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## COMMUNITY BOARD No. 2, MANHATTAN

3 WASHINGTON SQUARE VILLAGE

NEW YORK, NY 10012-1899

[www.cb2manhattan.org](http://www.cb2manhattan.org)

P: 212-979-2272 F: 212-254-5102 E: [info@cb2manhattan.org](mailto:info@cb2manhattan.org)

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 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:

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:** 5/ /2023

**APPLICANT INFORMATION:**

**Name of applicant(s):**  
RH NY Gueshoust LLC & RH NY Guesthouse F&B LLC

**Trade name (DBA):**  
RH

**Premises address:**  
55 Gansevoort Street, New York, NY 10014

**Cross Streets and other addresses used for building/premise:**  
9th Avenue and Washington Street

**CONTACT INFORMATION:**

**Principal(s) Name(s):**  
Edward Lee. Jack Preston

**Office or Home Address:** [REDACTED]

**City, State, Zip:** [REDACTED]

**Telephone #:** [REDACTED] **email :** el@rh.com

**Landlord Name / Contact:**  
Griffin Gansevoort Holdings LLC

**Landlord's Telephone and Fax:** [REDACTED]

<b>NAMES OF ALL PRINCIPAL(s):</b>	<b>NAMES / LOCATIONS OF PAST / CURRENT LICENSES HELD</b>
<u>Edward Lee</u>	<u>RH Gallery; 9-19 Ninth Avenue, New York NY 10014</u>
<u>Jack Preston</u>	<u>RH Illinois, RH Florida, RH California, RH Yountville, RH Colorado</u>
<u> </u>	<u> </u>

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

If upgrade, alteration, or transfer, please describe specific nature of changes:

(Please include physical or operational changes including hours, services, occupancy, ownership, etc.)

Change in Method of Operation to update the cellar opening hours to 11am (currently 6pm)

If this is for a new application, please list previous use of location for the last 5 years:

N/A

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: \_\_\_\_\_

RH NY Guesthouse LLC & RH NY Guesthouse F&B LLC (Exp. 1.31.2024)

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: 7 Year Built : 1887

Describe neighboring buildings:

Mixed, Commercial/Office

Zoning Designation: M1-5

Zoning Overlay or Special Designation (applicable) None

Block and Lot Number: 644 / 60

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 : N/A

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 Rooftop, Sidewalk

What is the proposed Occupancy? 210

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? 210

If yes, what is the use group for the premises? 5, 6A

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 N/A already in place

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? 24,000

If more than one floor, please specify square footage by floors: Cellar: 1537 SF, Ground: 1864 SF; 2nd: 2190 SF, 3rd: 2493 SF, 4th: 2465 SF; 5th: 2521; Rooftop: 2506 SF

If there is a sidewalk café, rear yard, rooftop, or outside space, what is the square footage of the area?

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Rooftop: 2506 SF; DOT Sidewalk seating: 496 SF

If more than one floor, what is the access between floors? Elevator and stairs

How many entrances are there? 2 How many exits? 5 How many bathrooms ? 10

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

**OVERALL SEATING INFORMATION:**

Total number of tables? 37 Total table seats? 176

Total number of bars? 4 Total bar seats? 6

Total number of "other" seats? -0- please explain : \_\_\_\_\_

Total OVERALL number of seats in Premises : 182

**BARS:**

How many \* stand-up bars / bar seats are being applied for on the premises? Bars 2 Seats 6

How many service bars are being applied for on the premises? 2

Any food counters? X 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    X    Hotel      Other:

What are the Hours of Operation? See attached

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 : Already in place

Will there be security personnel? \_\_\_\_ no ☒ yes( if yes, what nights and how many?) 1 per shift

Do you have or plan to install French doors, accordion doors or windows that open? \_\_\_\_ no \_\_\_\_ yes

If yes, please describe : N/A already in place

Will you have TV's ? \_\_\_\_ no ☒ yes ( how many? ) guestrooms only

**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)

\*DJ and Live for full buyouts only

Do you have or plan to install soundproofing? \_\_\_\_ no \_\_\_\_ yes N/A - already in place

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: \_\_\_\_\_

RH NY Guesthouse F&B LLC and RH NY Guesthouse LLC  
Rider to Manhattan Community Board 2 Questionnaire

