

**Meeting Date:** 02/21/2025

**APPLICANT INFORMATION:**

Name of applicant(s): Host on Howard LLC

Trade name (DBA): TBD

Premises address: 21 Howard Street, Ground Floor, New York, NY 10013

Cross Streets and other addresses used for building/premise:  
Lafayette and Crosby Streets

**CONTACT INFORMATION:**

Principal(s) Name(s): Adam Farmerie

Office or Home Address: [REDACTED]

City, State, Zip: New York, NY 10013

Telephone #: [REDACTED] email : [REDACTED]

Landlord Name / Contact: Phil Chong Jr

Landlord's Telephone and Fax: [REDACTED]

| NAMES OF ALL PRINCIPAL(s): | NAMES / LOCATIONS OF PAST / CURRENT LICENSES HELD |
|----------------------------|---------------------------------------------------|
| <u>Adam Farmerie</u>       | <u>Saxon and Parole/Ghost Donkey-316 Bowery</u>   |
| <u></u>                    | <u>Genuine Superette - 191 Grand Street</u>       |
| <u></u>                    | <u>Public - 210 Elizabeth Street</u>              |

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

The premises operates as a Wholesale Fixture Showroom and Catering Event Space.

**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.)

The licensee currently holds a Catering Establishment Wine License and is seeking to upgrade to a  
Catering Establishment Liquor License

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

N/A

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: \_\_\_\_\_

Host on Howard LLC/License #6046119:

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: 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 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 LNO

If yes, what is the maximum occupancy for the premises? 75

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: \_\_\_\_\_)

## 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 ? 1

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

## OVERALL SEATING INFORMATION:

Total number of tables? 5 Total table seats? 30

Total number of bars? 1 Total bar seats? 7

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

Total OVERALL number of seats in Premises : \_\_\_\_\_

## BARs:

How many \*stand-up bars / bar seats are being applied for on the premises? Bars 1 Seats 7

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

Any food counters? X 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: X Showroom/Catering Event Space

What are the Hours of Operation?

Sunday: Monday: Tuesday: Wednesday: Thursday: Friday: Saturday:

12pm to 12am 12pmto12am 12pm to12am 12pm to12am 12pm to12am 12pm to12am 12pm to 12am

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

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 consists of wall-mounted speakers that guest can connect with thier iPhone. Sound proofing is a 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



## **Pesetsky & Bookman, PC**

Attorneys at Law

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New York, NY 10007

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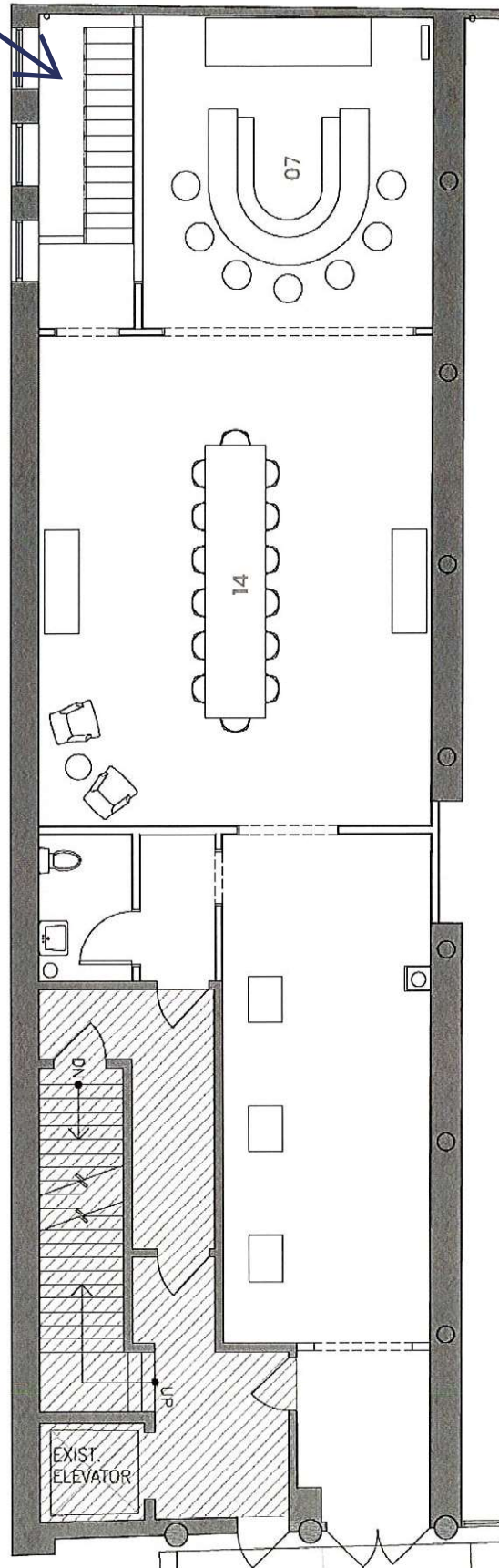
### **PUBLIC INTEREST STATEMENT**

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

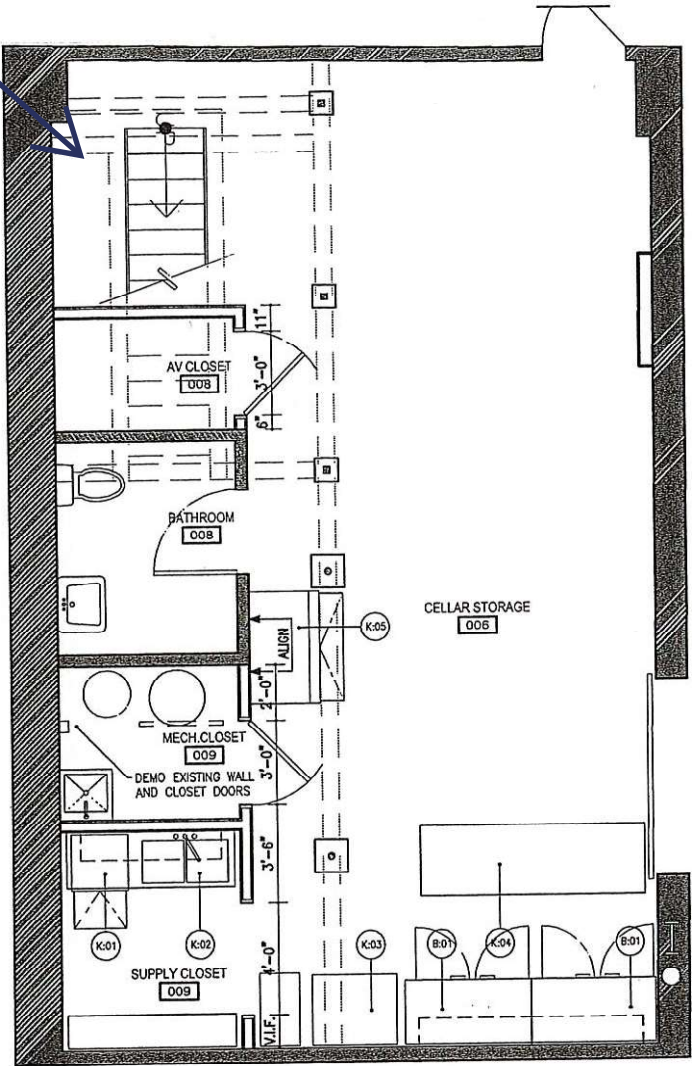
Host of Howard LLC  
21 Howard Street  
New York, NY 10013  
Sample Ground Floor Layout for an event



Entrance/Exit  
Door

Stairs up to ground floor

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



HOST on Howard

# 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

