



COMMUNITY BOARD NO. 2, MANHATTAN

3 WASHINGTON SQUARE VILLAGE

NEW YORK, NY 10012-1899

www.cb2manhattan.org

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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 month's 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: _____

APPLICANT INFORMATION:

Name of applicant(s):

Trade name (DBA):

Premises address:

Cross Streets and other addresses used for building/premise:

CONTACT INFORMATION:


Principal(s) Name(s):

Office or Home Address: _____

City, State, Zip: _____

Telephone #: _____ email : _____

Landlord Name / Contact:

Landlord's Telephone and Fax:  _____

NAMES OF ALL PRINCIPAL(s): NAMES / LOCATIONS OF PAST / CURRENT LICENSES HELD

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

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.)

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: _____

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:

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: _____ Year Built : _____

Describe neighboring buildings:

Zoning Designation: _____

Zoning Overlay or Special Designation (applicable) _____

Block and Lot Number: _____ / _____

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? _____

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? _____

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? 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? _____

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? _____ How many exits? _____ How many bathrooms? _____

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

OVERALL SEATING INFORMATION:

Total number of tables? _____ Total table seats? _____

Total number of bars? _____ Total bar seats? _____

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

Total OVERALL number of seats in Premises : _____

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: _____

* 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:
____ to ____ ____ to ____ ____ to ____ ____ to ____ ____ to ____ ____ to ____ ____ to ____

Will the business employ a manager? ____ no ____ yes, name / experience if known : _____

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 : _____

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

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

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

Please describe your sound system and sound proofing: _____

Will you be permitting: ____ promoted events ____ scheduled performances ____ outside promoters

____ any events at which a cover fee is charged? ____ 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)

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? ____ 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 ½ " 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:

Anna Tobin

Signature

Print or Type Name _____

Title _____

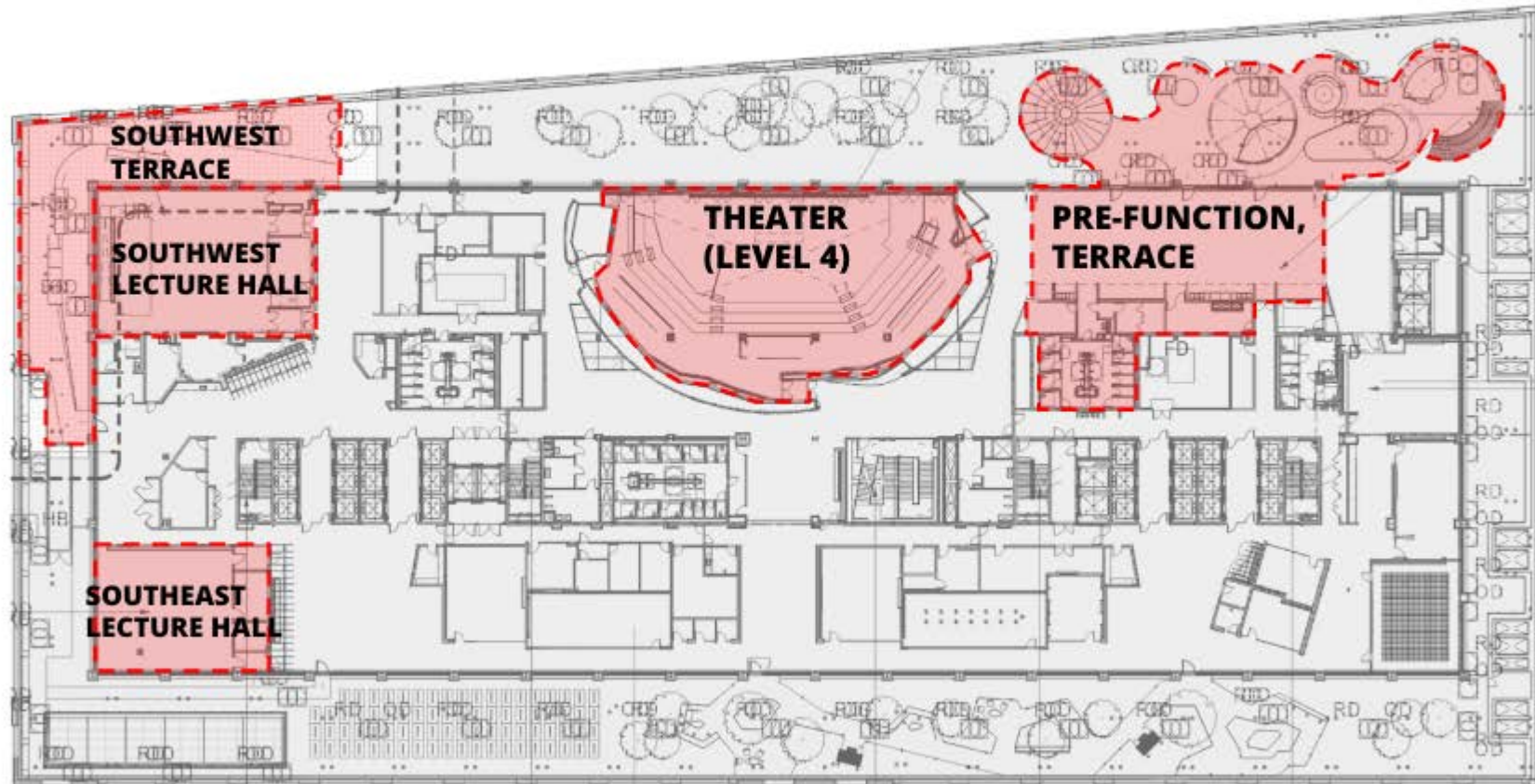
Thank you for your cooperation. Please return this questionnaire along with the other required documents as soon as you can. This will expedite your application and avoid any unnecessary delays. Use additional pages if necessary.