Cellar: Sunday to Wednesday 6pm-2am; Thursday to Saturday: 6pm-4am

Ground floor: Sunday to Wednesday 7am-12am; Thursday to Saturday 7am-2am

Rooftop: 6am-10pm daily

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 : \_\_\_\_\_

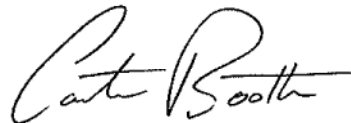
Application submitted on  
behalf of the applicant by:

  
\_\_\_\_\_  
Signature

Print or Type Name JACK PRESTON

Title Chief Financial Officer

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



# RH NY Guesthouse LLC & RH NY Guesthouse F&B LLC

## Cellar:

9 tables, 36 seats

1 Stand-up Bar, 6 bar stools

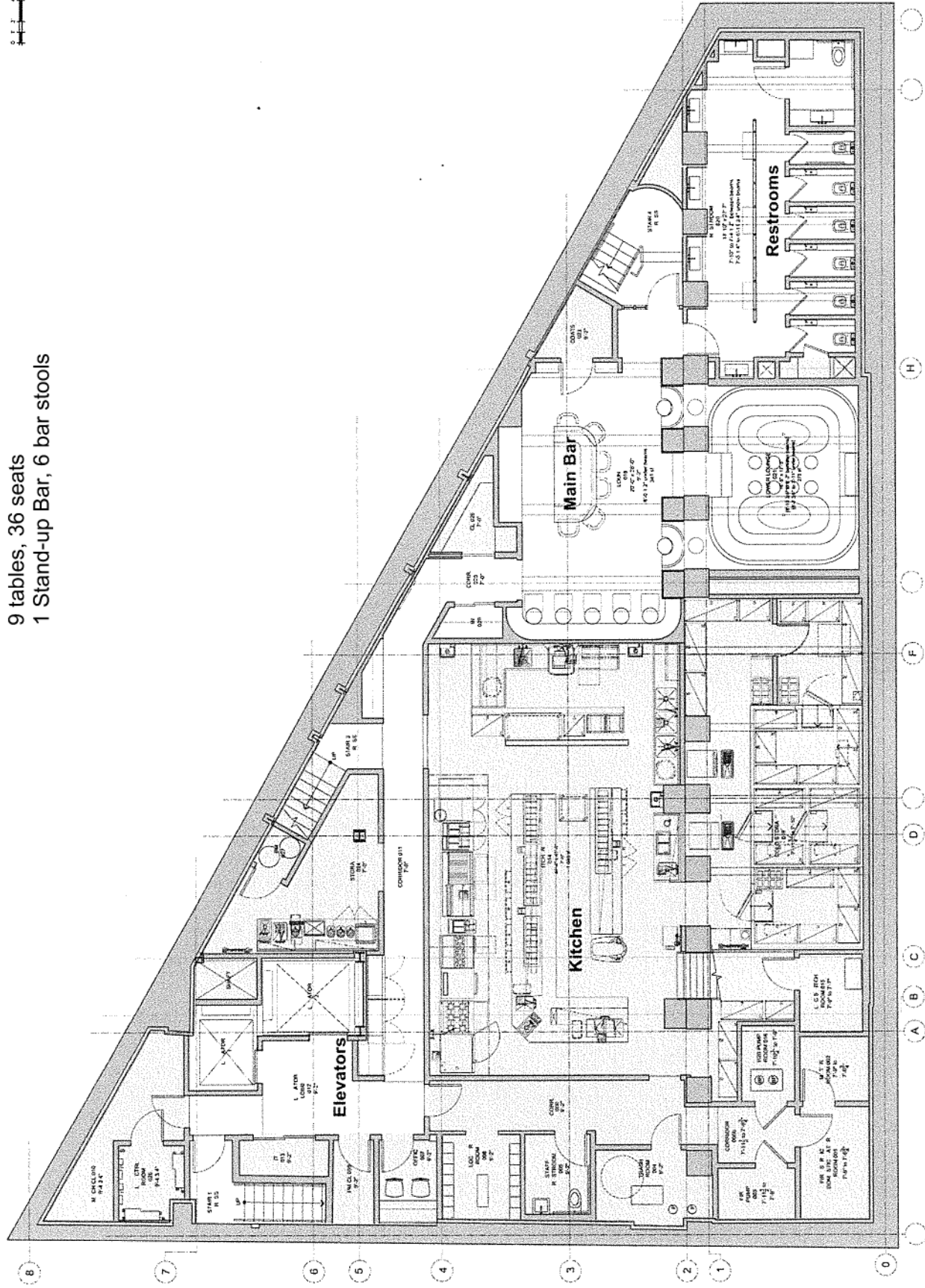
RH  
ARCHITECTURE | NEW YORK

RH GUESTHOUSE

35 Government Street  
New York, NY 10014  
Scale: 1/8" = 1'-0"

CELLAR FLOOR PLAN

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# RH NY Guesthouse LLC & RH NY Guesthouse F&B LLC

