

SAINT THEO'S

**340 BLEECKER LLC & THE GRAND TOUR COLLECTION LLC
D/B/A SAINT THEO'S
340-342 BLEECKER STREET
NEW YORK, NEW YORK 10014**

MANHATTAN COMMUNITY BOARD 2
MAY 2025
SLA LICENSING COMMITTEE

Questionnaire

- Floor Plan
- Menu
- Photographs
- Certificate of Occupancy
- Existing Liquor License Certificate & Stipulations

BERNSTEIN REDO & SAVITSKY P.C.
1177 AVENUE OF THE AMERICAS, 5TH FLOOR
NEW YORK, NEW YORK 10036



Valerie De La Rosa, Chair
Eugene Yoo, First Vice Chair
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Mark Diller, District Manager



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Brian Pape, Assistant Secretary

COMMUNITY BOARD No. 2, MANHATTAN

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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: _____

APPLICANT INFORMATION:

Name of applicant(s):

Trade name (DBA):

Premises address:

Cross Streets and other addresses used for building/premise:

CONTACT INFORMATION:

Principal(s) Name(s):

Office or Home Address: _____

City, State, Zip: _____

Telephone #: _____ email : _____

Landlord Name / Contact:

Landlord's Telephone and Fax: _____

NAMES OF ALL PRINCIPAL(s):

NAMES / LOCATIONS OF PAST / CURRENT LICENSES HELD

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

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 : Change in Method of Operation

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: _____

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: 6 Year Built : 1930

Describe neighboring buildings:

Zoning Designation: _____

Zoning Overlay or Special Designation (applicable) N/A

Block and Lot Number: 619 / 26

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 N/A no, please explain : N/A - No Exterior Changes

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? 136

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? 144

If yes, what is the use group for the premises? UG-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: N/A

INTERIOR OF PREMISES:

What is the total licensed square footage of the premises? 3,500 sf

If more than one floor, please specify square footage by floors: Ground floor - 2,500 sf, Basement (BOH) 1,000 sf

If there is a sidewalk café, rear yard, rooftop, or outside space, what is the square footage of the area?

Sidewalk cafe is 112.5 square feet, roadway seating is 300 square feet.

If more than one floor, what is the access between floors? Back of house stairs

How many entrances are there? 1 How many exits? 3 How many bathrooms? 2

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

OVERALL SEATING INFORMATION:

Total number of tables? 28 Total table seats? 94

Total number of bars? 1 Total bar seats? 14 *Sidewalk cafe (16 seats) and roadway (44 seats) seating pending.

Total number of "other" seats? 0* please explain: _____

Total OVERALL number of seats in Premises : 108

BARs:

How many *stand-up bars / bar seats are being applied for on the premises? Bars 1 Seats 14

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: 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:

___ to ___ ___ to ___ ___ to ___ ___ to ___ ___ to ___ ___ to ___ ___ to ___

Will the business employ a manager? ___ no yes, name / experience if known : Michael Welch / 35 years

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 : Operable windows at premises.

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)

*THIS APPLICATION IS TO ADD DJ.

Do you have or plan to install soundproofing? ___ no yes

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

Please describe your sound system and sound proofing: High density soundproof barrier/membrane installed above finished ceiling between joists. Sound system is surface mounted and ceiling mounted throughout. 18 speakers in total

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

___ any events at which a cover fee is charged? 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) *Manager monitors guests, requesting that they wait inside for their tables.

