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COMMUNITY BOARD No. 2, MANHATTAN

3 WASHINGTON SQUARE VILLAGE
NEW YORK, NY 10012-1899

www.cb2manhattan.org

P: 212-979-2272 F: 212-254-5102 E: 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, including the date, and return to the Community Board 2 office by email to arrive **no later than the month's due date** which can be found on CB2 Manhattan's website (<https://cbmanhattan.cityofnewyork.us/cb2/resources/sla-questionnaire/>). When meetings return to in person, please also provide an additional 5 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 scheduled 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 (including Beer and Wine) within 500 ft. of this location.
2. If the license being applied for is subject to the 500 ft. rule, please provide a copy of the public interest statement that will be submitted to the SLA.
3. Floor plans of the premise, clearly indicating the location of all entrances and exits, windows, bars, tables and chairs, patron and employee bathroom(s) and kitchen layout to be licensed. Please include seat and table counts on the plans for each area. **If outdoor seating of any kind** is included in the application please download and complete **CB2 SLA's Addendum for Outdoor Seating**. For any multi-floor, multi-room or hotel applications, please provide detailed plans for each floor and/or separate areas to be included in the licensed premises that are clearly labeled.
4. Proposed menu with general price ranges, if applicable.
5. Certificate of Occupancy or Letter of No Objection for the premises showing that the proposed use is permitted, including specific use of all outdoor areas within the property line.
6. If unable to show the proposed use is permitted, including for outdoor areas within the property line, please provide a detailed explanation for how the proposed use sought will be permitted and please provide any plans filed or to be filed with the Buildings Department.
7. Letter of Understanding or Letter of Intent from the Landlord.

8. Provide proof of community outreach to area block associations and immediately impacted residents in the building and surrounding area to notify them of your pending application and Community Board meeting information. Copies of any mailings to, and signatures or letters from Residential Tenants at location and from surrounding buildings may be submitted with home address and contact information. (i.e. a letter from the neighborhood block association or petition in support with home address and contact information.)
9. A copy of your NYS Liquor Authority application as it will be submitted to the SLA (excluding financial information).
10. If this is for a **Corporate Change**, please provide the **Current Approved Corporate Set-Up and the Proposed Corporate Set-Up** along with existing executed stipulations with CB2 if applicable.
11. If this is for any type of **Alteration Application**, please provide detailed information regarding the current situation and the proposed changes outlined as an addendum. If adding or subtracting space, please provide current and proposed diagrams.
12. If this application is for a **Change in Method of Operation**, please provide the current method of operation and the proposed changes in method of operation as an addendum.

Meeting Date: _____

APPLICANT INFORMATION:

Name of applicant(s): SALTWATERNYC2 LLC

Trade name (DBA): SALTWATER COFFEE

Premises address: 126 WAVERLY PL, NEW YORK, NY 10011

Cross Streets and other addresses used for building/premise:
6TH AVENUE & WAVERLY PL

CONTACT INFORMATION:

Principal(s) Name(s): SUHAIL MANDANI, SIDDHARTH CHITNIS

Office or Home Address: _____

City, State, Zip: NEW YORK, NY 10003

Telephone #: _____ email : _____

Landlord Name / Contact: PHILIPS INTERNATIONAL

Landlord's Telephone and Fax: _____

NAMES OF ALL PRINCIPAL(s):	NAMES / LOCATIONS OF PAST / CURRENT LICENSES HELD
SUHAIL MANDANI	N/A
SIDDHARTH CHITNIS	N/A

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

WE ARE A FAMILY RUN COFFEE SHOP THAT PRIDES ITSELF ON BEING A NEIGHBORHOOD ESTABLISHMENT THAT CARES ABOUT ITS REGULARS, OFTENTIMES KNOWING THEIR ORDER RIGHT WHEN THEY STEP THROUGH THE DOOR. AS A MOM & POP, AND BORN & BRED NEW YORKERS, WE STILL STRIVE FOR EXCELLENCE AND LOOK TO EXPAND OUR OFFERINGS WITH THE GROWING NEEDS OF OUR CUSTOMERS. TO THAT EFFECT, WE'D LIKE TO INCLUDE A SMALL BEER AND WINE PROGRAM, FOCUSING ON LOCAL NEW YORK STATE CRAFT BEERS, AND A CURATED SELECTION OF WINE, HIGHLIGHTING LOCAL, NATURAL, BIODYNAMIC, AS WELL AS OLD WORLD PRODUCERS. FEATURED IN THE BEST AMERICAN FOOD WRITING LAST YEAR, & A TRAINED BARTENDER AND MIXOLOGIST, OUR GM AND OWNER, WILL HAVE A HANDS ON APPROACH TO PROVIDING AWARD WINNING SELECTIONS IN BEER AND WINE (ALONG WITH LIGHT FARE AND BAR SNACKS), WHILE ALSO BEING RESPECTFUL OF COMMUNITY AND NEIGHBORHOOD TASTES, NOISE, SAFETY, CLEANLINESS, AND HOURS.

