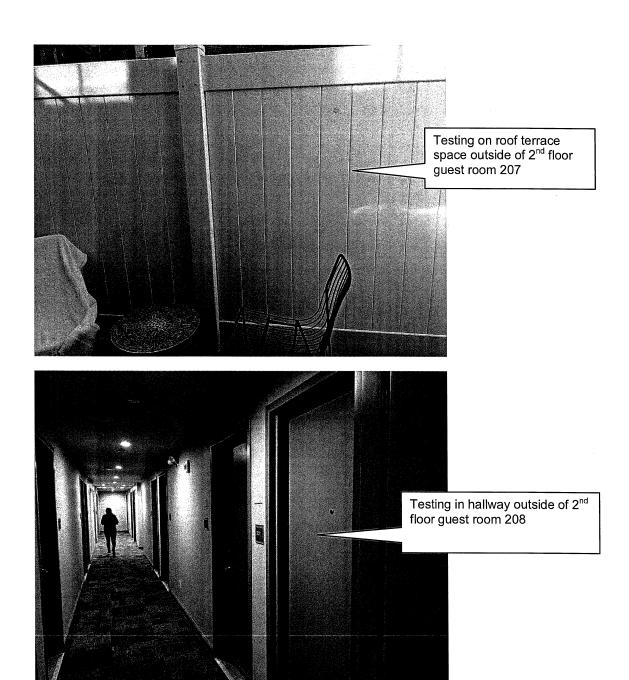






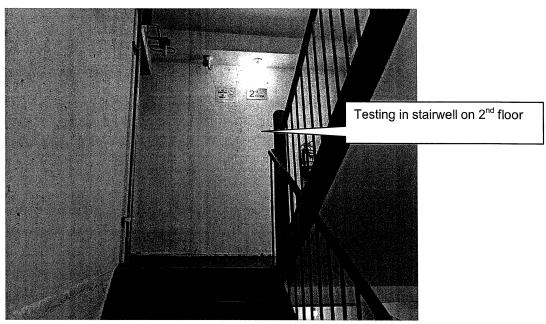
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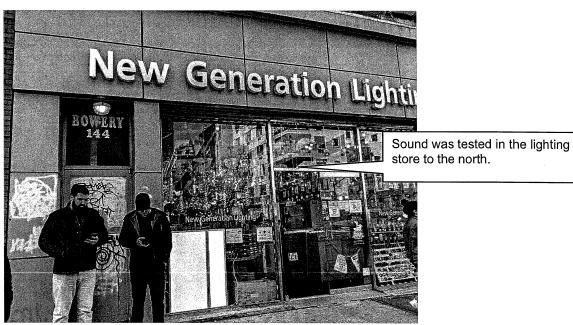
email: acoustilog1@verizon.net



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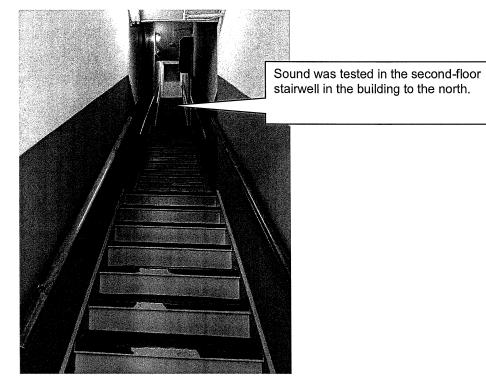
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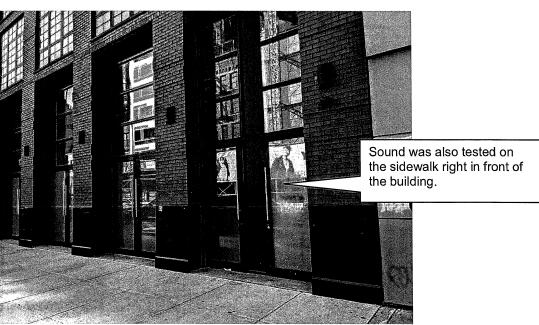




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