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 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 Welch Phone: _____

Address: 340 Bleecker Street, New York, New York 10014

Email : _____

Application submitted on
behalf of the applicant by:

Signature

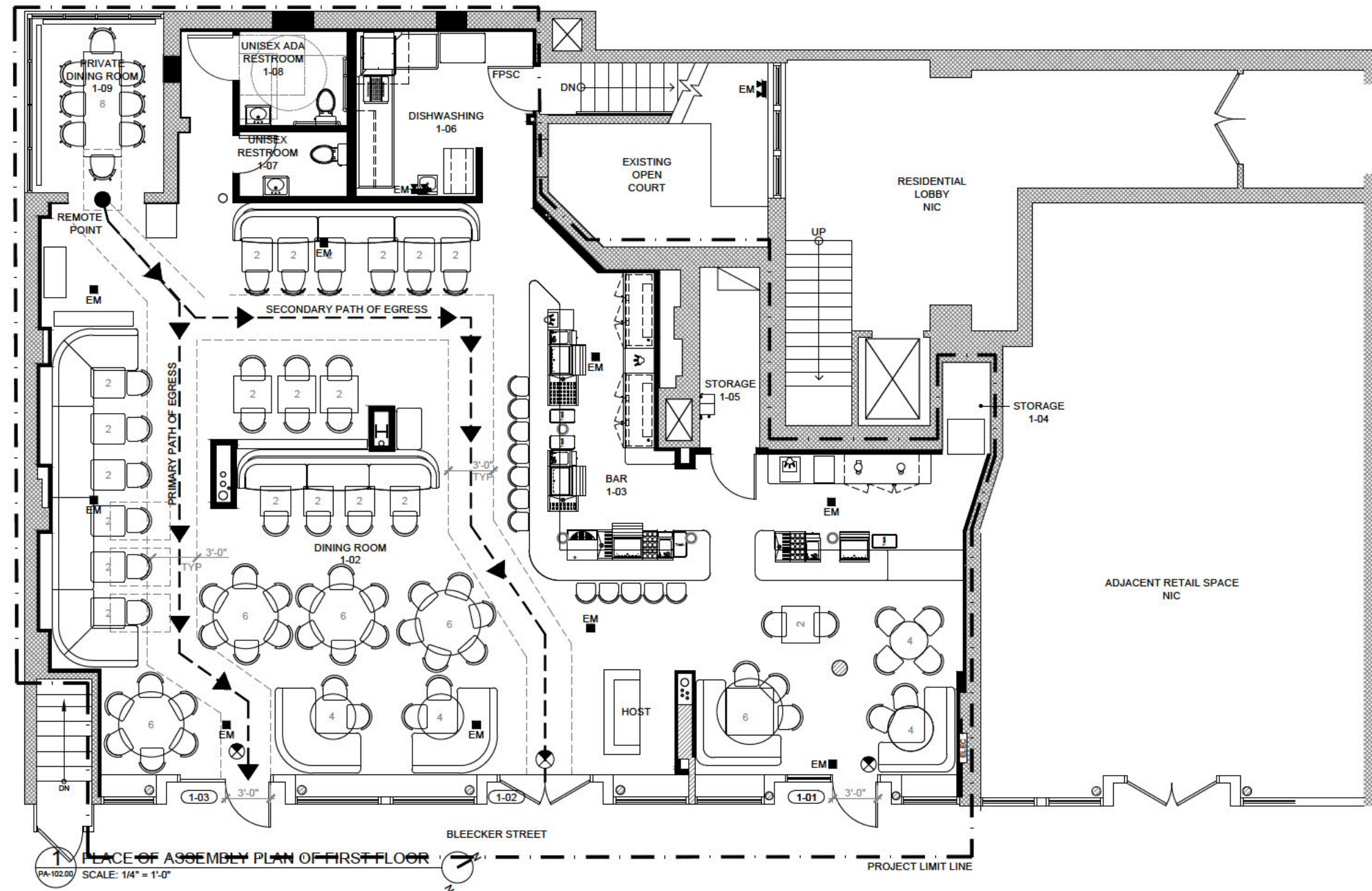
Print or Type Name Benjamin Savitsky

Title Attorney for Licensee

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, Chair

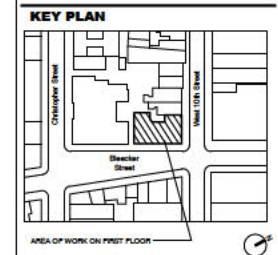


CLIENT
 340 Bleecker LLC
 417 5th Avenue
 New York, NY 10016

ARCHITECT
 shalata architects p.c.
 37 West 10th Street, New York, NY 10011
 212.691.2822 | info@shalataarchitects.com

