

**HELBRAUN || LEVEY**

**W4TH BUILDING SOCIETY, LLC  
239 WEST 4TH STREET  
NEW YORK, NY 10014**

**MANHATTAN COMMUNITY BOARD 2**

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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)

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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 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)

**APPLICANT INFORMATION:**

Name of applicant(s):  
W4TH BUILDING SOCIETY, LLC

Trade name (DBA):  
PENDING

Premises address:  
239 WEST 4TH STREET, NEW YORK, NY 10014

Cross Streets and other addresses used for building/premise:  
WEST 10TH STREET & CHARLES STREET

**CONTACT INFORMATION:**

Principal(s) Name(s):  
ANDREW DETE, CHRISTA ALEXANDER, BASILE AL MILEIK

Office or Home Address: 239 WEST 4TH STREET

City, State, Zip: NEW YORK, NY 10014

Telephone #: [REDACTED]

Landlord Name / Contact:  
239 WEST 4TH STREET LLC

Landlord's Telephone and Fax: \_\_\_\_\_

NAMES OF ALL PRINCIPAL(s):	NAMES / LOCATIONS OF PAST / CURRENT LICENSES HELD
ANDREW DETE	ST JARDIM - 183 WEST 10TH STREET, NEW YORK, NY 10014
CHRISTA ALEXANDER	N/A
BASILE AL MILEIK	N/A

Briefly describe the proposed operation (i.e. "We are a family restaurant that will focus on..."):  
MODERN NEIGHBORHOOD RESTAURANT WITH AN ELEVATED DINNER MENU SERVING SEASONAL, INGREDIENT-DRIVEN DISHES.

**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.)

N/A

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

SPACE HAS BEEN VACANT FOR A NUMBER OF YEARS, BUT IT WAS PREVIOUSLY A RESTAURANT FOR OVER A CENTURY.

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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:

FEDORA (1917 - 2020)

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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: 3 Year Built : 1839

Describe neighboring buildings:

MIXED-USE

Zoning Designation: R6

Zoning Overlay or Special Designation (applicable) C2-6

Block and Lot Number: 611 / 4

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 : PENDING

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? 55

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? 74

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

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

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: WE WILL BE REMOVING THE AWNING AND CLEANING UP THE FRONTAGE, BUT WE WILL BE PRESERVING THE HISTORIC "FEDORA" NEON SIGN.

**INTERIOR OF PREMISES:**

What is the total licensed square footage of the premises? 1,600 SQ. FT.

If more than one floor, please specify square footage by floors: GROUND FLOOR: 1,000 SQ. FT.; BASEMENT: 600 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? SIDEWALK HATCH & KITCHEN STAIRCASE

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

Is there access to other parts of the building?  no  yes, explain: N/A

**OVERALL SEATING INFORMATION:**

Total number of tables? 11 Total table seats? 30

Total number of bars? 1 Total bar seats? 15

Total number of "other" seats? 0 please explain : N/A

Total OVERALL number of seats in Premises : 45

**BARS:**

How many \* stand-up bars / bar seats are being applied for on the premises? Bars 1 Seats 15

How many service bars are being applied for on the premises? 0

Any food counters?  no  yes, describe : N/A

***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: \_\_\_\_\_

What are the Hours of Operation?

Sunday: Monday: Tuesday: Wednesday: Thursday: Friday: Saturday:  
9AM to 2AM 9AM to 2AM 9AM to 2AM 9AM to 2AM 9AM to 2AM 9AM to 2AM 9AM to 2AM

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

Will there be security personnel?  no  yes( if yes, what nights and how many?) N/A  
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? ) N/A

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? NO

Please describe your sound system and sound proofing: \_\_\_\_\_  
4 SMALL SPEAKERS (ONE MOUNTED IN EACH CORNER)

Will you be permitting:  promoted events  scheduled performances  outside promoters  
 any events at which a cover fee is charged?  private parties (ON OCCASSION)