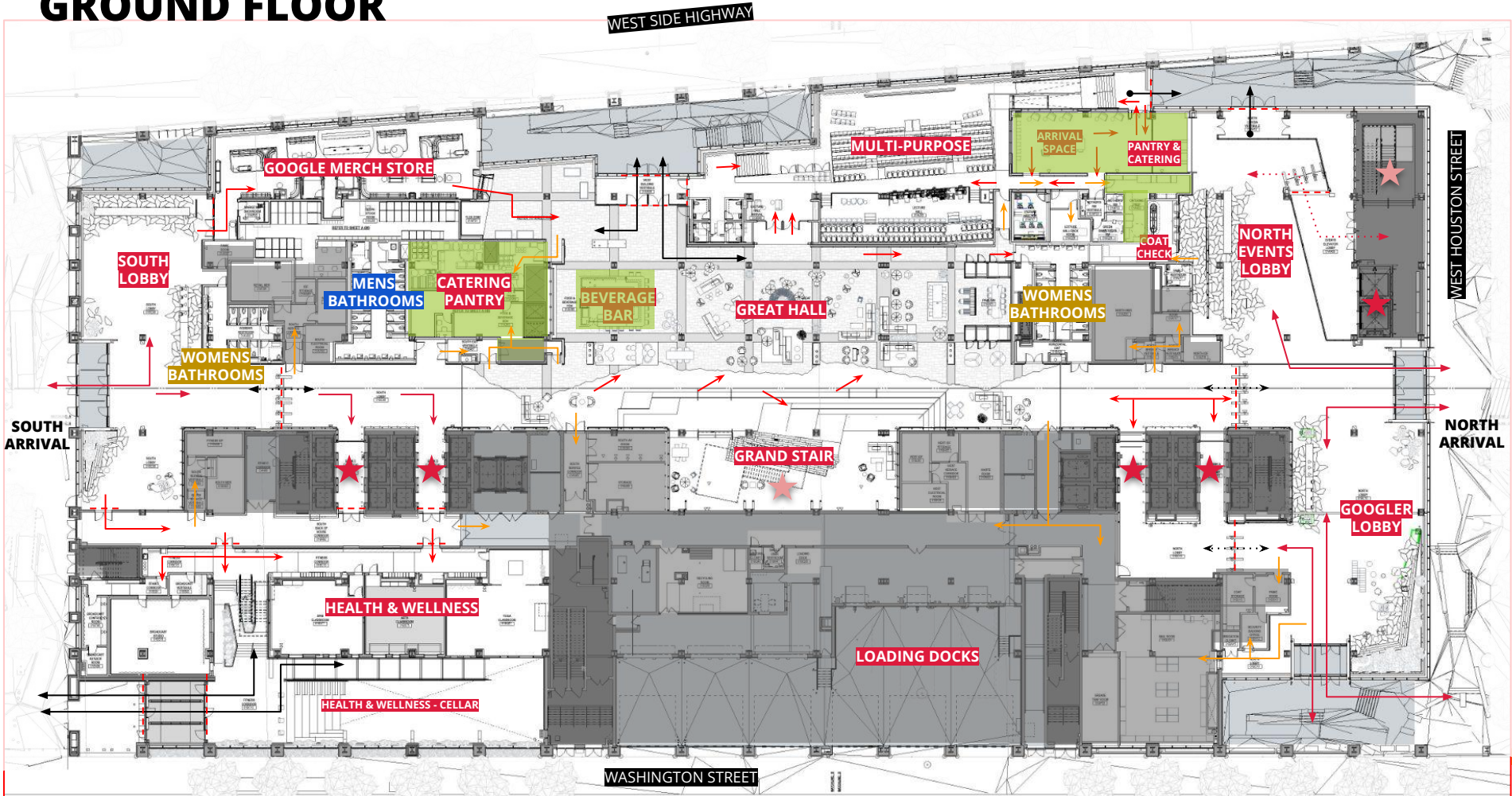
Community Board 2,
Manhattan SLA Licensing Committee
Donna Raftery, Co-Chair
Robert Ely, Co-Chair

