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COMMUNITY BOARD NO. 2, MANHATTAN

3 WASHINGTON SQUARE VILLAGE
NEW YORK, NY 10012-1899

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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, 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: APRIL 1 OR APRIL 3, 2025

APPLICANT INFORMATION:

Name of applicant(s):

TEMIANI LLC

Trade name (DBA):

CHAMPION PIZZA

Premises address:

2 WEST 14TH ST

Cross Streets and other addresses used for building/premise:

5TH AVE AND WEST 14TH ST

CONTACT INFORMATION:

Principal(s) Name(s):

LUCA A. AZER AND BOULOS SAMUEL

Office or Home Address:

[REDACTED]

City, State, Zip:

[REDACTED]

Telephone #:

[REDACTED]

email :

[REDACTED]

Landlord Name / Contact:

AMES ASSOCIATE -

Landlord's Telephone and Fax:

[REDACTED]

NAMES OF ALL PRINCIPAL(s):

NAMES / LOCATIONS OF PAST / CURRENT LICENSES HELD

NONE

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

My business has been in operation since 2020. I recently have the Restaurant Wine since 03/2024. As of this date, I never received any 311 complaints for high music level or incidents with the customers. I heard some comments from the neighborhood association on west 12th st and I plan to address the concerns they have about the block.

I was intending to remodel the interior to be more a restaurant space with reservations in certain space due to limited space. The day time will be more casual and walk-in.

Proposed change of operation would be to add DJ, karaoke from thursday to Saturdays only with security guards. No outdoor seating now.

I intend to remove the name of champion pizza and name the dba as restaurant.

I am always collaborative with authorities and neighborhood to minimize incidents and negative impact.

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.)

Adding DJ, Karaoke only

No change of ownership, physical appearance of the restaurant and occupancy, except Bar Service Hours
to end by 2AM or 4AM if possible from Thursday - Saturday

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

It has been a pizzeria for many 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: _____

MANSIONS CATERING INC. SERIAL #1100267 EXP. 12/31/2023

TEMIANI LLC , ID # 0240-24-105390 , EXP 02/28/2026

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: 17 Year Built : 1908

Describe neighboring buildings:
MIXED USE BLDGS AND COMMERCIAL

Zoning Designation: C6-4M

Zoning Overlay or Special Designation (applicable) NONE

Block and Lot Number: 577 / 39

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? 30

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? 40

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

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? 1100 Sf

If more than one floor, please specify square footage by floors: approx 1100 SF on 1st fl and Cellar

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 IN THE KITCHEN TO THE BASEMENT

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? 10 Total table seats? 20

Total number of bars? 1 Total bar seats? 0

Total number of "other" seats? _____ please explain : _____

Total OVERALL number of seats in Premises : 20

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 : PIZZA DISPLAY COUNTER

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: Tuesday: Wednesday: Thursday: Friday: Saturday:
10am to 4am 10am to 4am 10am to 4am 10am to 4am 10am to 4am 10am to 4am 10am to 4am

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?) 1 (4pm - closing daily)
Do you have or plan to install French doors, accordion doors or windows that open? no ___ yes

If yes, please describe : _____

Will you have TV's ? ___ no yes (how many?) 1

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 *****The building is already sound proofed*****

IF YES, will you be using a professional sound engineer? _____

Please describe your sound system and sound proofing: The buildings are extremely thick and beneath
they have sound insulation barriers.

Will you be permitting: ___ promoted events ___ scheduled performances ___ outside promoters

___ any events at which a cover fee is charged? ___ private parties (NO)

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 need at the moment

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: LUCA A. AZER Phone: _____

Address: _____

Email : _____

Application submitted on
behalf of the applicant by:



Signature

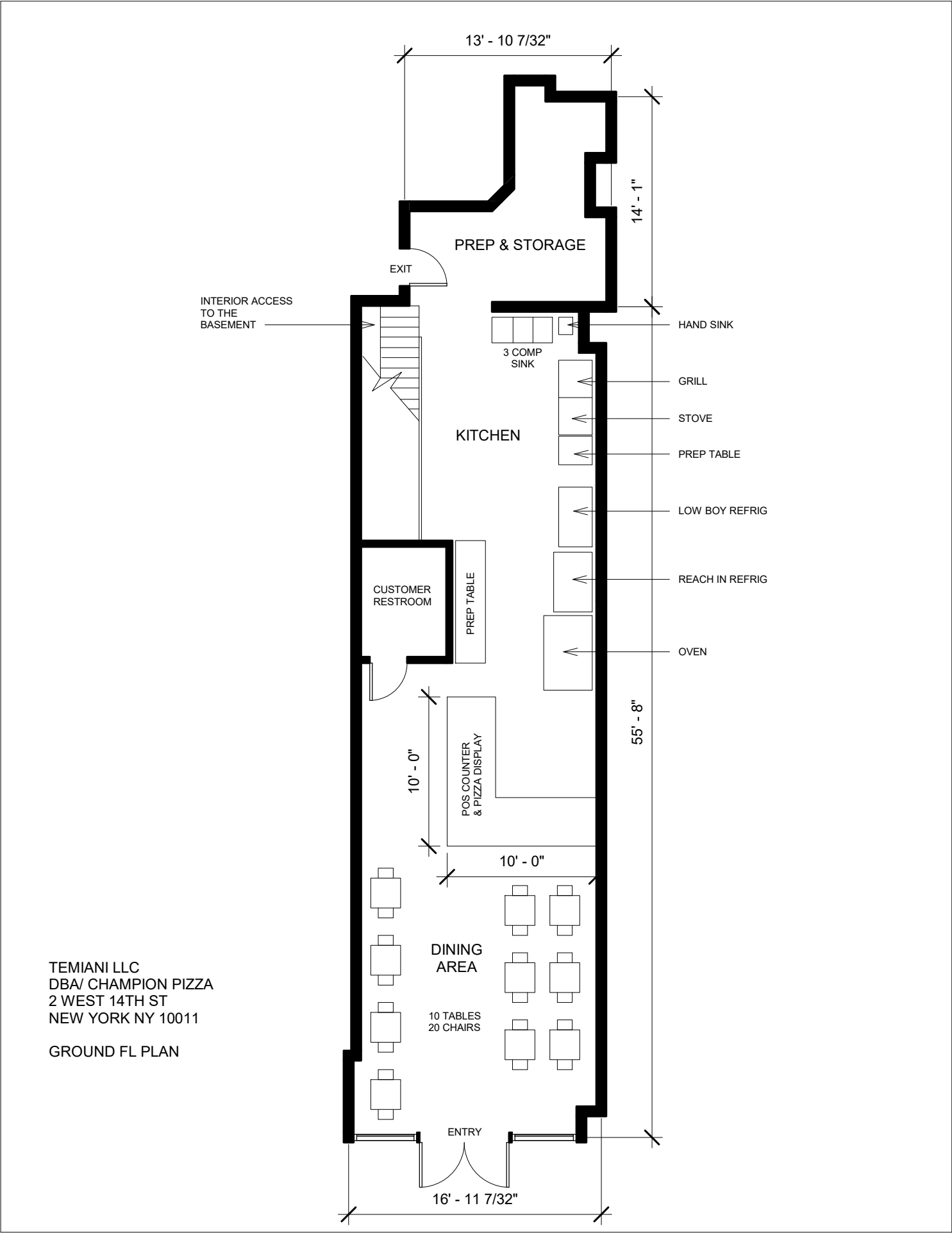
Print or Type Name SANDRA HUNG FONG

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



TEMIANI LLC
DBA/ CHAMPION PIZZA
2 WEST 14TH ST
NEW YORK NY 10011

GROUND FL PLAN

13' - 10 7/32"

14' - 1"

PREP & STORAGE

EXIT

INTERIOR ACCESS
TO THE
BASEMENT

HAND SINK

3 COMP
SINK

GRILL

STOVE

KITCHEN

PREP TABLE

LOW BOY REFRIG

CUSTOMER
RESTROOM

PREP TABLE

REACH IN REFRIG

OVEN

55' - 8"

10' - 0"