Ground floor seating:

1 stand-up Bar

2 Service Bars

22 tables, 96 seats

DOT: 14 tables, 40 seats

RH

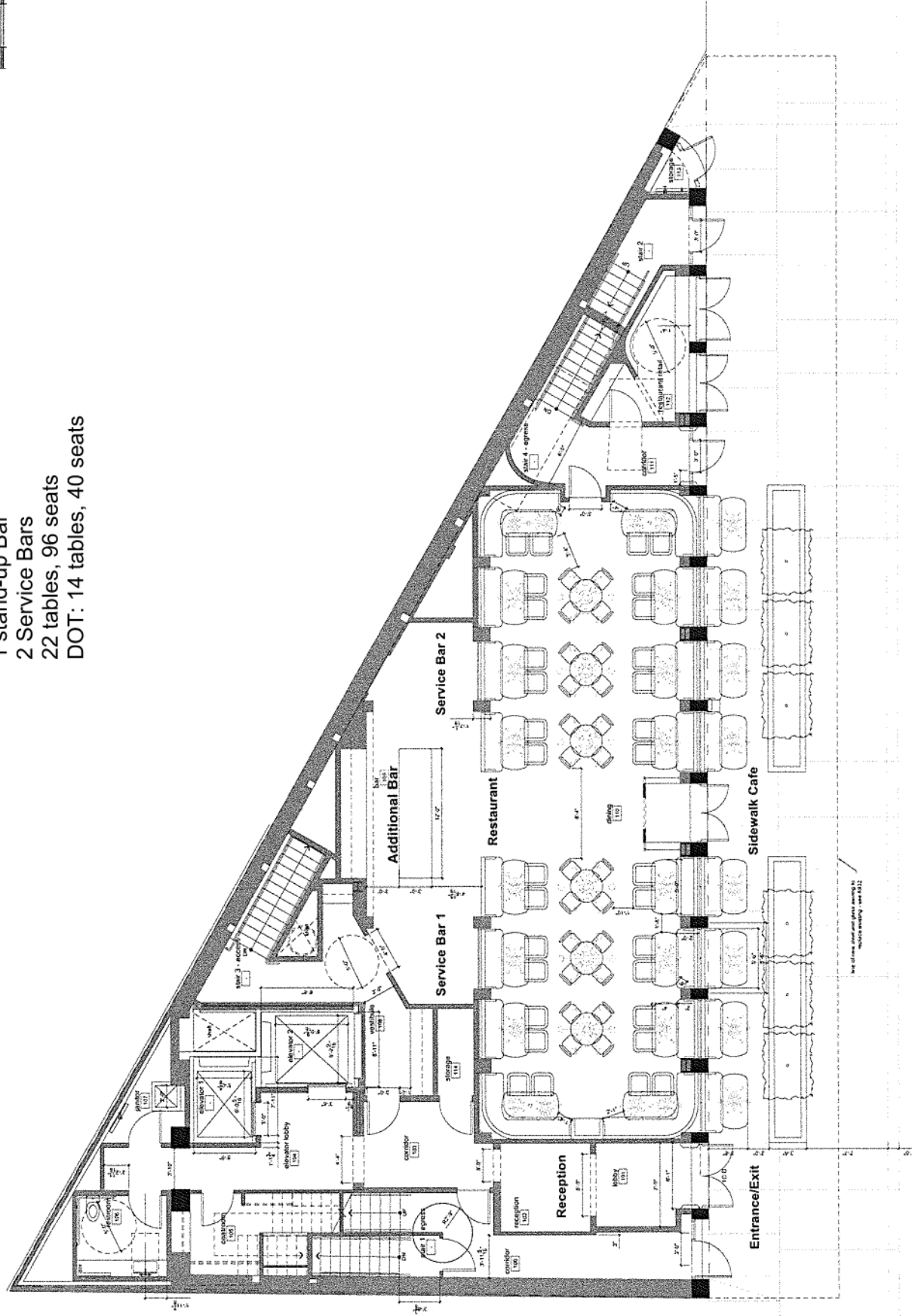
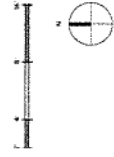
ARCHITECTS LLP