4TH FLOOR

PUBLIC ASSEMBLY

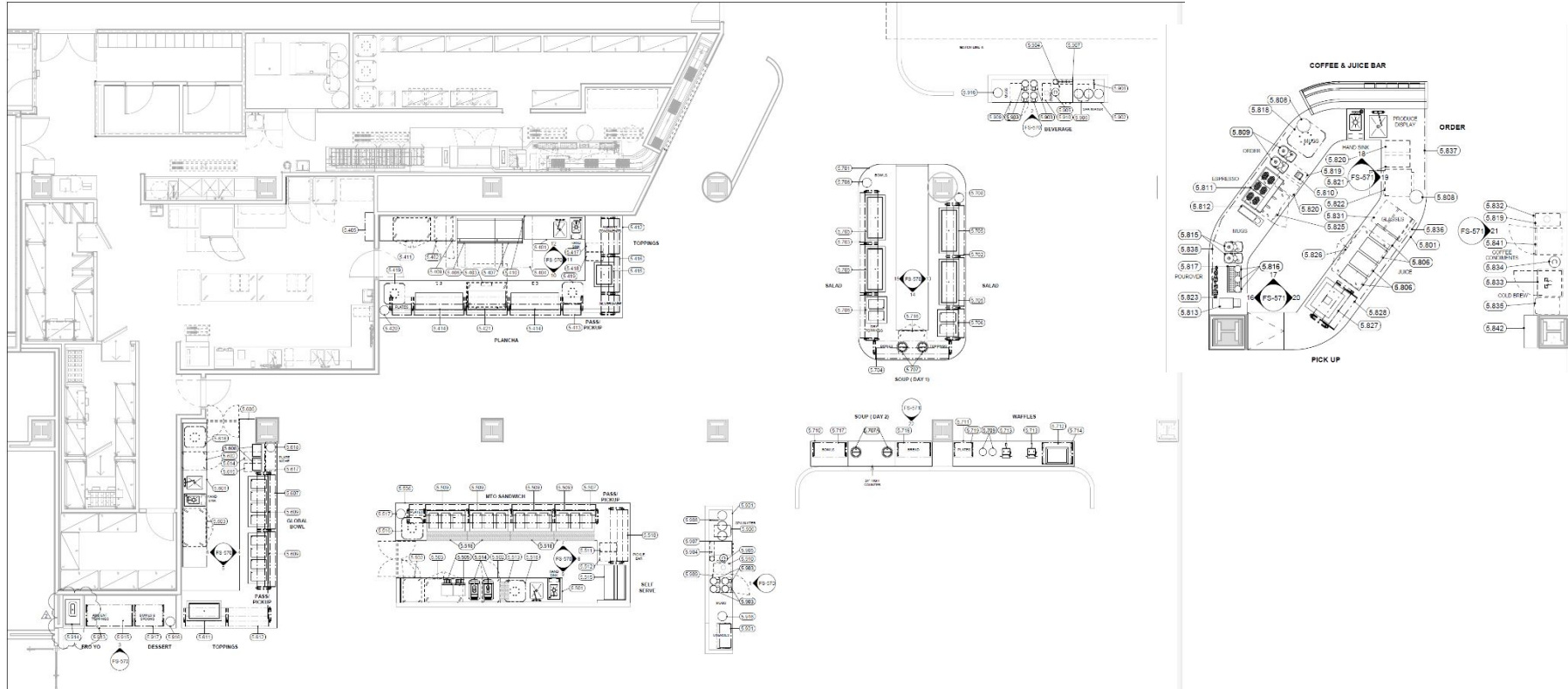


GROUND FLOOR

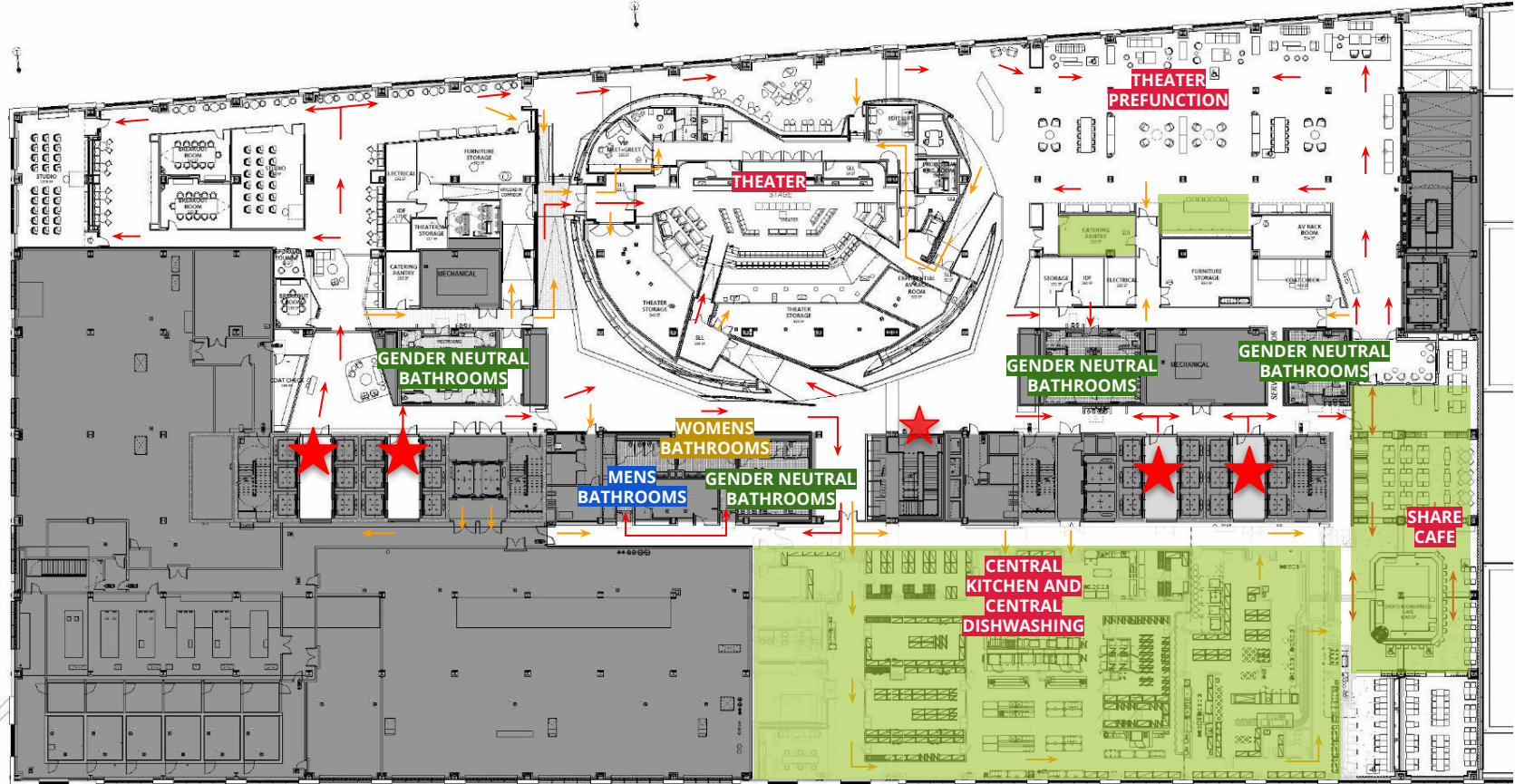


2ND FLOOR PLAN

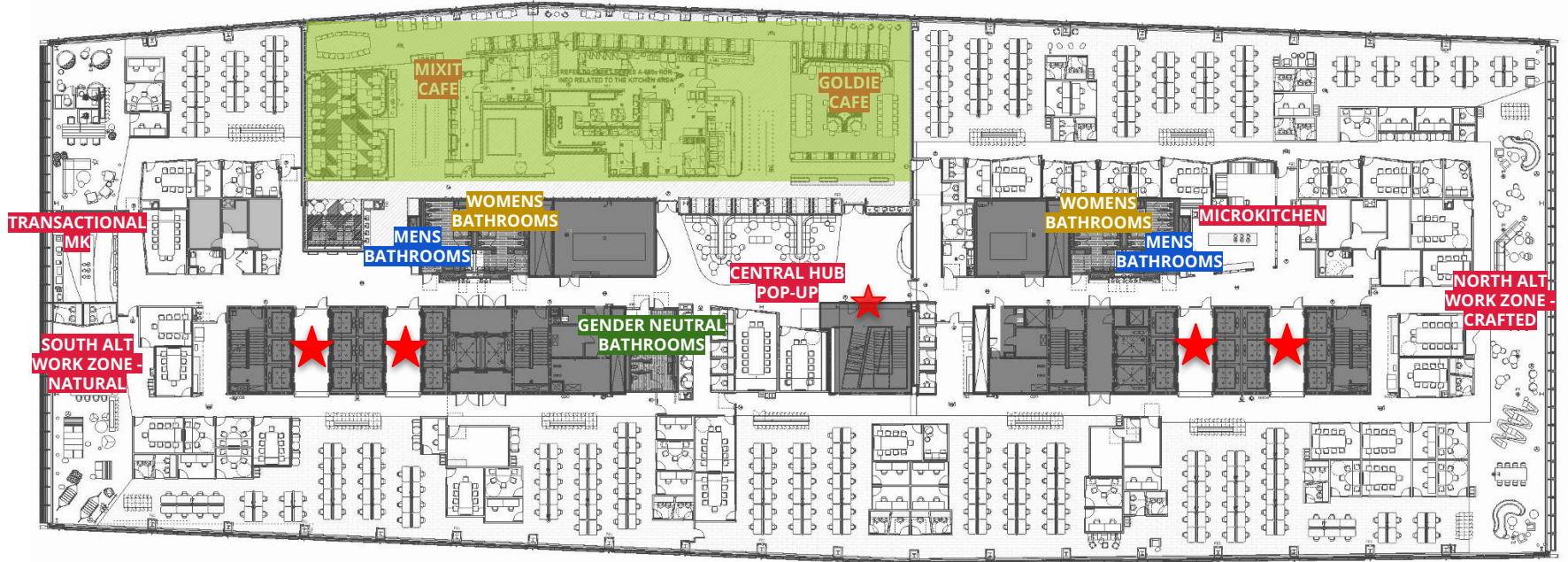
There is a full anchor cafe and Juice Bar on 2 that is on hold at this time: Global Bowl, Deli and Plancha grill with Salad Bar. Probably will not change once reactivated