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.)

WE CURRENTLY RUN A COFFEE SHOP AND ARE ADDING ON A BEER & WINE COMPONENT. OWNERSHIP, OCCUPANCY, AND SPACE WILL STAY THE SAME. OPERATIONALLY, WE ARE CURRENTLY OPEN FROM 7 AM - 5 PM ON WEEKDAYS AND 8 AM - 6 PM ON WEEKENDS. WE WILL LOOK TO EXTEND HOURS FROM 7 AM - 12 AM (BUT WILL LIKELY CLOSE EARLIER ON WEEKDAYS, PROBABLY 10 PM, OR EVEN EARLIER).

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

COFFEE SHOP/CAFE

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

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

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: 5 Year Built : 1986

Describe neighboring buildings:

SIMILAR STYLE BROWNSTONE/BRICK BUILDINGS WITH SIMILAR FLOOR LEVELS

Zoning Designation: C2-5, R7-2

Zoning Overlay or Special Designation (applicable) _____

Block and Lot Number: BLOCK 552 / LOT 7501

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? CAFE

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? 19

If yes, what is the use group for the premises? CAFE

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? 750 SQ FT

If more than one floor, please specify square footage by floors: ONLY ONE FLOOR

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? N/A

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

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

OVERALL SEATING INFORMATION:

Total number of tables? 3 Total table seats? 19

Total number of bars? 0 Total bar seats? 0

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

Total OVERALL number of seats in Premises : 19

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? no yes, describe : JUST 1 COUNTER WHERE PEOPLE ORDER AT THE REGISTER

For Alterations and Upgrades:

Please describe all current and existing bars / bar seats and specific changes: _____

NO 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:
8 AM to 12 AM 7 AM to 12 AM 7 AM to 12 AM 7 AM to 12 AM 7 AM to 12 AM 7 AM to 12 AM 8 AM to 12 AM

Will the business employ a manager? no yes, name / experience if known : _____
SUHAIL MANDANI (GM, OWNER, LICENSED BARTENDER & MIXOLOGIST, BEST AMERICAN FOOD WRITING ALUM)

Will there be security personnel? no yes (if yes, what nights and how many?) BUT OPEN TO IT, IF NEEDED

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? _____

Please describe your sound system and sound proofing: PLAYING MINIMAL BACKGROUND JAZZ AND INSTRUMENTAL MUSIC FROM A SMALL PORTABLE BOSE SPEAKER, ALREADY SOUNDPROOFED. ALREADY USING AT COFFEE SHOP.

Will you be permitting: promoted events scheduled performances outside promoters

any events at which a cover fee is charged? private parties NONE

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) _____

NO, THIS WILL BE A SMALL OPERATION FOR OUR EXISTING CUSTOMER BASE AT THE COFFEE SHOP

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: Michael Oppenheimer Phone: _____

Address: _____ Will address complaints immediately.

Email : _____

Application submitted on
behalf of the applicant by:



Signature

Print or Type Name Suhail Mandani

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



WINE



WHITE

SPARKLING

\$ 14

if Princess Peach rented in SoHo

STILL

\$ 14

if TriBeCa could talk

SKIN CONTACT

ORANGE

\$ 15

Keira Knightley likes it

PINK

\$ 15

if Williamsburg knew better

RED

RED I

\$ 16

Pedro Pascal's cologne

RED II

\$ 16

in Batman's utility belt





FOOD+



DIGESTIF

ESPRESSO \$ 5

comedians in bars getting saucy

KOMBUCHA \$ 7

for the culture

VERMOUTH \$ 15

Clooney's nightcap

FOOD

POTATO CHIPS \$ 5

nutrition rich

BAR MIX \$ 5

nuts.com

STRAPAZZATE PANINI \$ 10

roasted prosciutto, mozzarella on ciabatta

AVOCADO TOAST \$ 12

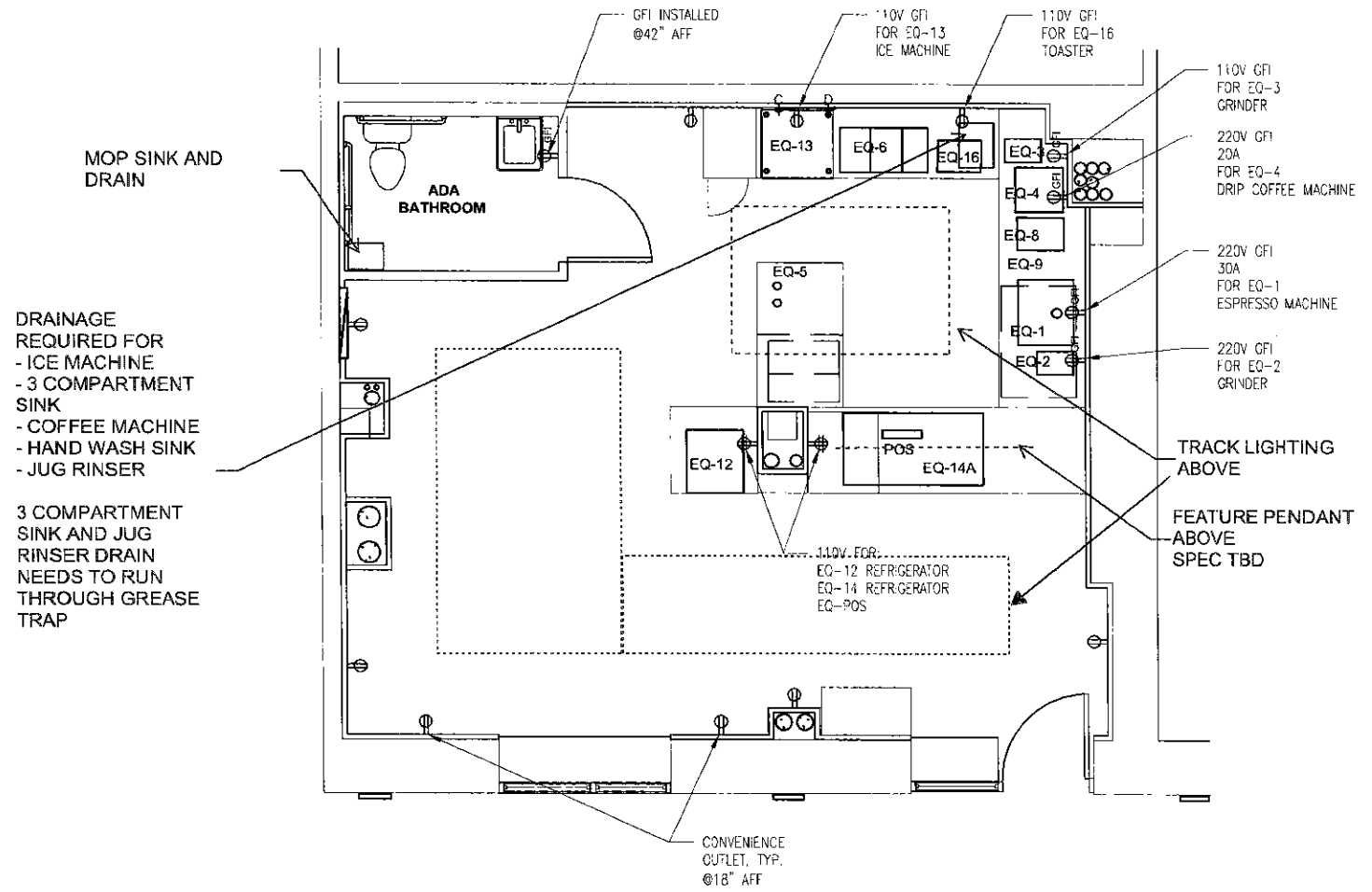
micro greens on 7-grain bread

BOSCAIOLA PIZZETTA \$ 16

porcini mushrooms, mozzarella, pecorino, pesto



D:\PROP30X\1901 - SALT WATER COFFEE\01-DRAWINGS\01-PLAN\190416_POWER PLUMBING FOR LL\190416_PTD PLUMBING PLANS

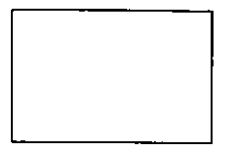


10 PROPOSED POWER LOCATIONS
SCALE: 1/4" = 1'-0"

SALT

914.552.5724
www.saltdesign.co
1481 5th Avenue, 10D
New York, NY 10035

KEY PLAN



SALTWATER CAFE
128-130 WAVERLY PLACE
NEW YORK, NY 10011

PROJECT NO: 1901
SCALE: AS NOTED

LANDLORD ELECTRICAL
COORDINATION SKETCH

SK01.00

NOT FOR CONSTRUCTION

PAGE: 01 OF XX