RH GUESTHOUSE

15 Gateway Street  
New York, NY 10014  
Phone: 212.512.1111  
www.rhny.com

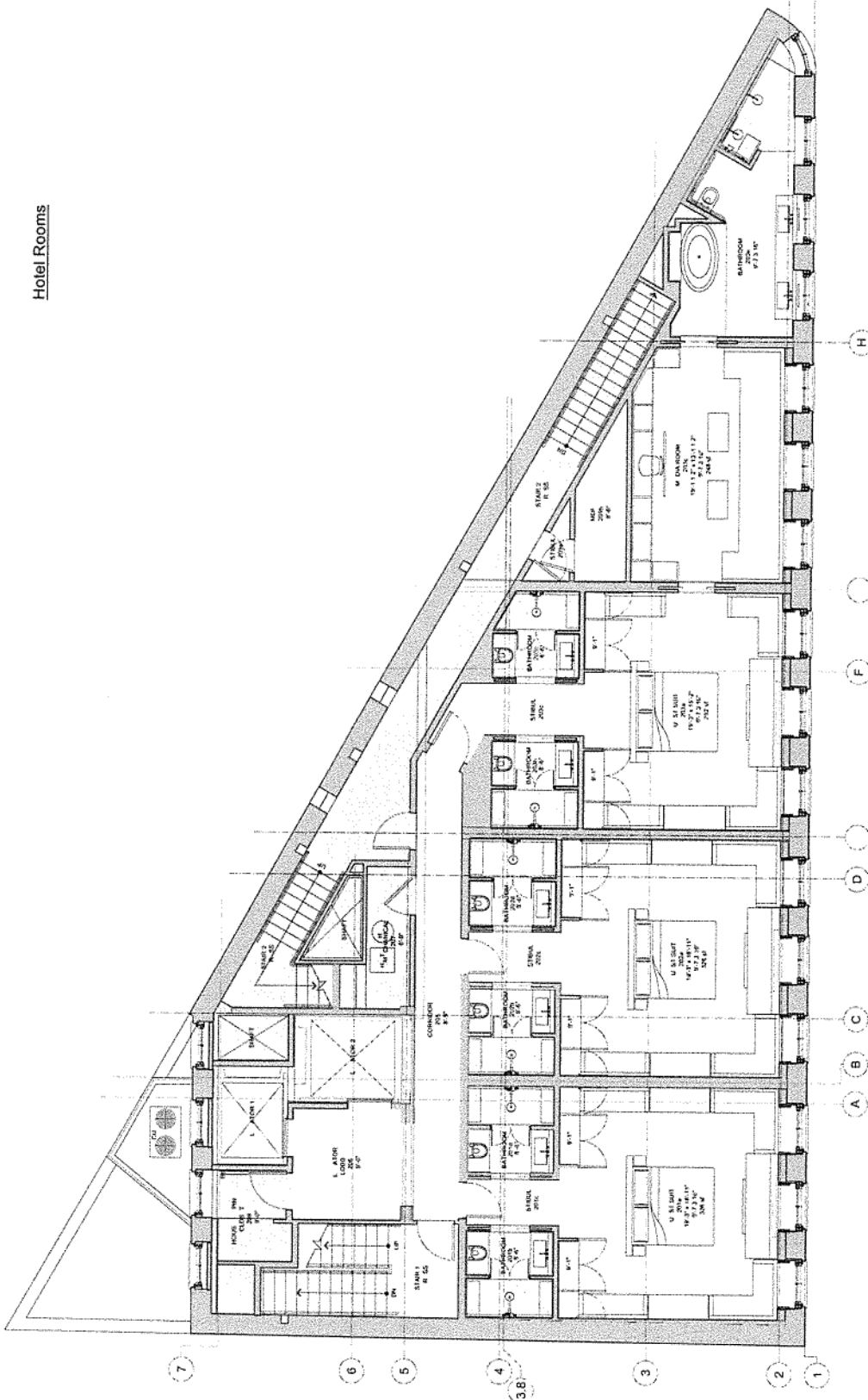
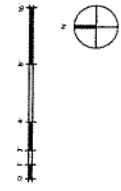
FIRST FLOOR PLAN

