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:

- A list of all other licensed premises within 500 ft. of this location including Beer and Wine.
- 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.
- 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.)
- A copy of your NYS Liquor Authority application as it will be submitted to the SLA. (excluding financial information)

APPLICANT INFORMATION	\: ∤						
Name of applicant(s): Night Owl C	omedy LLC						
Trade name (DBA): Comedy Ce							
emises address: 136 West 3rd Street							
Cross Streets and other addresses	used for building/premise:						
MacDougal Street/Avenue of the	Americas						
CONTACT INFORMATION:							
Principal(s) Name(s): Noam Dwo	orman, Elizabeth Furiati						
Office or Home Address: c/o Com	edy Cellar, 117 MacDougal Street						
City, State, Zip: New York, NY 10	0012						
Telephone #:	email: liz@comedycellar.com						
Landlord Name / Contact: Dwo	rmanco LLC						
Landlord's Telephone and Fax:							
NAMES OF ALL PRINCIPAL(s):	NAMES / LOCATIONS OF PAST / CURRENT LICENSES HELD Dynamic Music Corp d/b/a Olive Tree Cafe & Comedy Cellar						
Noam Dworman	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						
Briefly describe the proposed opera	ation (i.e. "We are a family restaurant that will focus on"):						

Meeting Date: May 2/4, 2023

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: McDonald's						
Is any license under the ABC Law currently active at this location? yesX_ no						
If yes, what is the name of current / previous licensee, license # and expiration date: N/A						
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:						
N/A						

PREMISES:

By what right does the applicant have possession of the premises?						
X Own X Lease Sub-lease Binding Contract to acquire real property other:						
Type of Building: Residential _X CommercialMixed (Res/Com) Other:						
Number of floor:2 Year Built :1974						
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						
Zoning Overlay or Special Designation (applicable) C1-5						
Block and Lot Number:543 /10						
Does the premise occupy more than one building, zoning lot, tax lot or more than one floor?yes _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 : _LPC's approval is pending						
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? 204; Applicant will obtain an amended Certificate of 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? 174						
If yes, what is the use group for the premises? Use Group 6 eating and drinking						
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 * Revise PA Layout						
Do you plan to file for changes to the Certificate of Occupancy? X yes no (if yes, please provide copy of application to the NYC DOB) *Application not filed						
Will the façade or signage be changed from what currently exist at the premise? no _X_ yes						
(if yes, please describe: The premises is being designed by Charcoal Blue, a world renowned theater design company. See attached for other projects.						

INTERIOR OF PREMISES: What is the total licensed square footage of the premises? 4,000 square feet If more than one floor, please specify square footage by floors: First floor: 2,000 sq.ft., basement: 2,000 sq.ft Mezzanine: 1,000 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? 2 interior staircases from basement to ground floor, 1 interior staircase between first floor and mezzanine How many entrances are there? 2 How many exits? 3 How many bathrooms? 4 Is there access to other parts of the building? x no yes, explain: OVERALL SEATING INFORMATION: Total number of tables? 61 Total table seats? 197 5 Counters Total number of bars? 1 Total bar seats? 0 Total number of "other" seats? N/A 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 1 Seats 0 How many service bars are being applied for on the premises? 0 Any food counters? X no ___ yes, describe : _____ 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.

pay for and receive food and alcoholic beverages.

PROPOSED METHOD OF OPERATION:

___ Bar _X_Bar & Food ___Restaurant ___Club/ Cabaret ___Hotel _X_Other: _Comedy club

What type of establishment will this be? (check all that apply)

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).

