



**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 : Catering Wine

If upgrade, alteration, or transfer, please describe specific nature of changes:  
(Please include physical or operational changes including hours, services, occupancy, ownership, etc.)

NA

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

Retail Store

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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: \_\_\_\_\_

N/A

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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:

N/A

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**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: 6 Year Built : 1900

Describe neighboring buildings:  
Commercial/Mixed

Zoning Designation: M1-5/R9x

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

Block and Lot Number: 209 / 28

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 : No proposed changes will be made.

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? 60

Does the premise currently have a valid Certificate of Occupancy (C of O) and all appropriate permits?

no  yes Pending

If yes, what is the maximum occupancy for the premises? N/A

If yes, what is the use group for the premises? N/A

If yes, is proposed occupancy permitted?  yes  no, explain : \_\_\_\_\_

DOB Approval pending

If your occupancy is 75 or greater, do you plan to apply for Public Assembly permit?  yes  no N/A

Do you plan to file for changes to the Certificate of Occupancy?  yes  no TBD  
(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? 2300 SQ FT

If more than one floor, please specify square footage by floors: Cellar: 700 sq ft; ground floor: 1600 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? Stairs

How many entrances are there? 1 How many exits? 2 How many bathrooms? 2

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

## OVERALL SEATING INFORMATION: \*Seating will vary based on event

Total number of tables? \* Total table seats? \*

Total number of bars? 1 Total bar seats? To vary based on event

Total number of "other" seats? N/A please explain: N/A

Total OVERALL number of seats in Premises: \*

## BARs: \*Seating will vary based on event

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

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: \_\_\_\_\_

N/A

\* 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: Galley/Event Space



What are the Hours of Operation?

Sunday:      Monday:      Tuesday:      Wednesday:      Thursday:      Friday:      Saturday:  
12pm to 12am   12pm to 12am   12pm to 12am   12pm to 12am   12pm to 12am   12pm to 2am   12pm to 2am

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

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 :   N/A

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?   Yes

Please describe your sound system and sound proofing:   Sound system will consist of wall-mounted speakers that guest can connect with their iPhone. Sound proofing will be 2" thick, surface mounted, and insulated across the entire ceiling.

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)

Will you be utilizing   No ropes   No movable barriers   No other outside equipment (describe)   No

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:

Adam Farmerie

\_\_\_\_\_  
Signature

Print or Type Name Adam Farmerie

Title Principal

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

OFFICE USE ONLY		
<input type="radio"/> Original	<input type="radio"/> Amended	Date _____

## ESTABLISHMENT QUESTIONNAIRE

In this section you must describe the premises to be licensed. Answer ALL questions completely. Please do not answer "see attached" to any question. Any incomplete answer may delay or prevent the processing of the application.

**Helpful Hint: Drawing your diagram and reviewing your photographs may assist you in completing this section. See sample diagrams at the end of this application.**

**1. Zoning**

1a. State what the area is zoned for:   
(e.g., Residential, Business, Mixed etc.)

1b. Does the premises have a **VALID CERTIFICATE OF OCCUPANCY** and **ALL** appropriate permits?  Yes  No  Pending

**2. Premises**

2a. Describe the type of building in which the premises will be located.

2b. Is or has the building/proposed premises been known by any other address?  Yes  No

If YES, please specify:

*If the address was changed due to a 911 update or other government action, please include documentation for the change.*

2c. Is there currently an active license or has there ever been a license to traffic in alcoholic beverages at this location?  
 Currently Licensed  Previously Licensed  Never Licensed  Do Not Know

Name of Licensee:  License Serial Number:

2d. Are there any disciplinary actions pending against the applicant, current licensee or prior licensee?  
 Yes  No  Do Not Know

**Any pending disciplinary action may delay a determination on this application or result in the disapproval.**

2e. If the proposed premises has never been licensed, what was the prior use?

2f. Is any other floor or area of the building currently licensed?  Yes  No

Name of Licensee:  License Serial Number:

### 3. Premises (interior):

3a. List the total number of floors of the business establishment to be licensed, including the basement:

3b. List the floor(s) where the proposed premises will be located:   
(e.g., basement, ground floor, 2nd & 3rd floor, etc.)

3c. Where is the alcohol stored?