POS COUNTER
& PIZZA DISPLAY

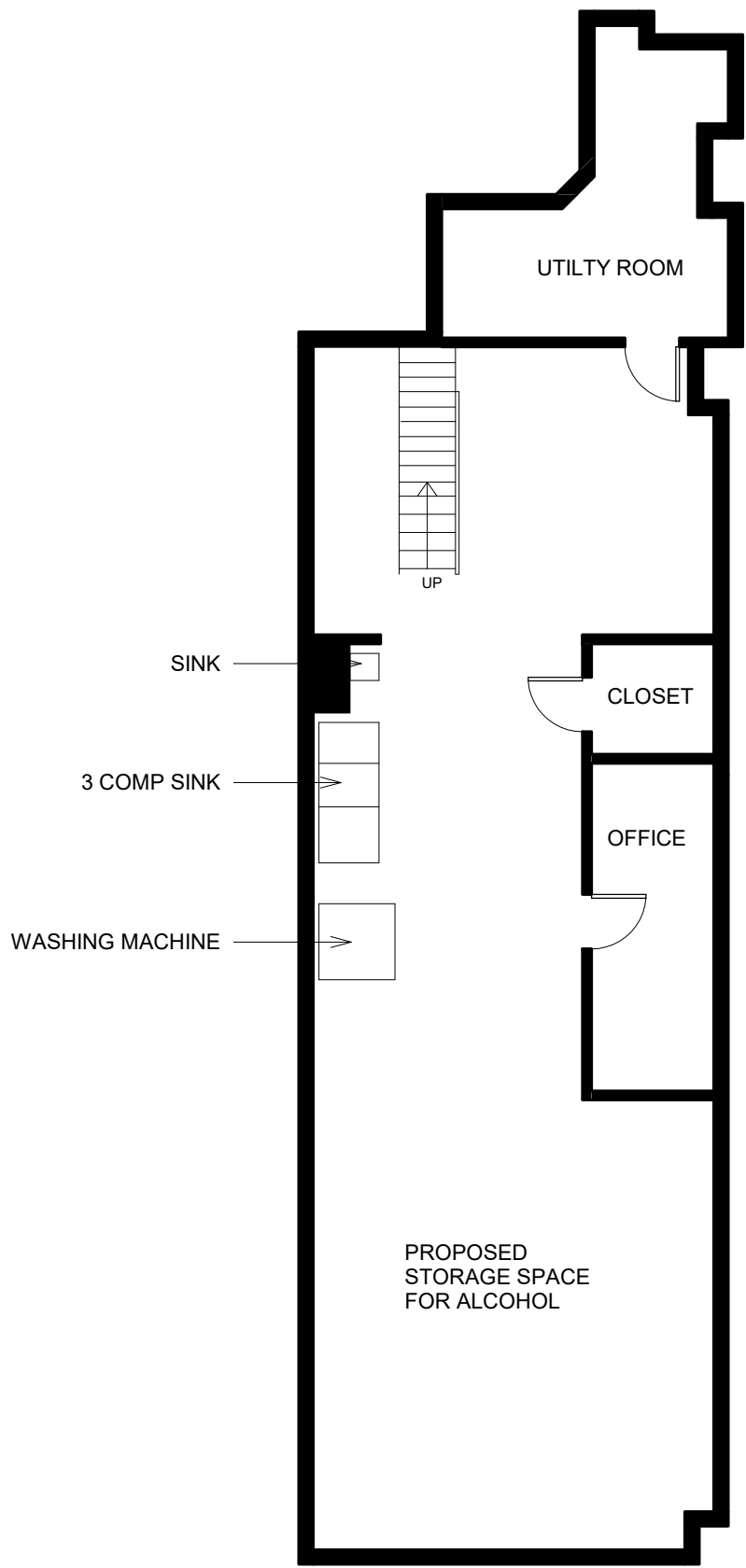
10' - 0"

DINING
AREA

10 TABLES
20 CHAIRS

ENTRY

16' - 11 7/32"



TEMIANI LLC
DBA/ CHAMPION PIZZA
2 WEST 14TH ST
NEW YORK NY 10011
BASEMENT PLAN

AWARD WINNING PIZZA

Choices of Round or Square Pie

PLAIN CHEESE PIZZA

Mozzarella & Homemade
Marinara Sauce

Sm / 12.99
Lg / 17.99



CHAMPION MARGHERITA

Homemade mozzarella,
Our Secret Sauce, Basil,
Pecorino Romano, Buffalo
Mozzarella & Parmigiano