No.	DATE	ITEM
XXXXXX		ISSUED FOR CONSTRUCTION

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PROJECT
PLACE OF ASSEMBLY
 340-342 Bleecker Street, New York NY 10014
 (218 West 10th Street)

DRAWING
PLACE OF ASSEMBLY PLAN OF FIRST FLOOR

SEAL & SIGNATURE

DATE: 01.08.22
 PROJECT No.: 21X-104
 DRAWN BY: MN
 CHK BY: ES/NS
 DWG No.: PA-102.01

PA-102.01

DOB STAMP/SIGNATURE

DOB NOW BUILD:
 XXXXXXXXXXXXXXX

FIRST FLOOR EGRESS CHART AS PER TABLE 8.1

DOOR (1-01) = 3'-0" WIDE = 36" = 1.5 UNITS @ 50 PERSONS/UNIT	75 PERSONS
DOOR (1-02) = 6'-0" WIDE = 72" = 3 UNITS @ 50 PERSONS/UNIT	150 PERSONS
TOTAL EXIT DOOR CAPACITY OF FIRST FLOOR	150 PERSONS
MAXIMUM TOTAL OCCUPANTS OF FIRST FLOOR AS PER SCHEDULE A	144 PERSONS

TRAVEL DISTANCES AS PER 27-533 & TABLE 8-1

REMOTE POINT	PRIMARY PATH OF TRAVEL	SECONDARY PATH OF TRAVEL
FIRST LEG	7'-3"	10'-1"
SECOND LEG	25'-0"	18'-4"
THIRD LEG (MEASURED DISTANCE x 1.25)	5'-7" x 1.25 = 6'-11"	32'-0" x 1.25 = 40'-0"
FOURTH LEG (MEASURED DISTANCE x 1.40)	5'-3" x 1.40 = 7'-4"	
TOTAL TRAVEL DISTANCES FOR REMOTE POINT A	47'-4" < 85'-0"	84'-11" < 125'-0"

FIRST FLOOR OCCUPANT LOAD AS PER TABLE 6-2

OCCUPANCY	MAXIMUM TOTAL OCCUPANTS
TOTAL ALLOWABLE OCCUPANT LOAD OF FIRST FLOOR	144
PROPOSED # OF SEATS ON FIRST FLOOR	98
PROPOSED # OF EMPLOYEES ON FIRST FLOOR (200SF/PERSON)	10
TOTAL PROPOSED OCCUPANT LOAD OF FIRST FLOOR	108 = 144

PLUMBING FIXTURE CALCULATIONS AS PER TABLE 403.1 OF 2008 NYC BC

REQUIRED WATER CLOSETS = 1 PER 75 PERSONS	REQUIRED LAVATORIES = 1 PER 200 PERSONS
PROPOSED OCCUPANTS = 144 (1 WC REQUIRED FOR EACH SEX)	PROPOSED OCCUPANTS = 144 (1 LAVATORY REQUIRED FOR EACH SEX)
PROVIDED WATER CLOSETS = 2 UNISEX WATER CLOSETS	PROVIDED LAVATORIES = 2 UNISEX LAVATORIES

HC SEATING REQUIREMENTS AS PER TABLE 27-531

PROPOSED SEATING = 144 (5 REQUIRED HC ACCESSIBLE SEATING)
HC SEATING PROVIDED = 5
1 UNISEX HC TOILET PROVIDED

SAINT THEO'S

COCKTAILS

ROSSINI <i>turbo strawberry prosecco</i>	19
BELLINI <i>turbo peach, prosecco</i>	19
BLOODY MARY SERVICE FOR 2 <i>vodka, tomato, worcestershire, olive oil, citrus, celery, hot sauce</i>	45