3d. Is there interior access to any other floor(s) or area(s) that will not be part of the premises to be licensed?  
If yes, show the means of access on the interior diagram(s).

Yes      No

3e. Are the premises to be licensed divided in any way, by a public or private passageway, over which the applicant does not have exclusive possession and control?  
(e.g., hallway, stairwells, common areas, etc.)

Yes      No

If YES, describe:

3f. How many public restrooms? If less than two (2) public restrooms, you must request a waiver of the two (2) restroom rule in writing. Please show restrooms on diagram.

3g. List the maximum occupancy of the premises:

3h. Number of tables?

3i. Number of seats at tables?

3j. Number of seats at bar or counter?

### 4. Bars:

4a. How many customer bars are located on the premises?  
*(a customer bar is where patrons may order, purchase or receive alcoholic beverages)*

4b. How many service bars? *(a service bar is for wait staff use exclusively)*

4c. Describe each bar in the fields below:

**Bar 1**

Bar Type:

Length:

Shape:

Location:

**Bar 2**

Bar Type:

Length:

Shape:

Location:

**Bar 3**

Bar Type:

Length:

Shape:

Location:

**Attach additional sheets if there are more than 3 bars.**

<input type="radio"/> Original <input type="radio"/> Amended                      OFFICE USE ONLY Date _____
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**5. Kitchen:**

5a. Does the premises have a full kitchen?      Yes      No

If NO, does the premises have a food preparation area?      Yes      No

**Show Kitchen or Food Prep Area on the Interior Diagram**

**NOTE: FOOD MUST BE AVAILABLE FOR SALE DURING ALL HOURS OF OPERATION; SUBMIT A MENU**

5b. Is a chef/cook employed at the premises?      Yes      No

If YES, please list hours of day chef/cook will devote to the premises:

**6. Hotel or Bed & Breakfast:**

6a. How many floors?

6b. How many guest rooms?

6c. For Hotels Only: Is there a public restaurant on the hotel premises?      Yes      No

**7. Outdoor Areas:**

7a. Are there any outside areas used for the sale or consumption of alcohol?      Yes      No

7b. If YES, what is the outside occupancy?

7c. Check all types that apply:  
(there must be direct access from the interior of the premises to any outdoor area(s) that you wish to license. Show access on diagram)

- |                   |      |         |          |        |
|-------------------|------|---------|----------|--------|
| Sidewalk Cafe     | Deck | Patio   | Porch    | Gazebo |
| Rooftop           | Yard | Balcony | Pavilion | Tent   |
| Other (describe): |      |         |          |        |

7d. Is the outdoor area(s) divided by any public or private passageway or area that the applicant does not have exclusive control?      Yes      No

If YES, how is it divided?

7e. How is the outdoor area(s) contained? Check all that apply and show enclosure on diagram.

- |                   |      |           |        |            |
|-------------------|------|-----------|--------|------------|
| Fencing           | Wall | Shrubbery | Roping | Stanchions |
| Other (describe): |      |           |        |            |

7f. Is a permit required by the locality for outside area(s)?      Yes      No  
If yes, submit a copy of the permit.

OFFICE USE ONLY		
<input type="radio"/> Original	<input type="radio"/> Amended	Date

## PROPOSED METHOD OF OPERATION

*This form satisfies Section 110 of the ABC Law requiring that a statement be submitted indicating the type of establishment operated at the premises.*

The information in this section will be the method of operation you are approved for and will be binding. Should you wish to deviate from this method of operation in any way, you must first apply for and receive permission from the Authority.

1. Will any other business of any kind be conducted in said premises?  Yes  No  
*(If YES, please provide details on a separate sheet)*

1a. If the premises *is not* a catering establishment, will the premises periodically close to host private events?  Yes  No

If YES, how frequently?

2. Will the premises have music?  Yes  No

2a. If YES, check all that apply:  Recorded  DJ  Juke Box  Karaoke

Live Music (give details: e.g., rock bands, acoustic, jazz, etc.):

2b. Will the premises use the services of an Event Promoter?  Yes  No

3. Will the premises permit dancing?  Yes  No

3a. If dancing is permitted, who will be permitted to dance?  Patrons  Employees for Entertainment  Both

3b. If dancing is permitted, will there be exotic dancing including, but not limited to, topless entertainment, pole dancing and/or lap dancing?  Yes  No

4. Will there be topless entertainment?  Yes  No

5. Will the business employ a manager?  Yes  No

5a. If NO, will principal(s) manage?  Yes  No

6. How many employees? (excluding principals and security personnel)

6a. If answer is "0" please provide an explanation:

OFFICE USE ONLY		
<input type="radio"/> Original	<input type="radio"/> Amended	Date

7. NYS Law requires businesses to carry workers' compensation and disability insurance (see instructions). If applied for and pending, please indicate.