Sm / 16.99
Lg / 24.99



BUFFALO CHICKEN

Buffalo Chicken,
Ranch & Mozzarella

Sm / 16.99
Lg / 24.99



MAC AND CHEESE

Sm / 16.99
Lg / 24.99



VEGGIE

Black Olive, Red Pepper,
Mushroom, Onion,
Parsley, Mozzarella &
Homemade Marinara

Sm / 16.99
Lg / 24.99



LASAGNA

Sausage, Ricotta,
Homemade
Marinara Sauce &
Fresh Parsley

Sm / 16.99
Lg / 24.99



MARGHERITA

Fresh Mozzarella
and basil

Sm / 16.99
Lg / 24.99



CHICKEN BACON RANCH

Chicken, Bacon, Ranch,
Mozzarella & Parsley
(No Marinara Sauce)

Sm / 16.99
Lg / 24.99



VEGAN

Black Olive, Red Pepper,
Mushroom, Onion,
Parsley & Homemade
Marinara Sauce
(No Cheese)

Sm / 16.99
Lg / 24.99



WHITE PESTO

Mozzarella, Ricotta,
Parmigiano Reggiano &
Pesto Sauce
(No Marinara Sauce)

Sm / 16.99
Lg / 24.99



AMERICAN

Mozzarella, Homemade
Marinara Sauce &
Pepperoni

Sm / 16.99
Lg / 24.99



MEAT LOVER

Pepperoni, Bacon, Sausage,
Mozzarella & Homemade
Marinara Sauce

Sm / 16.99
Lg / 24.99



ASK FOR GLUTEN FREE

ASK FOR GLUTEN FREE

ASK FOR GLUTEN FREE

ASK FOR GLUTEN FREE

ASK FOR GLUTEN FREE

EXTRA TOPPING : SMALL \$2 each LARGE \$4 each

CHEESE / PEPPERONI / SAUSAGE / BACON / CHICKEN /
MUSHROOM / ROASTED PEPPERS / ARTICHOKE /
BLACK OLIVE / PINEAPPLE / HAM / ONION / BASIL

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All prices are subject to change without notice.

FOOD ALLERGY NOTICE

Please be advised that food prepared here may contain these ingredients: milk, eggs, wheat, soybean, peanuts, tree nuts, fish and shellfish.

CALZONES/ROLLS/HERO

CHICKEN PARMIGIANA
MEATBALL PARMIGIANA
EGGPLANT PARMIGIANA
SAUSAGE & PEPPERS
SAUSAGE PARMIGIANA

\$7.99



GARLIC KNOTS

4 PCS 1.50
6 PCS 2.00

WINGS

5 PCS 6.00
10 PCS 10.00
15 PCS 15.00
20 PCS 19.00

PASTA

ZITI 8.99
PENNE VODKA 8.99
SPAGHETTI 8.99

ALFREDO
CARBONARA

8.99
10.99

BEVERAGES

WATER 1.50
CAN SODA 1.50
20oz BOTTLE SODA/SNAPPLE 2.25

Prices for adding additional items.
Bacon add \$3. Chicken add \$3. Meatball add \$3

APPLICATION FOR COMPANY CHARGE ACCOUNT

Name of Firm/Organization: _____

D/B/A: _____

Address + Room: _____

Accounts Payable Dept. Phone: _____

Person Authorized by Pay Bills: _____

Bank: _____

Name of Bank Officers: _____

Phone: _____

Officer's Signature (President): _____

Persons Authorized to Charge: _____

Name (Print + Signature): _____

Name (Print + Signature): _____

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New York, NY 10011

TEL : 212-898-9898

ASK FOR CORPORATE DISCOUNT

FREE DELIVERY
(minimum \$10)

DELIVERY HOURS

MON - WED: 10AM - 1AM

THURS - SAT: 10AM - 2AM

SUN: 10AM - 10PM

AWARD WINNING PIZZA

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CHAMPION
Pizza

MADE IN NEW YORK WITH LOVE



ORGANIC SAUCE

FOR

HEALTHIER CHOICES

WE USE ORGANIC CHAMPION BRAND TOMATO SAUCE
THAT IS CERTIFIED BY USDA AT ALL OUR
LOCATIONS. ENJOY THE HEALTHIER PIZZA!!



