

Meeting Date: \_\_\_\_\_

**APPLICANT INFORMATION:**

Name of applicant(s): TAPESTRY MANAGEMENT LLC

Trade name (DBA): Semra

Premises address: 60 GREENWICH AVE

Cross Streets and other addresses used for building/premise:  
PERRY / W 11TH

**CONTACT INFORMATION:**

Principal(s) Name(s): DEBABRATA RONI MAZUMDAR

Office or Home Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Telephone #: \_\_\_\_\_

Landlord Name / Contact: MDK PROPERTY MANAGEMENT LLC

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

**NAMES OF ALL PRINCIPAL(s):**      **NAMES / LOCATIONS OF PAST / CURRENT LICENSES HELD**

CHINTAN PANDYA

DEBABRATA RONI MAZUMDAR

THOMSON HOSPITALITY LLC 31 THOMSON AVE LIC NYC

ESSEX HOSPITALITY LLC 113 DELANCEY ST.

MASALAWALA PS LLC 365 5TH AVE BKNY

EXP 5/31/25

EXP 1/31/25

EXP 8/31/26

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

NEIGHBORHOOD RESTAURANT SERVING AUTHENTIC REGIONAL  
SOUTH INDIAN CUISINE.

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: CORPORATE CHANGES, SEE ATTACHED

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

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

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:

TAPESTRY MANAGEMENT LLC

[REDACTED]

674  
3-31-26

Have any other licenses under the ABC Law been in effect in the last 10 years at this location?

☒ yes ☐ no

SINCE 3/2014

If yes, please list DBA names and dates of operation:

GO GREENWICH LLC

[REDACTED]

4/2013 -  
4/2015

The owners of Tapestry Management LLC are transferring 100% of their interest to UAF Investor Group LLC.

Tapestry Management LLC is currently owned as follows:

Debabrata Roni Mazumdar holds 86% ownership.

The remaining 14% is owned collectively by four other members.

Following the transfer:

- Debabrata Roni Mazumdar will retain a 34.79% equity stake in UAF Investor Group LLC.
- Chintan Pandya will hold a 27.18% equity stake in UAF Investor Group LLC.
- There will be 24 additional members, each holding less than 10% equity in UAF Investor Group LLC.

## 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: C1-6

Zoning Overlay or Special Designation (applicable) GREENWICH VILLAGE HISTORIC DISTRICT

Block and Lot Number: 606 / 25

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 CHANGE

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? RESTAURANT

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: LNO

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? 2720 SQ. FT.

If more than one floor, please specify square footage by floors: GROUND FLOOR 1360  
BASEMENT 1360

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? INTERNAL STAIRCASE

How many entrances are there? 1 How many exits? 1 How many bathrooms? 3

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

**OVERALL SEATING INFORMATION:**

Total number of tables? 18 Total table seats? 60

Total number of bars? 1 Total bar seats? 10

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

Total OVERALL number of seats in Premises: 70

**BARS:**

How many \*stand-up bars / bar seats are being applied for on the premises? Bars 1 Seats 12

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: \_\_\_\_\_

\* 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: 5<sup>PM</sup> to 10<sup>PM</sup> Tuesday: 5<sup>PM</sup> to 10<sup>PM</sup> Wednesday: 5<sup>PM</sup> to 10<sup>PM</sup> Thursday: 5<sup>PM</sup> to 10<sup>PM</sup> Friday: 5<sup>PM</sup> to 10<sup>PM</sup> Saturday: 5<sup>PM</sup> to 10<sup>PM</sup>

Will the business employ a manager? ☒ no ☐ yes, name / experience if known: \_\_\_\_\_

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 N/A

If yes, please describe: \_\_\_\_\_

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 EXISTING

IF YES, will you be using a professional sound engineer? N/A

Please describe your sound system and sound proofing: SMALL SPEAKER+ IPAD

Will you be permitting: NO promoted events NO scheduled performances NO outside promoters

NO any events at which a cover fee is charged? NO 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) \_\_\_\_\_

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: \_\_\_\_\_

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:

  
\_\_\_\_\_  
Signature

Print or Type Name


Michael Kelly

Title

REPRESENTATIVE

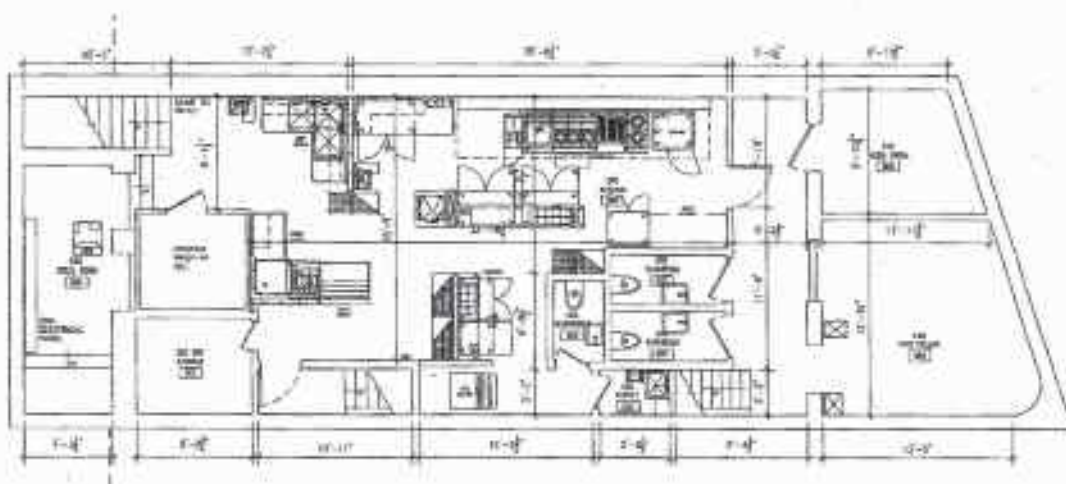
Thank you for your cooperation. Please return this questionnaire along with the other required documents as soon as you can. This will expedite your application and avoid any unnecessary delays. Use additional pages if necessary.



  
Community Board 2,  
Manhattan SLA Licensing Committee  
Donna Raftery, Co-Chair  
Robert Ely, Co-Chair



2 CELLAR FLOOR



# Seemaa

• SOUTHERN INDIAN •

<b>Mulakattiya Thaniyam</b> (v)   sprouted mung beans, coconut, smoked chili	11
<b>Paniyaram</b>   rice & lentil dumpling, asafoetida, paatti's chutney	16
<b>Uzhavar Santhal Poriyal</b> (v)   red & golden beets, butternut squash, mustard green	18
<b>Eral Thokku</b>   tiger prawn, green chili, fenugreek, curry leaves	25
<b>Annasi Pazham Scallop</b>   day-boat scallops, pineapple pachadi, jaggery	23
<b>Mangalore Huukosu</b> (v)   cauliflower, garlic, byadgi chili, coconut chutney	21
<b>Gunpowder Dosa</b> (vo)   rice & lentil crepe, potato masala, sambar	21
<b>Mattu Iraichi Sukka</b>   beef short rib, black cardamom, tellicherry peppers	27
<b>Muyal Pirattal</b>   wild rabbit leg, fennel, mace, kalpasi, marathi moggu ( <i>Limited</i> )	26
<b>Thinai Khichdi</b>   foxtail millet, taro root, pickled onion, appalam	33
<b>Palakkal Kofta</b> (vo, n)   green jackfruit, star anise, clove, cashews	38
<b>Kaikari Kurma</b> (v)   winter squash, carrots, raw banana, coconut milk	36
<b>Kozhi Allepey</b>   poussin (spring chicken), coriander, poppy seeds	39
<b>Meen Pollichathu</b>   banana leaf wrapped branzino, ginger, shallots	49
<b>Valiya Chemmeen Mollee</b>   lobster tail, mustard, turmeric, coconut milk	55
<b>Ghee Roast Lamb Chops</b>   superior farm lamb, vegetable pulao, salna	52
<b>Goanese Oxtail</b>   angus oxtail, green cardamom, cinnamon, cumin, cilantro	51
<b>Dindigul Biryani</b>   goat, seeraga samba rice, garam masala, raita	42
<b>Kanyakumari Nandu Masala</b> (For Two)   160	
dungeness crab, parotta, coconut rice	
~Limited availability~	
*Pre-Order Requested*	
<b>Kal Dosa</b>	6
<b>Parotta</b>	6
<b>Ponni Rice</b>	5
<b>Coconut Rice</b>	7

v = vegan; vo = vegan opt; n = nuts  
 20% gratuity for parties of 5 or more guests  
 Please inform server of any allergies  
 90 min time limit per seating requested

Consuming raw or undercooked meats, seafood, shellfish,  
 or eggs may increase your risk of food borne illness.