BRUNCH

PANCAKE GONFIATO <i>mixed berries, mascarpone</i>	22	BURRATA <i>crispy prosciutto, grilled figs</i>	20
OMELETTE <i>ricotta, basil, parmigiano</i>	24	BAKED EGGS <i>chickpea, stewed tomato, pecorino</i>	24
FRITTATA <i>mushrooms, caramelized onion, spinach, ricotta</i>	25	FULL ITALIAN <i>fennel sausage, sunny side egg, cannellini beans, tomato, calabrian potato, grilled sourdough</i>	35
EGGS FLORENTINE <i>ciabatta english muffin, spinach, hollandaise</i>	26	CHICKEN MILANESE <i>arugula, cherry tomato, bianco sardo</i>	34/62
MOZZARELLA IN CAROZZA <i>sunny side up egg, pesto</i>	26		

SALADS

NICOISE <i>avocado, olives, potato, tuna, soft boiled egg</i>	32
CAESAR <i>parmesan, rosemary croutons</i>	22
CHICORY <i>apples, gorgonzola, walnuts</i>	24
<i>all salads - grilled chicken +6</i>	

PIZZETTES

BAR PIE <i>tomato, mozzarella, grana padano</i>	23
CAESAR <i>little gem, spicy breadcrumbs</i>	24
BIANCO <i>prosciutto, red onion, arugula</i>	26

SIDES

FENNEL BREAKFAST SAUSAGE <i>maple</i>	12
CALABRIAN SMASHED POTATO <i>mascarpone, basil</i>	12
FRIES <i>parmesan, black pepper</i>	12
BACON <i>thick cut</i>	12

PANINI

MORTADELLA <i>pepperoncini, mozzarella, pesto</i>	24
SAUSAGE <i>egg, fontina, calabrian aioli</i>	21
CHICKEN MILANESE <i>tomato, aioli, arugula</i>	23

PASTAS

AGLIO E OLIO <i>spaghetti, garlic, calabrian chili flakes</i>	23
CHERRY TOMATO <i>zucchini, spaghetti, basil</i>	25
PESTO FUSILLI <i>basil, pecorino romano pdo, lemon</i>	26
RICOTTA TORCHIO <i>buffala ricotta, chili oil</i>	29
SHORT RIB RAGU <i>pappardelle, grana padano</i>	34
LOBSTER LINGUINE <i>calabrian chili, roasted tomato, basil</i>	42

we ask that guests be mindful of subsequent reservations and join us at the bar when they finish their meal.
no photos please

DINNER

CICCHETTI

POLPETTE <i>breaded beef meatballs, fig jus</i>	14
FRIED ZUCCHINI <i>lemon basil aioli</i>	15
MORTADELLA TOAST <i>black mission figs, red pepper jam, sicilian pistachio</i>	16

PIZZETTES

BAR PIE <i>tomato, mozzarella, grana padano</i>	23
CAESAR <i>little gem, spicy breadcrumbs</i>	24
BIANCO <i>prosciutto, red onion, arugula</i>	26

PASTAS

CHERRY TOMATO <i>zucchini, spaghetti, basil</i>	25
PESTO FUSILLI <i>basil, pecorino romano pdo, lemon</i>	26
RICOTTA TORCHIO <i>buffalo ricotta, chili oil</i>	29
HONEYNUT SQUASH AGNOLOTTI <i>ricotta, sage, brown butter</i>	32
SHORT RIB RAGU <i>pappardelle, grana padano</i>	34
LOBSTER LINGUINE <i>calabrian chili, roasted tomato, basil</i>	42

SIDES

BROCCOLI RABE <i>garlic oil, chili flakes, lemon zest</i>	16
NEW POTATOES <i>garlic, olive oil, parsley</i>	16
ROASTED CARROTS <i>pistachio, shallot, balsamico</i>	18