Workers' Compensation Carrier Name and Policy Number:

Disability Insurance Carrier Name and Policy Number:

**If you are exempt from Workers' Compensation and/or Disability Benefits Insurance coverage, submit an approved Certificate of Attestation of Exemption from NYS Workers' Compensation and/or Disability Benefits Insurance Coverage from the NYS Workers' Compensation Board. The application is available on their website: <http://www.wcb.ny.gov> or you may contact them by phone at: (877) 632-4996**

8. Will security personnel be used at the premises?  Yes  No

9a. If YES, how many?

9b. If YES, provide your **Proprietary Security Guard Employer Unique Identification Number** assigned to the business by the NYS Department of State Division of Licensing Services or the name of the security company through which the security personnel will be hired:

***The Licensee is responsible for assuring that hired security personnel are registered in accordance with NYS Security Guard Registration Guidelines. Please contact the NYS Department of State to obtain information.***

9. Provide a detailed plan of supervision for the premises to be licensed. Clearly describe how you will maintain control and order over the licensed premises. How will you monitor alcohol sales and prevent sales to minors and sales to intoxicated persons? How will you handle unruly patrons, altercations, etc., to prevent the premises from becoming disorderly? Include additional sheets if necessary.

Management will be on premises at all times to supervise and control the establishment and ensure ABC law compliance. All employees will receive training so as to know how to prevent service of alcohol to minors, intoxicated individuals and how to handle disorderly patrons.

10. Are all responses provided in this application consistent with the information provided to the municipality or Community Board within the Standardized Notice Form for Providing 30-Day Advance Notice?

Yes  No

10a. If NO, please explain:

**ALCOHOLIC BEVERAGES MAY ONLY BE CONSUMED, SOLD OR GIVEN AWAY DURING THE HOURS APPROVED BY THE COUNTY WHERE THE PREMISES IS LOCATED UNLESS FURTHER RESTRICTED BY THE AUTHORITY**

A list of county closing hours is available at the following link:  
<http://sla.ny.gov/provisions-for-county-closing-hours>

This report is for informational purposes only in aid of identifying establishments potentially subject to 500 and 200 foot rules. Distances are approximated using industry standard GIS techniques and do not reflect actual distances between points of entry. The NYS Liquor Authority makes no representation as to the accuracy of the information and disclaims any liability for errors.

Proximity Report For:	
Location	<b>21 Howard St, New York, New York, 10013</b>
Geocode	<b>Latitude: 40.71939 longitude: -74.00044</b>
Report Generated On	<b>5/24/2023</b>

8 Closest Liquor Stores		
Name	Address	Distance
WALKER LIQUOR CORP Ser #: 1023593	101 105 LAFAYETTE STREET NEW YORK, NY 10013	624 ft
GRANYETTE WINE & SPIRITS INC Ser #: 1336830	184A LAFAYETTE ST NEW YORK, NY 10013	750 ft
EL CORRAL SOHO INC Ser #: 1235206	406 BROOME ST, STORE H AKA 199 LAFAYETTE ST & CLEVELAND PL NEW YORK, NY 10013	951 ft
SA VINO ITALIANO INC. Ser #: 1199593	200 GRAND ST MOTT & MULBERRY STREETS NEW YORK, NY 10013	1,052 ft
GROTTA AZZURRA IMPORTS INC Ser #: 1259856	177 MULBERRY ST STORE 1A NEW YORK, NY 10013	1,072 ft
COOL WINE & SPIRITS LLC Ser #: 1332493	375B CANAL ST NEW YORK, NY 10013	1,310 ft
BUNDA STARR CORP Ser #: 1344609	90 FRANKLIN ST NEW YORK, NY 10013	1,334 ft
R & S 49 LIQUOR CORP Ser #: 1297191	92 ELIZABETH ST NEW YORK, NY 10013	1,349 ft