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 1/2 " x 11").***

Indicate the distance in feet from the proposed premise:

Name of School / Church: (N/A)

Address: (N/A) Distance: (N/A)

Name of School / Church: (N/A)

Address: (N/A) Distance: (N/A)

Name of School / Church: (N/A)

Address: (N/A) Distance: (N/A)

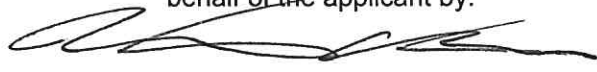
Please provide contact information for Residents / Community Board and confirm that if complaints are made you will address it immediately.

Contact Person: CHRISTA ALEXANDER Phone: [REDACTED]

Address: [REDACTED]

Email : [REDACTED]

Application submitted on  
behalf of the applicant by:



Signature

Print or Type Name MATTHEW COLTON

Title REPRESENTATIVE

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



#### **Regarding Plan to Manage Cleanliness and Foot Traffic on Sidewalk:**

- No smoking will be allowed in front of premise
- No lines will be formed outside
- Owner/manager will ensure that deliveries occur quickly and efficiently to prevent congestion. Boxes are not left sitting at the curb, brought straight in to premise.
- If trash is not picked up in a timely manner, staff will bring trash bags/debris back into premise until pickup can occur.
- Will use garbage bags that will not allow liquids to spill out onto the sidewalk.
- Sidewalk space will be swept and kept clean of food waste and debris throughout the shift and upon closing.
- The business is a short walk from multiple subway and bus routes and the majority of their guests arrive on foot, public transportation or taxi.

#### **Regarding Plan to Manage Vehicular Traffic**

- The applicant does not expect that this will be an issue given the character of their proposed establishment and the small size of it. To ensure that this does not become an issue, all staff will be instructed to monitor the sidewalk and curb area to dispel groupings of people and keep the sidewalk clear. These applicants have an existing restaurant in New York City that is similarly situated. They have proven effective at maintaining order outside the establishment their and would employ the same techniques here.

## DINNER MENU

east coast oysters (6) (12) M/P

maine mussels calabrian chili butter, pink peppercorn 15

cape code scallop leche de tigre, yuzu, daikon 20

yellowfin tuna yuzu kosho, tonnato, smoked dulce 22

braised leek toast whipped ricotta, cantabrian anchovies 16

chicories alla romana camino vinegar, parmigiano reggiano 18

celery salad walnuts, medjool dates, piave vecchio 19

romaine hearts green goddess, fried croutons, radishes 19

squid & scallion skewers 14

grilled sun shrimp calabrian chili butter, kohlrabi, scallions 24

manila clams fennel, saffron & pastis broth 26

hand cut tagliatelle gold bar squash, squash blossoms, fennel pollen 24

house-made pasta of the day M/P

tilefish with leeks, mussels & butter beans 38

whole black bass with green olive salsa verde 65 (for two)