3RD FLOOR PLAN



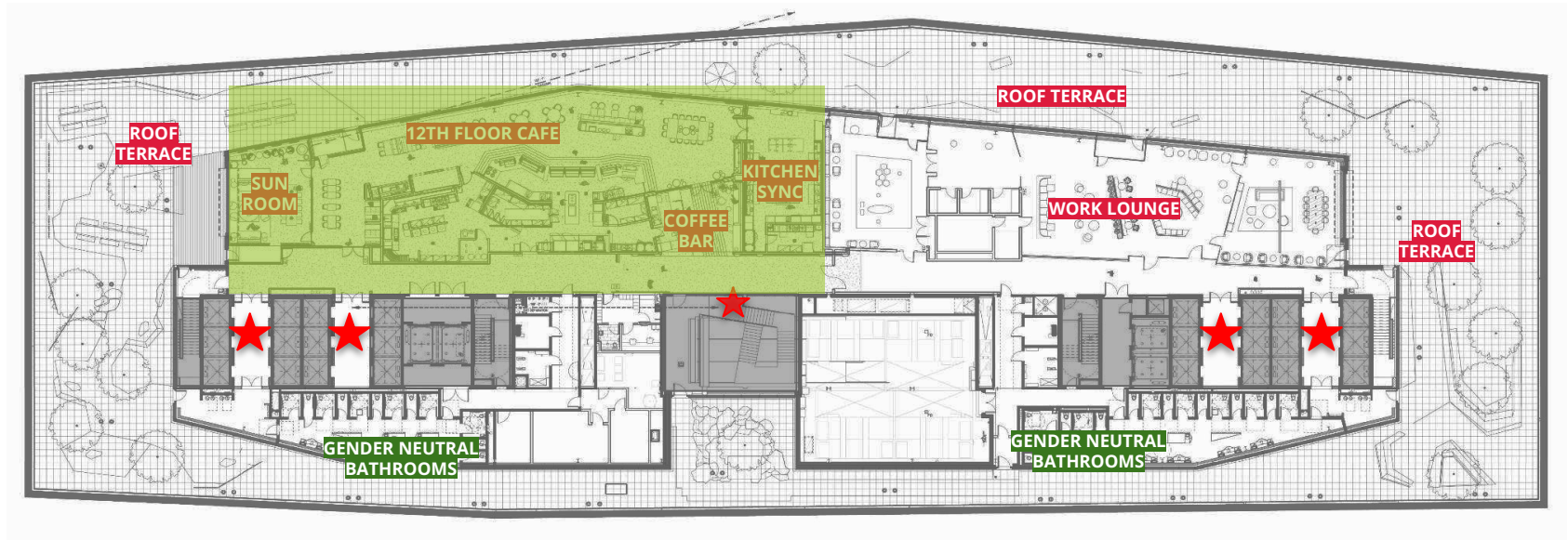
6TH FLOOR PLAN



9TH FLOOR PLAN



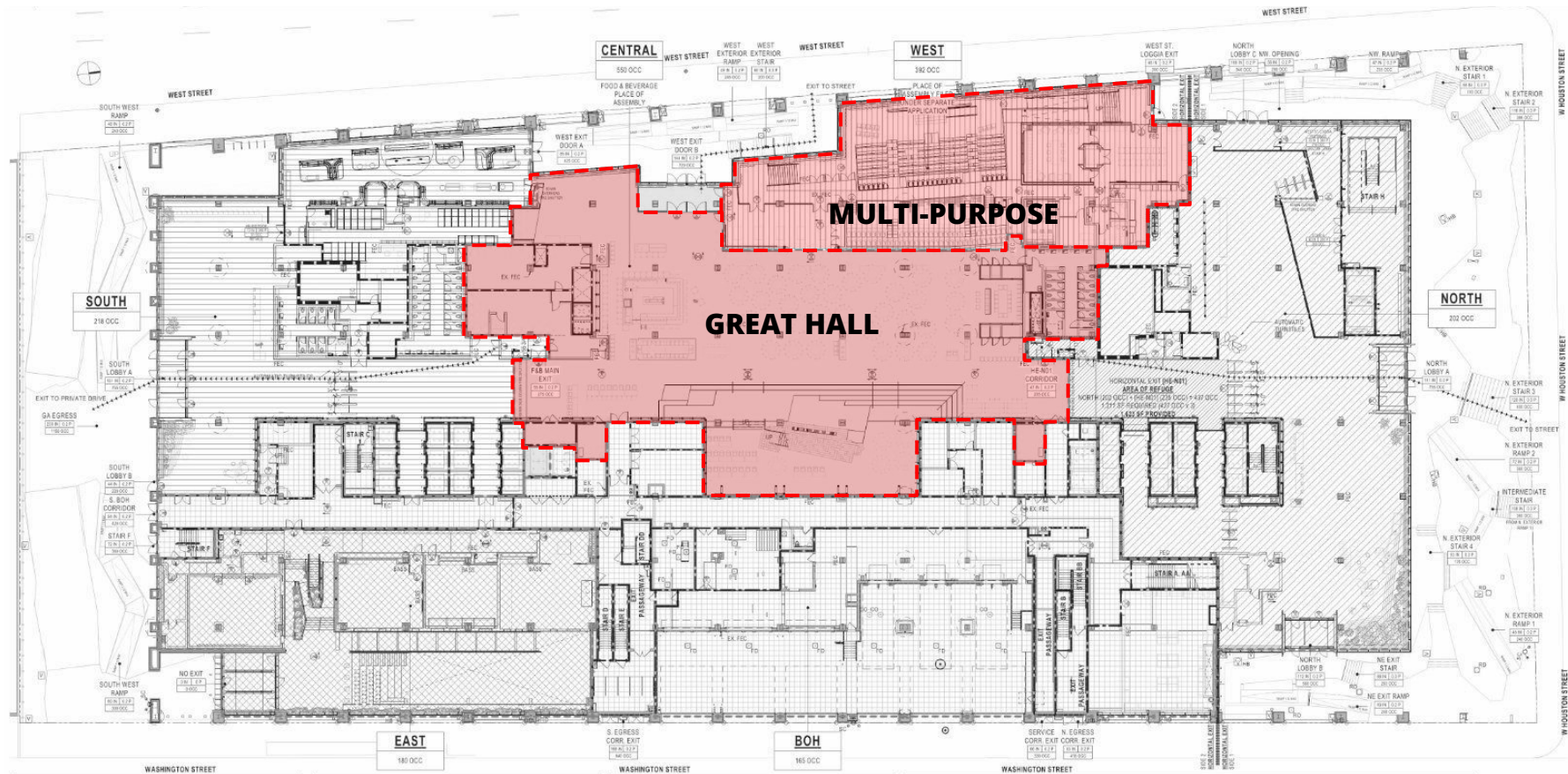
12TH FLOOR PLAN



GROUND FLOOR

PUBLIC ASSEMBLY

 PA LOCATION



2ND FLOOR

PUBLIC ASSEMBLY

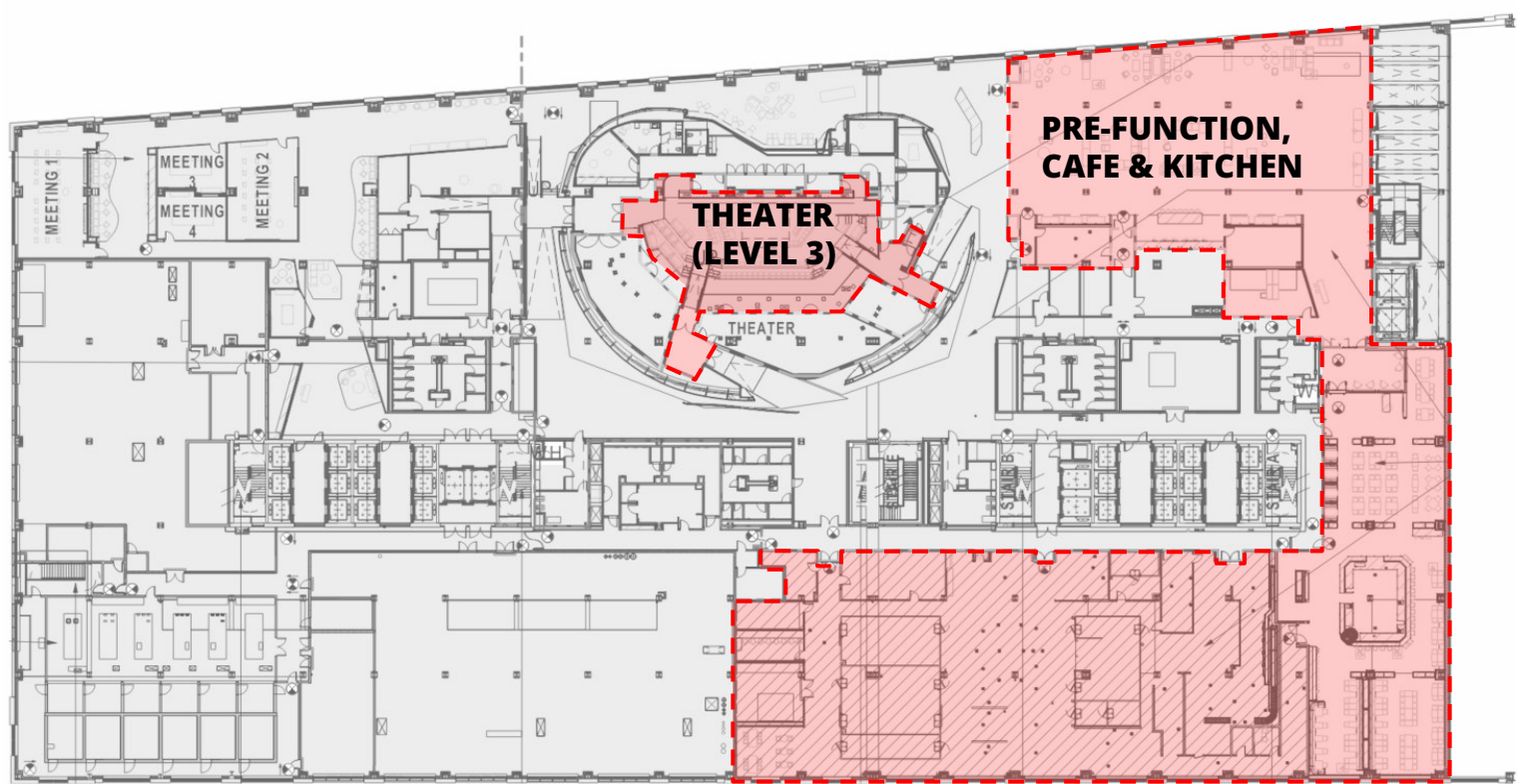