Schools within 500 feet		
Name	Address	Distance
No Schools within 500 feet		



**Churches within 500 feet**

Name	Distance
Shan Xiu Taoist Temple	205 ft
N Y Chinese Baptist Church	465 ft

**Pending On Premises Liquor Licenses within 750 feet**

Name	Address	Distance
AUGUST GATHERINGS NYC CORP Ser #: 1362756	266 CANAL STREET WEST STORE NEW YORK, NY 10013	362 ft
ALL BLUES INC Ser #: 1352452	87 WALKER ST NEW YORK, NY 10013	561 ft

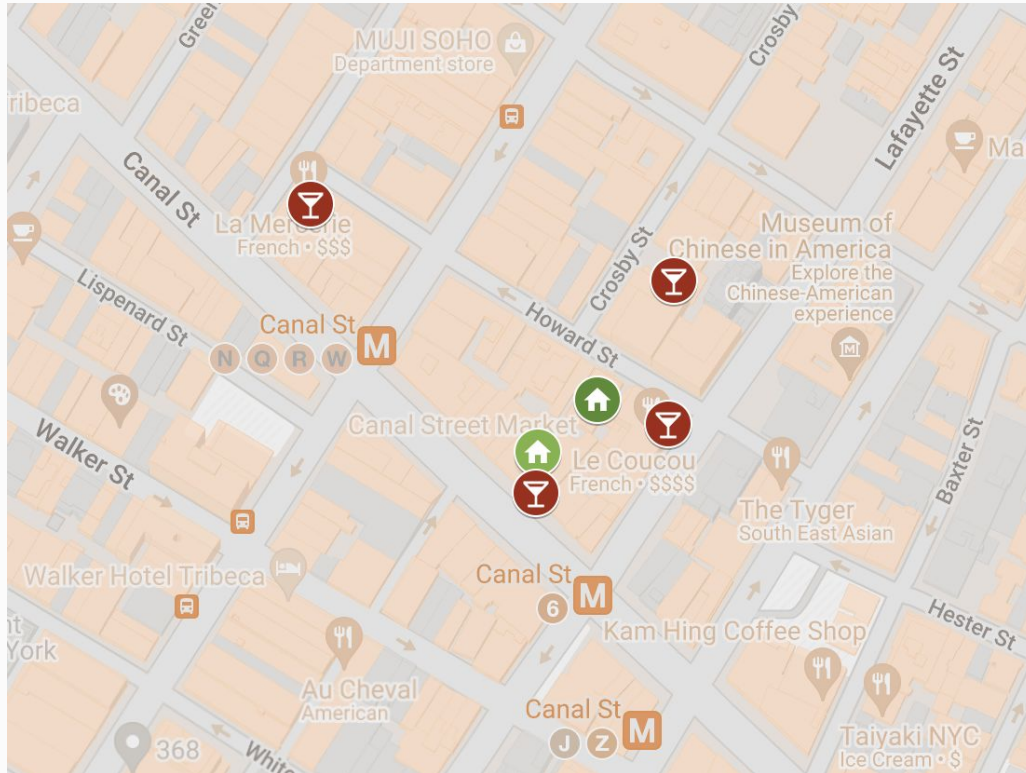
**Active On Premises Liquor Licenses within 750 feet**







Name	Address	Distance
LA RUBIA RAW BAR LLC Ser #: 1345358	11 HOWARD ST A/K/A 138 LAFAYETTE ST NEW YORK, NY 10013	93 ft
SOHO HOTEL OWNER LLC & SOHO HOTEL MANAGER LLC Ser #: 1279933	138 LAFAYETTE ST 11-17 HOWARD STREET NEW YORK, NY 10013	113 ft
MOE LARRY CHEESE LLC Ser #: 1291783	138 LAFAYETTE ST NEW YORK, NY 10013	139 ft
9 CROSBY LLC & HIGHGATE HOTELS LP Ser #: 1284551	9 CROSBY ST NEW YORK, NY 10013	188 ft
AUGUST GATHERINGS CORP Ser #: 1311799	266 CANAL ST WEST STORE NEW YORK, NY 10013	297 ft
MARIE ADRIENNE LLC Ser #: 1301319	158 LAFAYETTE NEW YORK, NY 10013	328 ft
K & K GRAND CORP Ser #: 1319624	141 GRAND ST NEW YORK, NY 10013	368 ft
CENTER FOR GOODS LLC & HOWARD FINE LLC DBA: ROMAN Ser #: 1303544	53 HOWARD ST NEW YORK, NY 10013	373 ft
1 TYGER LLC Ser #: 1330910	1 HOWARD ST NEW YORK, NY 10013	375 ft
BECCA 161 LAFAYETTE CORP Ser #: 1333565	161 LAFAYETTE ST NEW YORK, NY 10013	406 ft
VEM 15 LLC Ser #: 1335738	155 GRAND ST AKA 161 LAFAYETTE ST NEW YORK, NY 10013	443 ft