1

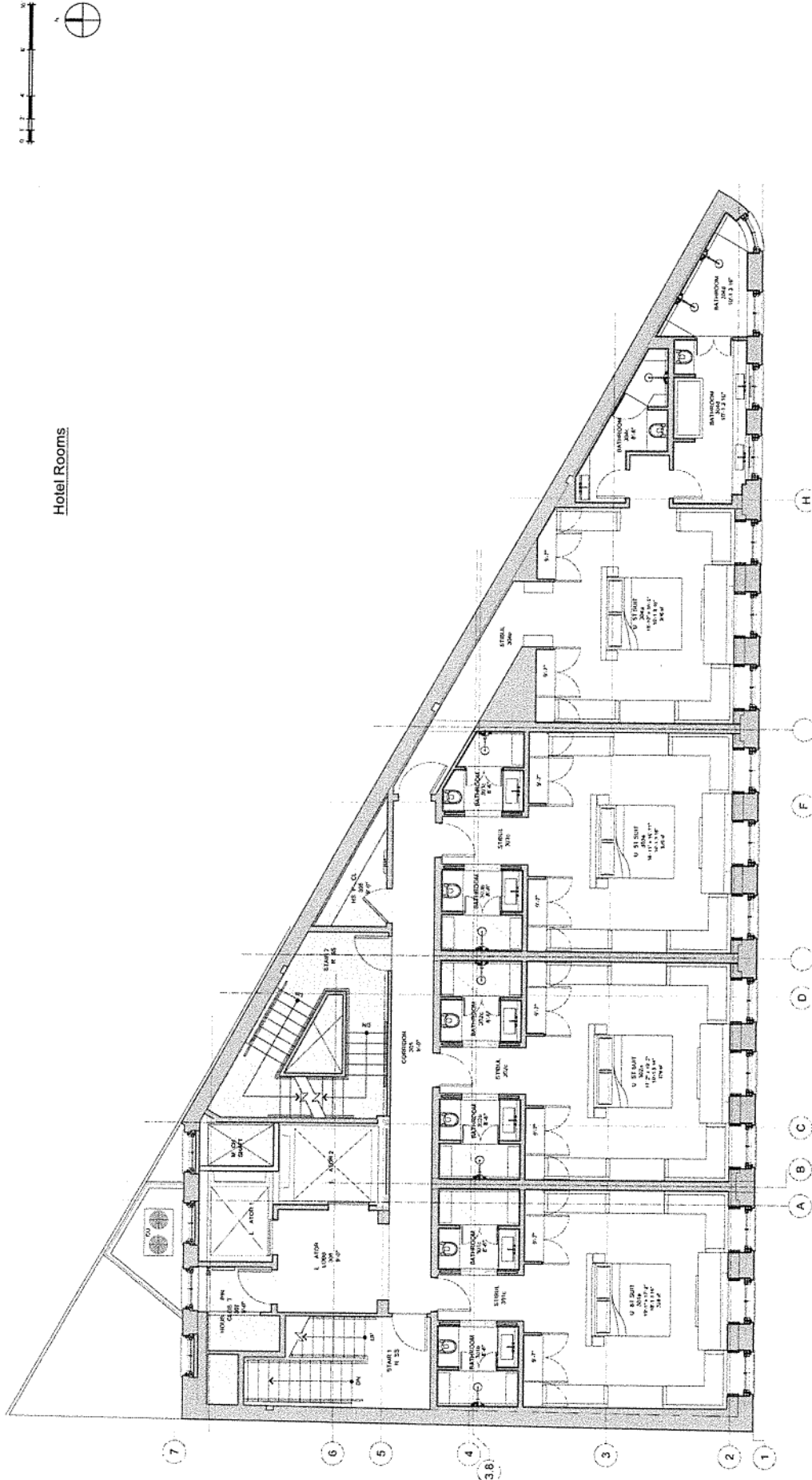


See 3D view and plan view in  