 PA LOCATION



3RD FLOOR


PUBLIC ASSEMBLY

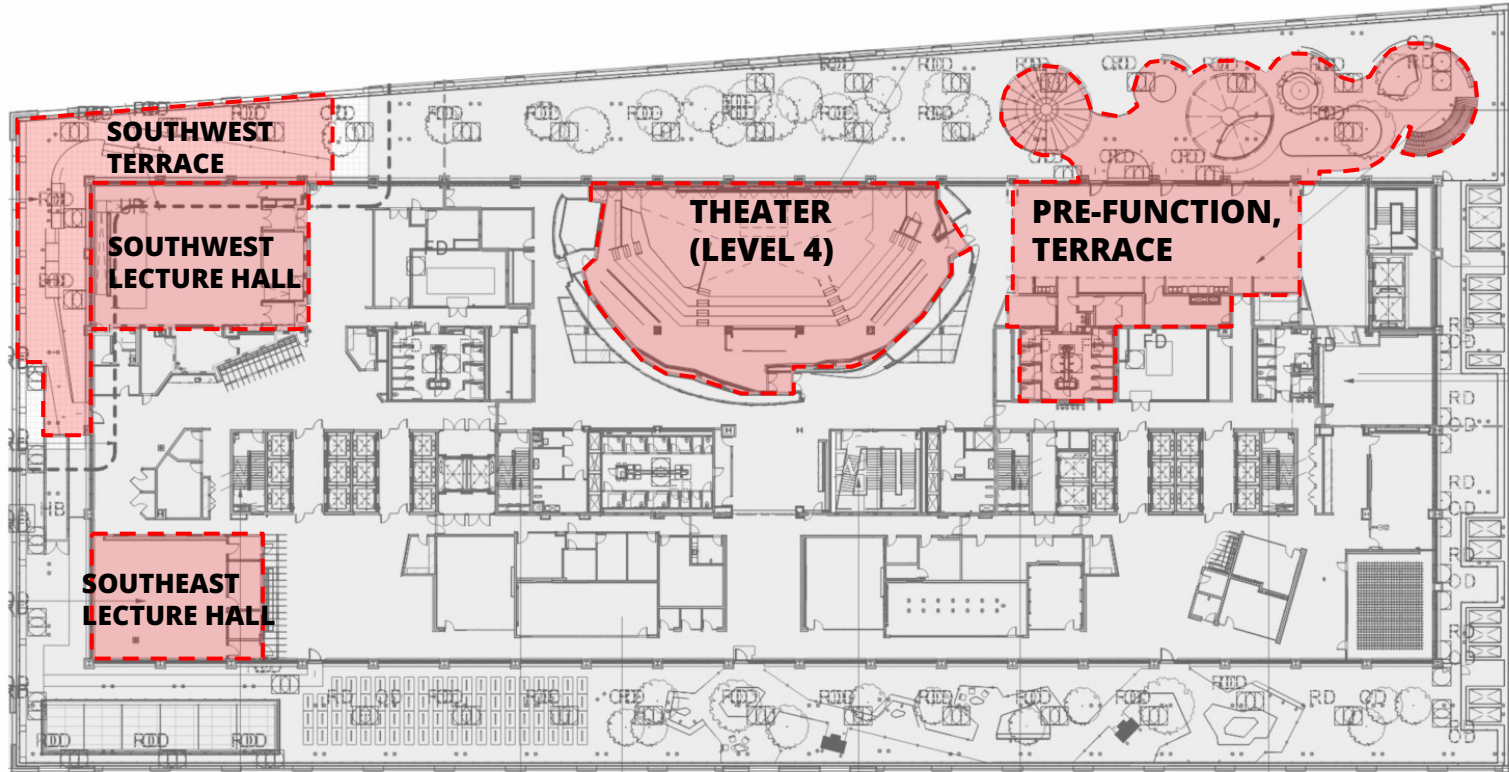
 PA LOCATION



4TH FLOOR


PUBLIC ASSEMBLY

 PA LOCATION



6TH FLOOR


PUBLIC ASSEMBLY

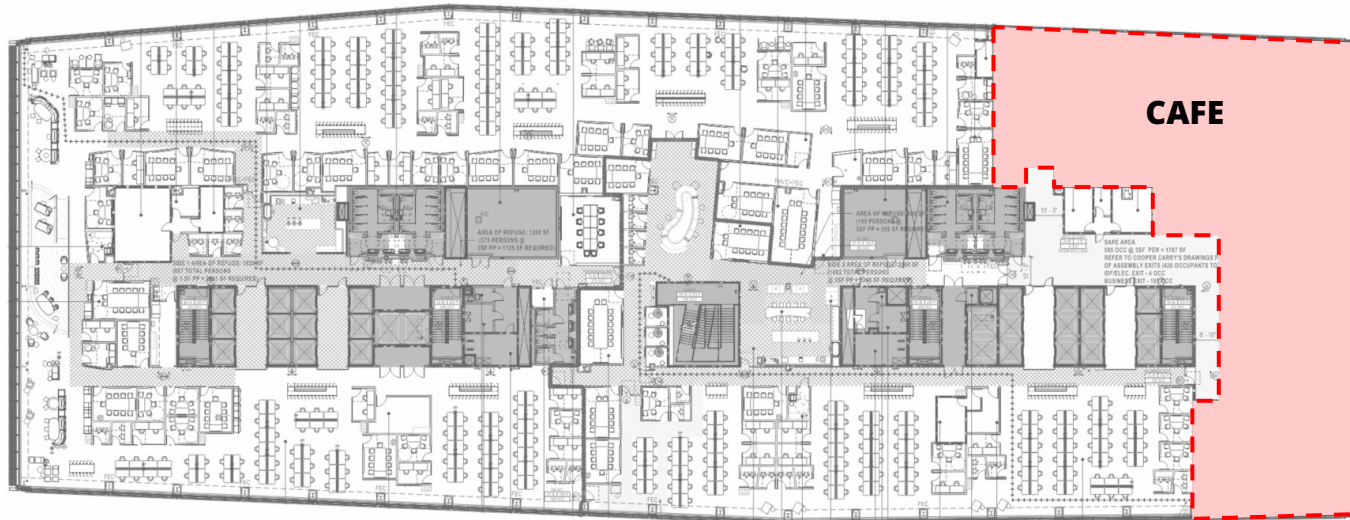
 PA LOCATION



9TH FLOOR

PUBLIC ASSEMBLY

 PA LOCATION



12TH FLOOR

PUBLIC ASSEMBLY

 PA LOCATION



MiXiT Menu Framework

Concept = Curated Salads and grain bowls
 Service style = Meals made to order
 Portion size = Complete meals
 Menu rotation = Seasonal menu with weekly specials
 MiXiT Recipe Index