**Active On Premises Liquor Licenses within 750 feet**

<b>Name</b>	<b>Address</b>	<b>Distance</b>
CHIPOTLE MEXICAN GRILL OF COLORADO LLC Ser #: 1294272	404 BROADWAY NEW YORK, NY 10013	538 ft
79 WALKER STREET RESTAURANT LLC Ser #: 1304490	79 WALKER ST NEW YORK, NY 10013	569 ft
AVS INTERNATIONAL RETAIL INC & LIVE AXE INC Ser #: 1322707	96 LAFAYETTE ST NEW YORK, NY 10013	619 ft
SUGAR BEETS INC Ser #: 1288497	239 CENTRE ST NEW YORK, NY 10013	650 ft
BRIDGETON F&B MGMT LLC;BRIDGETON 396 PROP MASTER Ser #: 1307210	396 BROADWAY NEW YORK, NY 10013	655 ft
174 GRAND STREET CORP Ser #: 1025414	174 GRAND STREET NEW YORK, NY 100133761	682 ft

# Licensed Premises (500ft)



-  HOST on Howard
-  AvroKO Design
-  NOMO SOHO
-  11 Howard
-  La Mercerie
-  Canal Street Market



## Pesetsky & Bookman, PC

Attorneys at Law

325 Broadway, Suite 501  
New York, NY 10007

(212) 513-1988 | [www.PB.law](http://www.PB.law)

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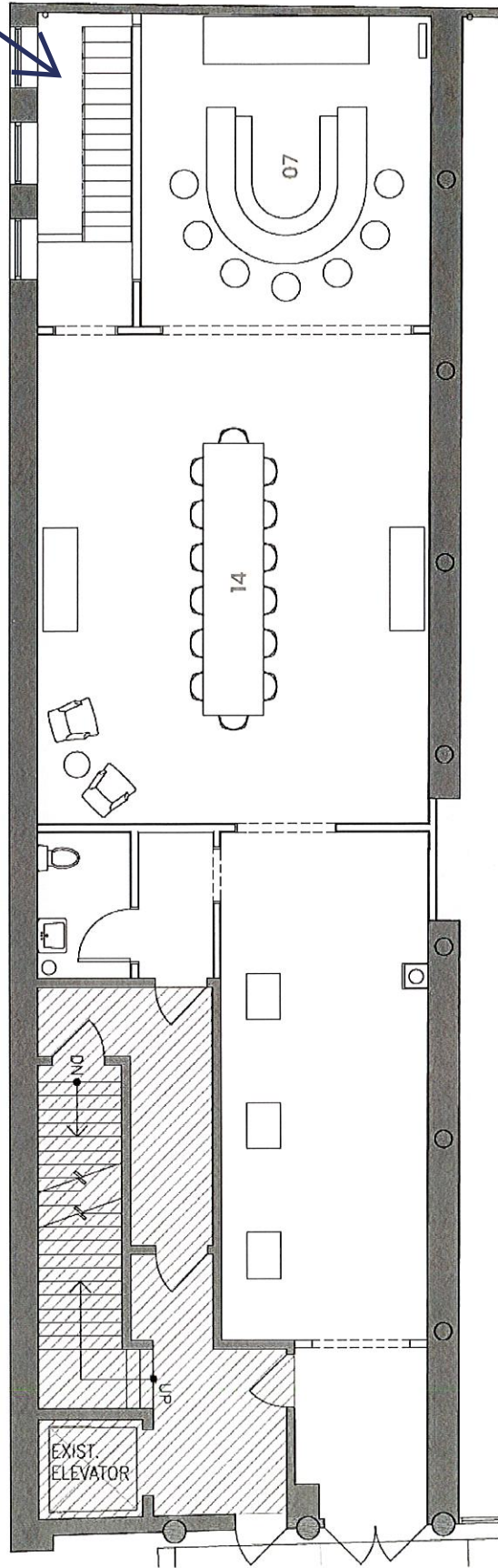
### PUBLIC INTEREST STATEMENT