master plan - see 3.1.2

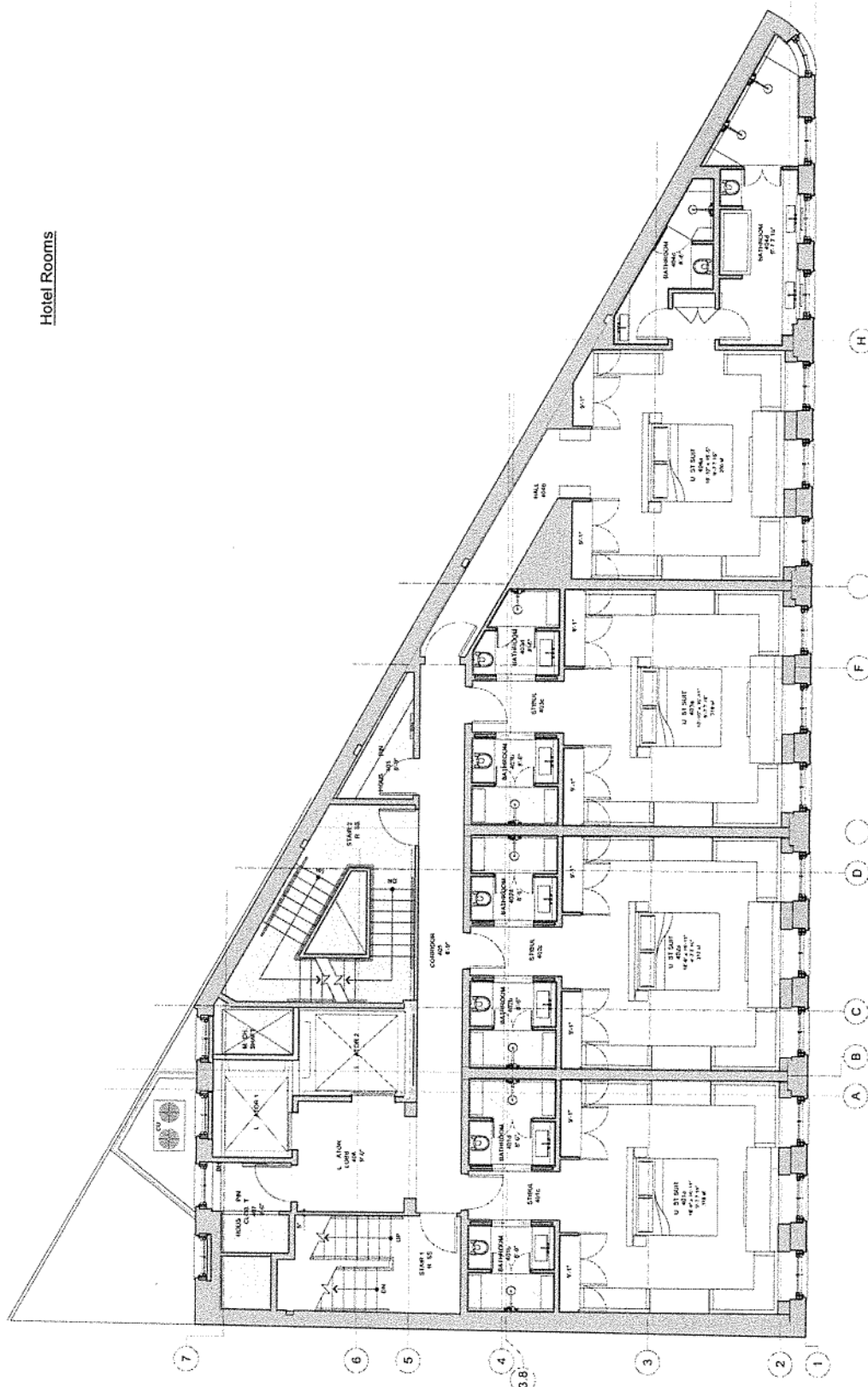
Hotel Rooms



