COMMUNITY BOARD NO. 2, MANHATTAN
3 WASHINGTON SQUARE VILLAGE
NEW YORK, NY 10012-1899
www.cb2manhattan.org
P: 212-979-2272 F: 212-254-5102 E: info@cb2manhattan.org
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): EWS 90 West Inc

Trade name (DBA): pending

Premises address: 90 W Houston St, Cellar, New York, NY 10012

Cross Streets and other addresses used for building/premise:

Between LaGuardia Pl and Thompson St, no other addresses used

CONTACT INFORMATION:

Principal(s) Name(s): Frank Scotto, President

Office or Home Address: [redacted]

City, State, Zip: New York, NY 10038

Telephone #: [redacted]

Landlord Name / Contact: Soho Gateway Corporation, Winston Kulok

Landlord's Telephone and Fax: [redacted]

NAMES OF ALL PRINCIPAL(s):	NAMES / LOCATIONS OF PAST / CURRENT LICENSES HELD
Frank Scotto	M3: Clockwork Bar, 21 Essex St (since 2004 to current)
	M6: Strangelove Bar, 229 E 53rd St (since 2018 to current)
	M6: Lucky Lyndon, 156 E 33rd St (since 2023 to current)

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

No DJ, no live music, no promoted events. We are your neighborhood dive bar where you can relax, have a drink, catch up with friends. A place where you'll find familiar faces and people know your name.

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.)

Current licensee: Robillo Holding LLC, OP 1343356, exp 12/31/2026

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: _____

Current licensee: Robillo Holding LLC, OP 1343356, exp 12/31/2026

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:

Qifan LLC, OP 1283124, from 2014 - 2019

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: 4 Year Built : 1900

Describe neighboring buildings:
Mixed residential and commercial

Zoning Designation: R7-2

Zoning Overlay or Special Designation (applicable) C1-5

Block and Lot Number: 525 / 57

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? 60

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? 6A

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? about 800 sq ft

If more than one floor, please specify square footage by floors: N/A

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? N/A

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: _____

OVERALL SEATING INFORMATION:

Total number of tables? 15 Total table seats? 30

Total number of bars? 1 Total bar seats? 12

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

Total OVERALL number of seats in Premises : 42

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: _____

Rectangular-shaped 27' customer bar with 12 stools located near entrance

* 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:

5pm to 2am 5pm to 2am 5pm to 2am 5pm to 2am 5pm to 2am 5pm to 4am 5pm 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?) pending
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

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

Please describe your sound system and sound proofing: Bose speakers

_____

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)

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: [redacted] _____ Phone: _[redacted]_____

Address: 90 W Houston St, Cellar, New York, NY 10012

Email : _[redacted]_____

Application submitted on
behalf of the applicant by:

/s/ Frank Scotto
Signature

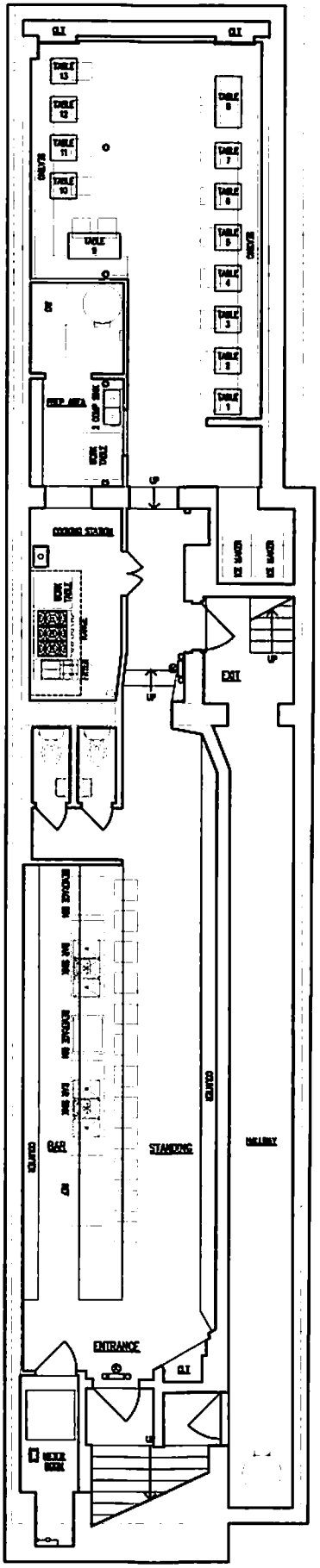
Print or Type Name Frank Scotto

Title President

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

EATING AND DRINKING ESTABLISHMENT
USE GROUP 6A
338 SF SEATING AREA
36 OCCUPANT AS PER C OF
OCCUPANCY 101436233-T002
30 PATRONS AND
6 EMPLOYEES
TOTAL = 36 PERSONS



BACK ROOM SEATING AREA
30 PATRONS
6 EMPLOYEES
TOTAL 36 PERSONS

EATING AND DRINKING ESTABLISHMENT
USE GROUP 6A
448 SF SEATING AREA
38 OCCUPANT AS PER C OF
OCCUPANCY 101436233-T002
36 PATRONS AND
2 EMPLOYEES
TOTAL = 38 PERSONS

FRONT ROOM SEATING AREA
36 PATRONS
2 EMPLOYEES
TOTAL 38 PERSONS

WEST HOUSTON

AUGUSTINE LEE ARCHITECT PC.
156-15 Northern Blvd. # 4 flushing ny 11354
alee@aleearc.com tel 718 799 0665

90 WEST HOUSTON STREET, NEW YORK, NY
CELLAR - SEATING PLAN

SK-1.1

Proposed Menu

Mozzarella Cheese Sticks

Crunchy breaded mozzarella cheese sticks, finished to a golden brown and served with choice of sauce.

Chicken Strips

Crispy Chicken Strips served with your choice of dipping sauce.

Chicken Wings

8 Wings ---16 Wings --- 24 Wings ---

Served: Naked, Ranch, Mild, Medium or HOT

Chicken Tenders

With honey barbeque sauce and French fries

Caesar Salad

Crispy Croutons, Romaine, Parmesan, Caesar dressing

Cheese or Pepperoni Pizza


Choly
CLOSED


EXIT


EXIT

Gmail Sam Park <abclicense@gmail.com>

RE: EWS 90 West Inc, Bar opening at 90 W Houston St, Cellar

ABC License <abclicense@gmail.com> Wed, Apr 23, 2025 at 10:45 AM
To: Bleecker Area Merchants and Re <bamranyc@yahoo.com>
Bcc: ban62007@gmail.com, fxguy1@msn.com, info@sohoalliance.org, scardillante@hotmail.com, gideongil@hotmail.com, Francine Lange <francinelange@manhattancb2.org>, "Mai, Eva (CB)" <emai@cb.nyc.gov>

Dear Neighbors,

EWS 90 West Inc, DBA pending, will be taking over the restaurant/bar space at 90 W Houston St, Cellar. The location is currently licensed with a full liquor license.

There will be no DJs, no live music, and promoted events. We will have background music only. We are opening a neighborhood dive bar where you can relax, have a drink, and catch up with friends. A place where you'll find familiar faces and people know your name.

Our proposed hours of operation will be 5pm - 2am on weekdays and 4am closure on Fridays and Saturdays. We will be attending the Bleecker Area Merchants' & Residents' Association meeting tonight and also next month's CB 2 Board meeting.

If you have any questions or concerns, please feel free to contact us. Thank you!

Sincerely,

Sam Park
Representative

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ABC LICENSE
35-15 Farrington Street
Flushing, NY 11354
Tel: (718) 939-1400
Fax: (718) 732-4588