The public interest will be promoted by the granting of an on-premises license for the sale of alcoholic beverages to the applicant at the subject location for the following reasons:

1. The applicant's proposed method of operation is a unique concept unlike those offered by other establishments in the neighborhood.
2. All necessary licenses and permits have been obtained from the state and all other governing bodies or will be obtained as a condition of approval.
3. There is significant parking availability in proximity to the location.
4. Issuance of the license will not materially impact vehicular traffic in proximity to the location.
5. The applicant's proposed method of operation cannot be reasonably expected to materially impact the noise level in proximity to the location.
6. There is no material history of liquor violations or reported criminal activity at the proposed premises.
7. Consistent with the Legislature's most recent statement on the policy of the State of New York and purpose of the Alcoholic Beverage Control Law, issuance of the license will support economic growth, job development, and the state's alcoholic beverage production industries and its tourism and recreation industry. *See* ABCL § 2.
8. While many businesses are currently closed or closing due to the ongoing impact of the COVID-19 pandemic, and unemployment rates are at an all-time high, operators like the applicant are pushing forward and opening, which will aid in the economic recovery of the state. Whereas courts have previously discouraged considering generalized economic factors in analyzing the public interest, the need for economic recovery following the COVID-19 pandemic creates an exceptional and distinguishable circumstance that is proper for the Authority to consider.

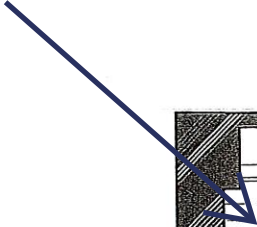
Stairs down to cellar

Host of Howard LLC  
21 Howard Street  
New York, NY 10013  
Sample Ground Floor Layout for an event