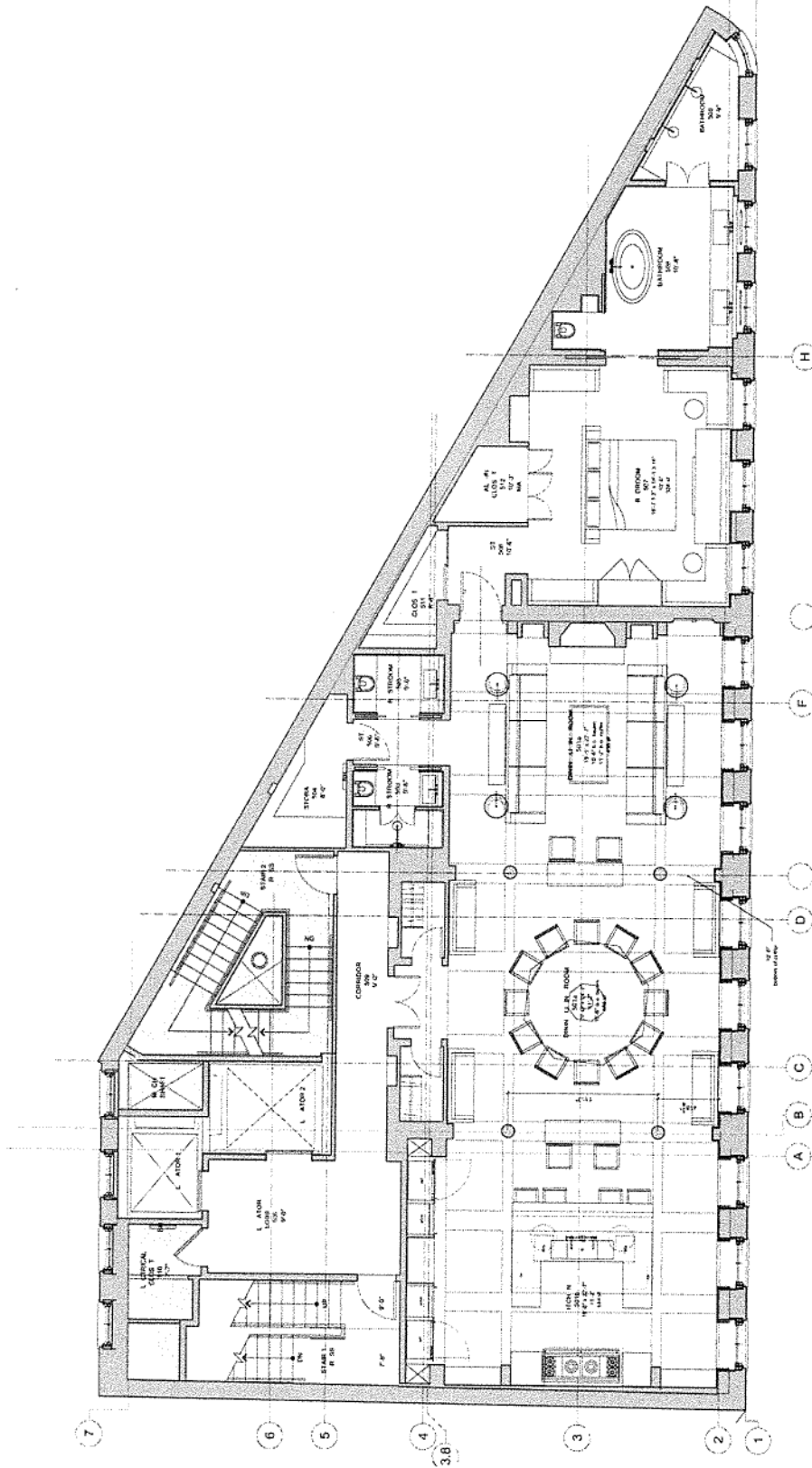
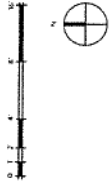
Hotel Rooms