cumin crusted pork chop salt baked new potatoes, old bay butter 39

sirloin steak & chips with green peppercorns 45

warm house bread cultured butter 8

crispy potatoes bacalao mantecato, chives, curry 15

## DESSERT

dark chocolate date caramel, sea salt 10

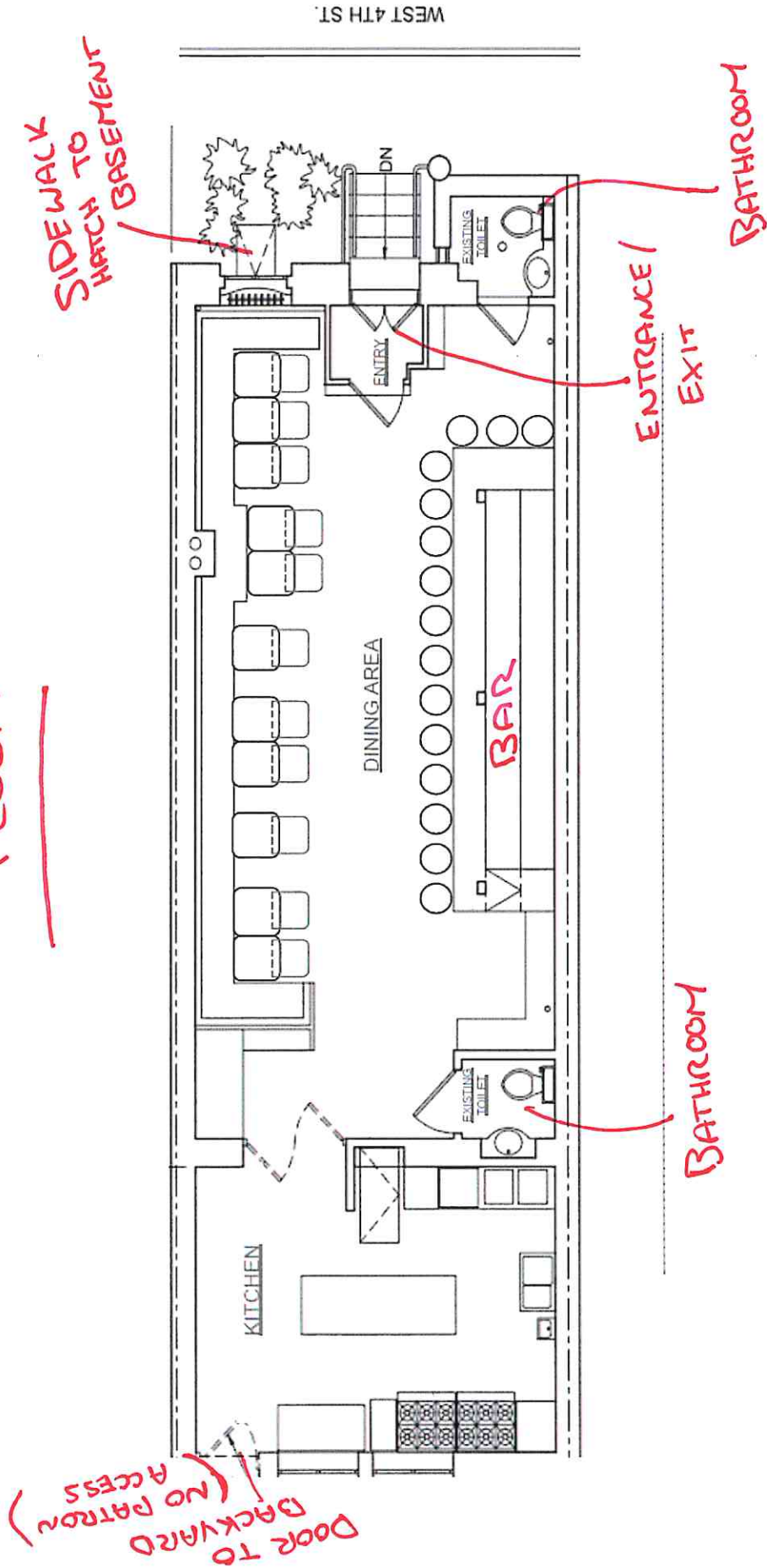
sourdough panna cotta sour cherry, coffee granita 10

sticky toffee pudding crème fraîche 11

black sesame cake banana caramel, coconut 10

apple crumble, vanilla ice cream 9

GROUND FLOOR



WEST 4TH ST.

SIDEWALK HATCH TO BASEMENT

DN

ENTRY

EXISTING TOILET

DINING AREA

BAR

EXISTING TOILET

ENTRANCE / EXIT

BATHROOM

BATHROOM

DOOR TO BACKYARD (NO PATRON ACCESS)

BASEMENT  
(NO PATRON ACCESS)

STAIRS TO  
FRONT  
SIDEWALK