APPETIZERS

OYSTERS <i>widow's hole oyster, concord grape, fennel</i>	26 / 48
FRIED CALAMARI <i>romesco</i>	23
MOZZARELLA IN CARROZZA <i>fried mozzarella, raw tomato sauce, parmesan</i>	25
TUNA CRUDO <i>castelvetrano olives, meyer lemon, basil</i>	26
BEEF CARPACCIO <i>arugula, calabrian chili, orange, 24 month aged parmesan</i>	28

SALADS

ARUGULA <i>balsamic vinaigrette, bianco sardo</i>	20
CAESAR <i>parmesan, rosemary croutons</i>	20
CHICORY <i>fiore sardo, honeycrisp apple, pistachio</i>	22
CHOPPED <i>iceberg, pepperoncini, salami picante</i>	22

ENTREES

HALIBUT <i>aquapazza, fennel, cherry tomato</i>	44
BRANZINO <i>gigante beans, broccoli di ciccio, orange gremolata</i>	44 / 75
SWORDFISH SALTIMBOCCA <i>prosciutto di san daniele, frisse, orange vinaigrette</i>	45
LAMB CHOPS <i>honeynut squash, farro, spigarello</i>	68
NY STRIP <i>smashed fingerling potato, salsa verde</i>	65
CHICKEN MILANESE <i>arugula, cherry tomato, bianco sardo</i>	34 / 62

we ask that guests be mindful of subsequent reservations and join us at the bar when they finish their meal.

no photos please











Certificate of Occupancy

CO Number:1011144-0000016

This certifies that the premises described herein conforms substantially to the approved plans and specifications and to the requirements of all applicable laws, rules and regulations for the uses and occupancies specified.No change of use or occupancy shall be made unless a new Certificate of Occupancy is issued.*This document or a copy shall be available for inspection at the building at all reasonable times.*

<p>A. Borough: MANHATTAN Address: 340 BLEECKER STREET Building Identification Number(BIN): 1011144</p>	<p>Block Number: 619 Lot Number(s): 26 Additional Lot Number(s): Application Type: A1 - ALTERATION TYPE 1</p>	<p>Full Building Certificate Type: Temporary Date Issued: 03/17/2025</p>
<p>This building is subject to this Building Code: Prior to 1968</p>		
<p>This Certificate of Occupancy is associated with job# 123871747-01</p>		
<p>B. Construction Classification: 3: NON-FIREPROOF STRUCTURES Building Occupancy Group classification: R-2 - RESIDENTIAL: APARTMENT HOUSES Multiple Dwelling Law Classification: HAEA</p>		
<p>No.of stories: 6</p>	<p>Height in feet: 60</p>	<p>No.of dwelling units: 35</p>
<p>C. Fire Protection Equipment: Fire Suppression System, Sprinkler System</p>		
<p>D. Parking Spaces and Loading Berths: Open Parking Spaces: 0 Enclosed Parking Spaces: 0 Total Loading Berths: Not available</p>		
<p>E. This Certificate is issued with the following legal limitations: Restrictive Declaration: 2019000166053 Zoning Exhibit: None BSA Calendar Number(s): None CPC Calendar Number(s): None</p>		
<p>Borough Comments: Use Groups (UG) indicated by numerals 1 through 18 reflect Zoning Resolution Use Group Designations since 1961 but prior to June 6, 2024. UG in Roman numerals I-X reflect Zoning Resolution Use Group Designations on or after June 6, 2024, the effective date of the Zoning Text Amendment.</p>		