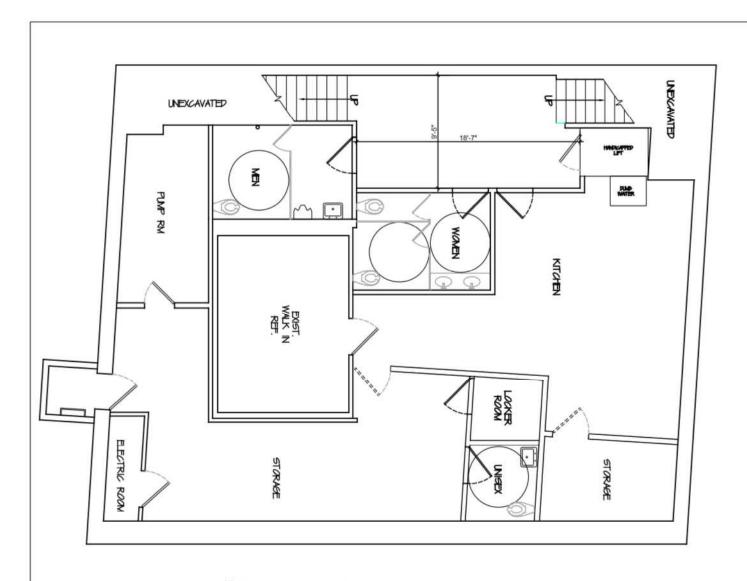
What are the Hours of Operation?

Sunday:	Monday:	Tuesday:	Wednesday.	Thursday:	Friday:	Saturday:		
- a - i de la companya de la company	10000000 to 10000000 • 0000	and an analysis of the second		100 miles (100 miles	70es 25 15	10		
6pm to 4am		6pm to 4am		6pm to 4am		1-1		
Will the busing will manage.	ness employ She has 26 yea	a manager? _ rs experience ma	no _X_ yes, naging the Comed	name / experie by Cellar on 117 M	ence if known : acDougal Street.	Principal Elizabeth Furiati		
Will there be	security pers	sonnel? no	X yes(if ye	es, what nights a	and how many	?) 2; all nights		
Do you have	or plan to ins	stall French dod	ors, accordion d	oors or windows	that open? _>	yes		
If yes, please describe :								
Will you have TV's ? X no yes (how many?)								
Comedy Performances Type of MUSIC / ENTERTAINMENT: X Live Music Live DJJuke 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? Yes								
Please desc	ribe your sou	nd system and	sound proofing:	The plan is no	ot finalized ye	, but it will be fully		
				soundproofed	d similar to the	other establishments.		
Will you bo r	ormitting: X	nromoted ev	onts V school	dulad parforman	cos outs	ido promotore		
Will you be permitting: X promoted events X scheduled performances outside promoters All promotion of events will be internal.								
X any events at which a cover fee is charged? X private parties								
es de la companya de								
Do you have plans to manage or address vehicular traffic and crowd control on the sidewalk caused by your establishment? no _X_ yes (if yes, please attach plans) Security staff will monitor traffic to ensure vehicular congestion does not occur in front of premises.								
				other outside				
		red seating to avo by pedestrians.	oid any buildup of o	crowds on the stre	et. Ropes will be	used to maintain		
Are your pre	mises within	200 feet of any	school, church	or place of wors	hip? X no	yes		
please subr	nit a block p		area map sho	점이 마음이 없었다. 현실이 되지 않아 아이를 보다 되었다.		or on the same block, y to your applicant		
ndicate the distance in feet from the proposed premise:N/A								
Name of Sch	nool / Church	i						
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.	y Board and confirm that if complaints are made
Contact Person: Noam Dworman	Phone: _
Address: c/o Comedy Cellar, 117 MacDougal Street, New \	York, NY 10012
Email : _owner@fbpc.com	
Application submitted behalf of the application submitted behalf o	
Print or Type Name Noam Dworn	
Title_LLC Membe	<u>er </u>

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



PROPOSED PLUMBING FIXTURES COUNTS
BETWEEN CELLAR & FIRST FL PROPOSED SEAT = 113 PERSON

PER TABLE 403.1, A-2 OCCUPANCY

WATER CLOSET:

MALE : 1 PER 75 PERSON FEMALE : 1 PER 40 PERSON

LAVATORY:

MALE : 1 PER 75 PERSON FEMALE: 1 PER 75 PERSON

CELLAR FLOOR PLAN

SCALE: 1/8" = 1'-0"

SCHEME SW 3/15/23 KARMAN. 35th ST., SUITE #1803 NEW YORK, NY 10001 TEL. (212) 942-1112 alfredkarman@gmail.com **COMEDY CELLAR** 136 W. 3rd ST NEW YORK, NY DRAWING No. SK-11 OF 5