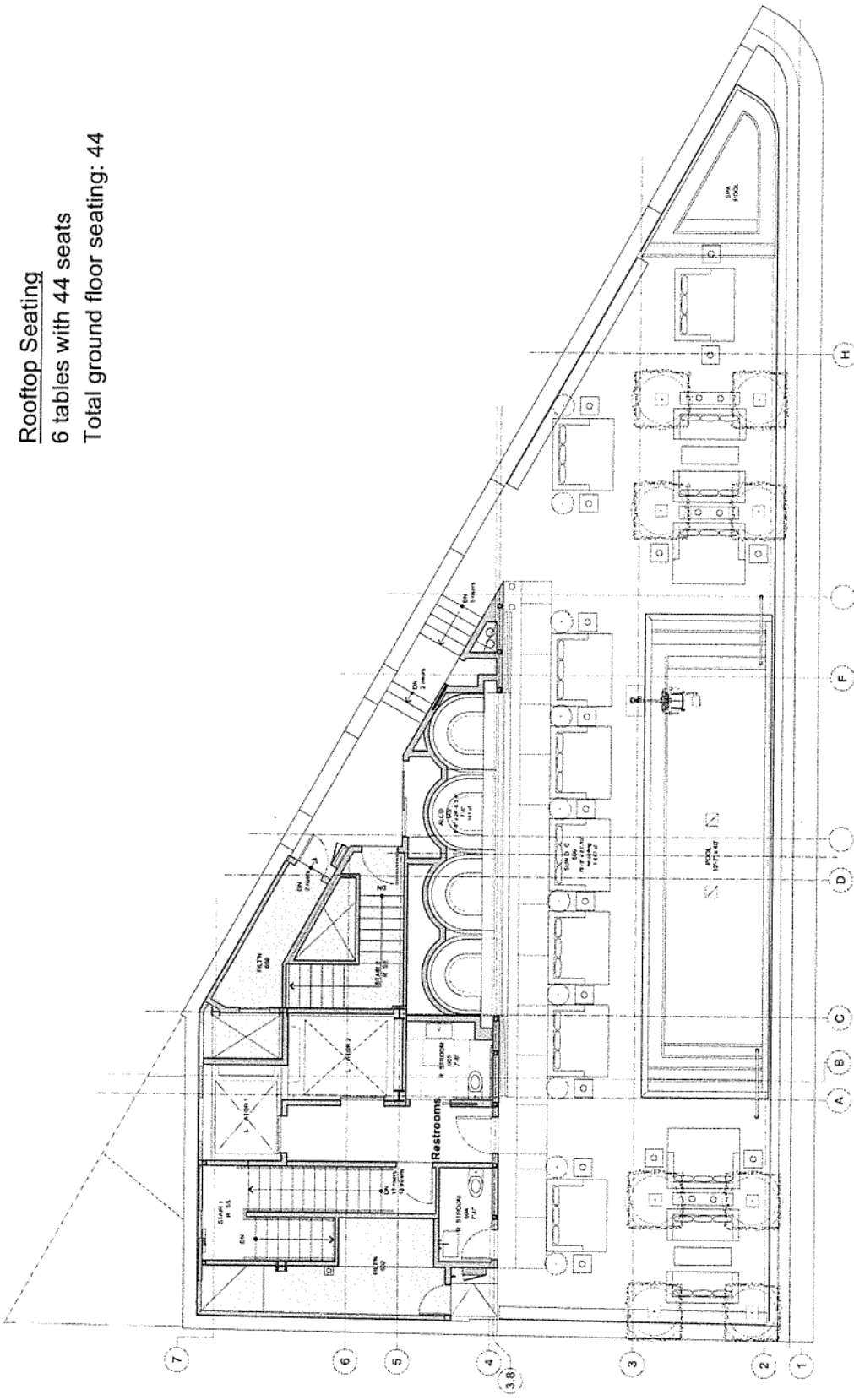
### Hotel Rooms



Hotel Rooms



Rooftop Seating  
6 tables with 44 seats  
Total ground floor seating: 44



## RH NY Guesthouse F&B LLC- Updated

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 Chatterjee, *Assistant Secretary*

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### 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.
  - If seating is in a rear yard show photos of yard and surrounding area, including upper view of adjacent buildings.

**Sidewalk café** will have no more than *(If premises is located on a corner please indicate for both streets):*

14 tables and 40 seats on Gansevoort Street

       tables and        seats on        Street

Hours of sidewalk café: 8am to 10pm Monday-Thursday

8am to 11pm Friday- Sunday

Describe any obstructions (trees, fire hydrant, proximity to bus stop, etc): N/A

**Roadbed** will have no more than *(If premises is located on a corner please indicate for both streets):*

       tables and        seats on        Street

       tables and        seats on        Street

Hours of roadbed:        to        .

Describe any obstructions (trees, fire hydrant, proximity to bus stop, etc):       

**Rear yard** will have no more than        tables and        seats

Hours of rear yard:        to        .

Does seating extend beyond the business frontage? ☒ No ☐ Yes

Will outdoor dining structures **on the sidewalk** be enclosed on three (3) or more sides? ☐ No ☒ Yes

Will outdoor dining structures **on the roadbed** be enclosed on three (3) or more sides? ☐ No ☐ Yes

Is there any outdoor music, speakers or TVs? ☒ No ☐ Yes, please describe:       

Will heating elements be used? ☐ No ☒ Yes, please describe: Electric heating units hung from canopy above