MIXIT SEASON - Summer

	Rotation	Type	Allergen	Name of dish	Ingredients
Salad Greens					
Greens 1	Always offered	Leafy		Arugula	Arugula
Greens 2	Always offered	Leafy		Mesclun	Mesclun
Greens 3	Always offered	Hearty		Kale	Kale
Greens 4	Always offered	Crunchy		Romaine	Romaine
Greens 5	Weekly				
Cold Well Ingredients - static					
Mixin' 1	Always offered	Raw vegetable		Avocado	Avocado, Avocado Pulp, Lemon Juice
Mixin' 2	Always offered	Raw vegetable		Carrot	Carrot, Shredded
Mixin' 3	Always offered	Raw vegetable		Cucumber	Cucumber
Mixin' 4	Always offered	Raw vegetable		Tomato	Grape Tomato
Mixin' 5	Always offered	Cheese	milk	Parmesan Cheese	Parmesan Cheese
Mixin' 6	Always offered	Cold Protein	egg	Egg	Hard Cooked Egg
Cold Well Ingredients - seasonal					
Mixin' 7	Seasonal	Seafood	FinFish	Salmon	
Mixin' 8	Seasonal			Corn	Corn
Mixin' 9	Seasonal			Cilantro	Cilantro
Mixin' 10	Seasonal		milk	Jicama	Jicama
Mixin' 11	Seasonal			Radish	Radish
Mixin' 12	Seasonal			Black Bean	Black Bean
Mixin' 13	Weekly				
Mixin' 14	Weekly				
Mixin' 15	Weekly				
Hot Well Ingredients					
Hot Item	Weekly	Grain		Quinoa	Quinoa
Hot Item	Weekly	Vegetarian	alcohol, soy, sulfur	Ginger Koji Tofu	Tofu, Ginger, Shio Koji
Hot Item	Always Offered			Herb Roasted Chicken	Chicken, Garlic, Parsley, Oregano, Rosemary, Olive Oil, Salt, Pepper
Hot Item	Optional			Roast Sweet Potato	
Dry Toppings - Behind Line					
Dry Mixin' 1	Always offered	Dry	gluten (wheat), Barley, Milk, Soy	Olive Oil Crouton	White Bread, Olive Oil, Salt, Pepper
Dry Mixin' 2	Seasonal	Dry		corn chip	
Dry Mixin' 3	Weekly			Sesame Furikake	
Dry Toppings - Self Served					
Dry Topping 1	Always offered	Nut	tree nut (almond)	Almond	Almond
Dry Topping 2	Always offered	Seed		Pepita	Pepita (Pumpkin Seed)
Dry Topping 3	Always offered	Seed		Sunflower Seed	Sunflower Seed
Dry Topping 4	Always offered	Dried fruit		Dried Cranberry	Dried Cranberry
Core Dressing					
Dressing 1	Seasonal			Chili-Oregano Dressing	
Dressing 2	Seasonal		alcohol, sulfur, soy	Sesame Miso Dressing	Canola Oil, Rice Vinegar, Sesame Oil, White Miso , Salt, Pepper, Xanthan Gum
Dressing 3	Always Offered		alcohol, mustard, sulfur	Zinfandel Vinaigrette	Canola Oil, Red Wine Vinegar , Lemon Juice, Garlic Puree, Shallot Puree, Dijon Mustard , Sugar, Xanthan Gum, Salt, Pepper
Dressing 4	Always Offered		soy, fin fish, milk, mustard,	Caesar Dressing	Veganise , Extra Virgin Olive Oil, Lemon Juice, Parmesan Cheese , Roasted Garlic Puree, Kosher Salt, Anchovy Fillet , Pepper, Xanthan Gum
MiXiT Sample Menu Cameo					
Signature Salad 1			alcohol, buckwheat, sesame, soy, sulfur	Sesame Noodler	Soba Noodle , Spinach, Napa Cabbage, Cucumber, Corn, Tomato, Ginger-Koji Tofu, Sesame Furikake, Sesame Miso Vinaigrette
Signature Salad 2			Milk, Sulfur	Baja	Romaine, Spinach, Red Cabbage, Herb-Roasted Chicken, Black Bean, Corn, Tomato, Cotija , Tortilla Chip, Cilantro, Chili-Oregano Vinaigrette
Signature Salad 3			alcohol, mustard, sulfur, fin fish, soy, gluten (wheat, barley) milk	Salmon Caesar	Salmon with Mustard and Tarragon , Romaine, Kale, Jicama, Olive Oil Crouton , Radish, Classic Caesar Dressing
Weekly Specials					
			Allergen	Name of dish	Ingredients
Week 1	Special Salad		gluten (wheat, barley) soy, milk, alcohol, mustard, pork, sulfur	BLTA	Romaine, Tomato, Avocado, Olive Oil Crouton , Arugula, Bacon, Tabasco-Red Wine Vinaigrette
	Special Vinaigrette		alcohol, mustard, sulfur	Tabasco Red Wine Vinaigrette	Canola Oil, Olive Oil, Red Wine Vinegar , Tabasco, Sriracha, Dijon Mustard , Xanthan Gum, Salt, Pepper
	Special ingredient #1		pork	Bacon	Bacon
	Special ingredient #2				
	Special ingredient #3				
	Special Protein				
	Special Greens				

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MIXIT SEASON - Summer					
	Rotation	Type	Allergen	Name of dish	Ingredients
Week 2	Special Salad		egg milk, alcohol, mustard, pork, sulfur	Choppy Chop	Romaine, Herb-Roasted Chicken, Egg, White Cheddar, Salami, Piquillo Pepper, Pickled Red Onion, Zinfandel Vinaigrette
	Special Vinaigrette				
	Special ingredient #1		Milk	White Cheddar	
	Special ingredient #2		pork	Salami	
	Special ingredient #3			Piquillo Pepper	
	Special Protein				
	Special Greens				
Week 3	Special Salad		milk	Melon.Chili.Lime	Summer Melon, Cucumber, Romaine, Arugula, Cotija Cheese , Sunflower Seed, Mint, Chili Lime Dressing
	Special Vinaigrette			Chili Lime Dressing	Canola Oil, Lime Juice, Garlic Confit, Roasted Jalapeno, Cumin, Chili Powder, Coriander, Xanthan Gum, Salt, Pepper
	Special ingredient #1			Melon	Watermelon, Cantalope, Honeydew
	Special ingredient #2			Sunflower Seed	Sunflower Seed
	Special ingredient #3			Mint	Mint
	Special Protein				
	Special Greens				
Week 4	Special Salad			Sesame Pita	Hummus, Cucumber, Tomato, Za'atar-Roasted Chickpea, Pita Chip, Feta, Arugula, Pepperoncini, Sesame-Tahini Dressing
	Special Vinaigrette			Sesame-Tahini Dressing	
	Special ingredient #1			Hummus	
	Special ingredient #2			za'atar-roasted chickpea	
	Special ingredient #3			Feta	
	Special Protein			Pepperoncini	
	Special Greens				
Week 5	Special Salad		beef, gluten (wheat), mollusk, soy	Shaking Beef	Brown Rice, Oyster Sauce Beef , Tomato, Watercress, Romaine, Red Onion, Lime Black Pepper Vinaigrette
	Special Vinaigrette			Lime Black Pepper Dressing	Canola Oil, Lime Juice, Lime Zest, Xanthan Gum, Salt, Black Pepper
	Special ingredient #1			Red Onion	Red Onion
	Special ingredient #2			Tomato	Early Girl Tomato
	Special ingredient #3			Brown Rice	Brown Rice, Salt
	Special Protein		beef, gluten (wheat), mollusk, soy	Oyster Sauce Beef	Beef, Oyster Sauce, Soy Sauce , Honey, Garlic
	Special Greens			Watercress	Watercress
Optional Hot Program	Special			Southwest Spud	Sweet Potato, Black Beans, Corn, Tomato, Cotija , Cornchip, Cilantro, Chili-Oregano Vinaigrette
	Special Vinaigrette / Sauce				
	Special ingredient #1			Baked Sweet Potato	
	Special ingredient #2			Salsa Roja	
	Special ingredient #3				