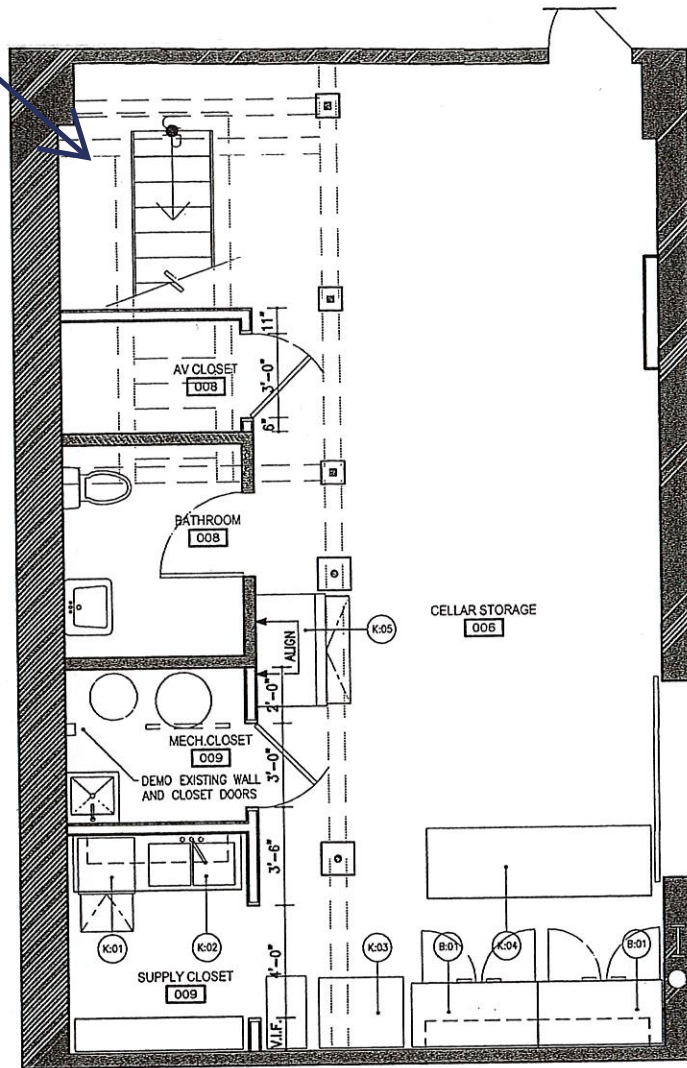


Entrance/Exit  
Door

Stairs up to ground floor



Host on Howard LLC  
21 Howard Street  
New York, NY 10013  
Cellar Diagram





# Food Menu

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## **CROSTINIS**

Filet mignon, jalapeno relish, cilantro, lime juice

## **SOHO STREET SKEWERS**

Blackened shrimp, grilled veggies, harissa chicken, beef

## **BITE SIZE**

Lobster tart, chicken tart, veggie mouse tart

## **CROSBY CLASSICS**

Smoked salmon on cucumber, chicken salad on endive, crudite cups

## **MINI SLIDERS**

Beef, falafel, grilled chicken



## **Community Outreach - HOST on Howard**

**Date:** June 5th, 2023

The following signatures of residents, businesses, and workers are to show support of a liquor license (wine only) for HOST on Howard.

The address of the proposed location is 21 Howard Street and the business will operate as a gallery/showroom and events space.

The hours of operation will be:



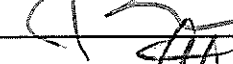


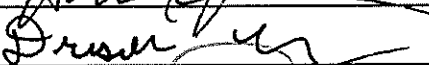


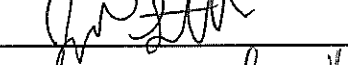

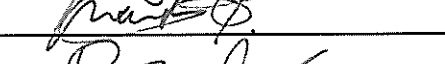



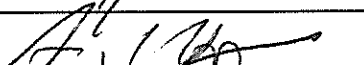

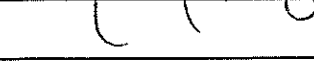

Sunday-Thursday: Noon-Midnight

Friday-Saturday: Noon-2:00am

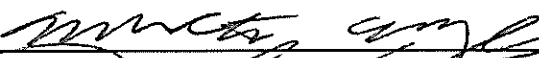
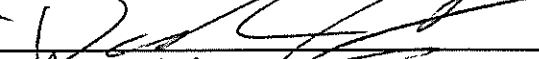
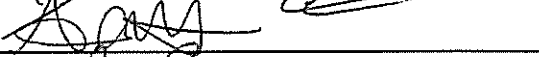
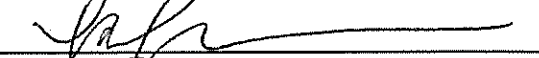
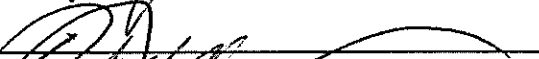
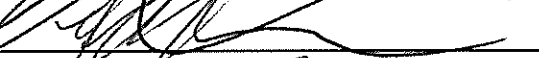




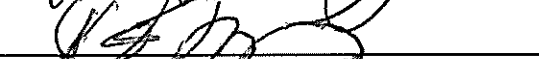

Please find signatures on the following pages.



Signatures of Support - Residents, Workers, Citizens

Name	Signature
Lydia Blues	
Savannah Lee	Savannah Lee
KATHARINA HUBAUER	
VITTORIA LE DONNE	V. Le Donne
Travis Schupp	
TEN BUENZ	
Penelope White	
Ally Samuels	Ally Samuels
YI CHEN . HE	yicheng.
HELIANA JUDGE	
Dresden Timco	
Olivia Norris	
Ethan Fedek	
Jacob Schuster	
Yuki Kuvana	
Narta Baria Campa	
DANA-JEONG	
Michaela McTeirk	
MONARK SREBANTIDJ	
Scott Miller	
Amber Hannay	
Nabil Almanzar	

Signatures of Support - Residents, Workers, Citizens

Name	Signature
MEOLINE CHANG	
DANIELLE GRAY	
ALEXIS HOOKS	
Katie Spak	
JALOB CROS	
HADLEY ROPPEN	
Lillian Chang	
SEVE ERIKMAN	
Kelley Carollo	
Ellen Shultz	
DANIEL HONG	
Ash Ulmoych	
JAMES CHABEI	