Borough Commissioner

Commissioner



Permissible Use and Occupancy

FLOOR	Occ Group	Max. Persons Permitted	Live Loads (lbs per sq ft)	Zoning Use Group	Dwelling or Rooming Units	Job Reference	Certificate of Occupancy Type	CO Expiration Date
Cellar	A-2	4	OG	6F		123871747	Temporary	06/15/2025
Description of Use: Eating and Drinking Kitchen and accessory storage in conjunction with eating and drinking on 1st floor						Exceptions:		
Cellar	R-2	2	OG	2B		ALT 38/78	Final	
Description of Use: Apartment House Boiler Room, Mechanical Room, Storage Room						Exceptions:		
Floor 1	M	30	120	6		ALT 38/78	Final	
Description of Use: Retail Sales Retail Store						Exceptions:		
Floor 1	A-2	144	120	6A		123871747	Temporary	06/15/2025
Description of Use: Eating and Drinking Eating and drinking establishment						Exceptions:		
Floor 2	R-2	N/A	40	2A	7	ALT 38-78	Final	
Description of Use: Apartment House 7 Class A Apartments						Exceptions:		
Floor 3	R-2	N/A	40	2A	7	ALT 38-78	Final	
Description of Use: Apartment House 7 Class A Apartments						Exceptions:		



Permissible Use and Occupancy

FLOOR	Occ Group	Max. Persons Permitted	Live Loads (lbs per sq ft)	Zoning Use Group	Dwelling or Rooming Units	Job Reference	Certificate of Occupancy Type	CO Expiration Date
Floor 4	R-2	N/A	40	2A	7	ALT 38-78	Final	
Description of Use: Apartment House 7 Class A Apartments						Exceptions:		
Floor 5	R-2	N/A	40	2A	7	ALT 38-78	Final	
Description of Use: Apartment House 7 Class A Apartments						Exceptions:		
Floor 6	R-2	N/A	40	2A	7	ALT 38-78	Final	
Description of Use: Apartment House 7 Class A Apartments						Exceptions:		

CofO Comments: NOTE. SECOND MEANS OF EGRESS FROM CELLAR LEVEL PROVIDED ON 95 CHRISTOPHER STREET. EGRESS EASEMENT FILED AT COUNTY CLERKS OFFICE UNDER CRFN # 2019000166053

Borough Commissioner

Commissioner

Restaurant
License ID: 0340-23-137102
County: New York
Legacy Serial #: 1319767



State Liquor Authority

Effective Date: 12/01/2024
Expiration Date: 11/30/2026

THE LICENSEE DESIGNATED BELOW IS HEREBY GRANTED PERMISSION, UNDER THE ALCOHOLIC BEVERAGE CONTROL LAW TO TRAFFIC IN ALCOHOLIC BEVERAGE PURSUANT TO THE TYPE OF LICENSE INDICATED IN THE UPPER LEFT HAND CORNER OF THIS CERTIFICATE AND ACCORDING TO THE STATUTES AND REGULATIONS PERTAINING THERETO.

THIS LICENSE SHALL NOT BE TRANSFERABLE TO ANY OTHER PERSON OR TO ANY OTHER PREMISES OR TO ANY OTHER PART OF THE BUILDING CONTAINING SUCH LICENSED PREMISES: IT SHALL NOT BE DEEMED A PROPERTY OR VESTED RIGHT AND MAY BE REVOKED AT ANY TIME PURSUANT TO LAW

METHOD OF OPERATION; Restaurant Serving Liquor, Beer, Wine, and Cider

- 1.CB2: Days/Hours of Operations 8AM-12AM Sun – Thu; 8AM-1AM Fri/Sat; Sidewalk Café Closed by 10PM Sun.*
- 2.CB2: Ambient recorded background music; Live Music permitted twice a week only; Sidewalk Café; No DJ's; N.*

*340 BLEECKER LLC & THE GRAND TOUR COLLECTION LLC
SAINT THEO'S
340-342 BLEECKER ST
NEW YORK, New York 10014*



Certificate No. 0340-23-137102

A handwritten signature in black ink, appearing to read "L7a", positioned above the name of the Chair.

Lily M. Fan
Chair

Licenses issued under this chapter shall contain, in addition to any further information or material to be prescribed by the rules of the liquor authority, the following information: (a) Name of person to whom license is issued; (b) kind of license and what kind of traffic in alcoholic beverages is thereby permitted; (c) description by street and number, or otherwise, of licensed premises; (d) a statement in substance that such license shall not be deemed a property or vested right, and that it may be revoked at any time pursuant to law.