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COMMUNITY BOARD NO. 2, MANHATTAN

3 WASHINGTON SQUARE VILLAGE NEW YORK, NY 10012-1899 www.cb2manhattan.org

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: _	TBD
APPLICANT INF	ORMATION:
Name of applicant(s)	: Ad Hoc Collective LLC
Trade name (DBA):	Ad Hoc
Premises address:	13 Christopher Street, New York, NY 10014
Cross Streets and ot	ner addresses used for building/premise:
	Gay Street, Grove Street
CONTACT INFO	RMATION:
Principal(s) Name(s): Kim Alegado
Office or Home Addr	ess:
City, State, Zip:	
Telephone #:	
Landlord Name / Co 13-15 Christophe	
Landlord's Telephon	and Fax: _
NAMES OF ALL PR	RINCIPAL(s): NAMES / LOCATIONS OF PAST / CURRENT LICENSES HELD
Kim Alegad	Rosecrans Retail LLC; 7 Greenwich Ave, New York, NY 10014; 0524-25-00414
	
Briefly describe the p	roposed operation (i.e. "We are a family restaurant that will focus on…"):
	asement cafe that has been operating in this location since 2017. We focus on
serving small bites	and providing a creative community space.

WHAT TIPE(S) OF LICENSE(S) ARE TOO 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
X 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.)
N/A
If this is for a new application, please list previous use of location for the last 5 years:
Yes. Ad Hoc has been operating as a cafe since 2017.
Is any license under the ABC Law currently active at this location? yesX 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 _X_no
If yes, please list DBA names and dates of operation:

PREMISES:

By what right does the applicant have possession of the premises?
Own _X_ Lease Sub-lease Binding Contract to acquire real property other:
Type of Building: Residential Commercial _X_Mixed (Res/Com) Other:
Number of floor:3 Year Built :1920
Describe neighboring buildings: Mixed commercial and residential buildings
Zoning Designation: R6
Zoning Overlay or Special Designation (applicable) Landmark
Block and Lot Number: 610 / 66
Does the premise occupy more than one building, zoning lot, tax lot or more than one floor? \underline{X} no
Is the premise located in a historic district? X yes no
(if yes, have all exterior changes or changes governed by the Landmarks Preservation Commission (LPC) been approved by the LPC? X 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) X no yes : explain
What is the proposed Occupancy?
Does the premise currently have a valid Certificate of Occupancy (C of O) and all appropriate permits?
no _X_yes
If yes, what is the maximum occupancy for the premises?74
If yes, what is the use group for the premises? use group 6
If yes, is proposed occupancy permitted? X yes no, explain :
If your occupancy is 75 or greater, do you plan to apply for Public Assembly permit? yes _X_no
Do you plan to file for changes to the Certificate of Occupancy? yesX_ 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? X no yes
(if yes, please describe:

INTERIOR OF PREMISES: What is the total licensed square footage of the premises? 404 square feet 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? 1 Is there access to other parts of the building? X no ____ yes, explain: _____ OVERALL SEATING INFORMATION: Total number of tables? 6 Total table seats? 12 Total number of bars? 1 Total bar seats? 0 Total number of "other" seats? 5 please explain: counter top seating Total OVERALL number of seats in Premises: 17 **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? Any food counters? ___ no _2_ yes, describe : 2 small food counters with 2 and 3 seats respectively 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	X_Bar & Food	Restaurant	Club/ Cabaret	Hotel	Other:		

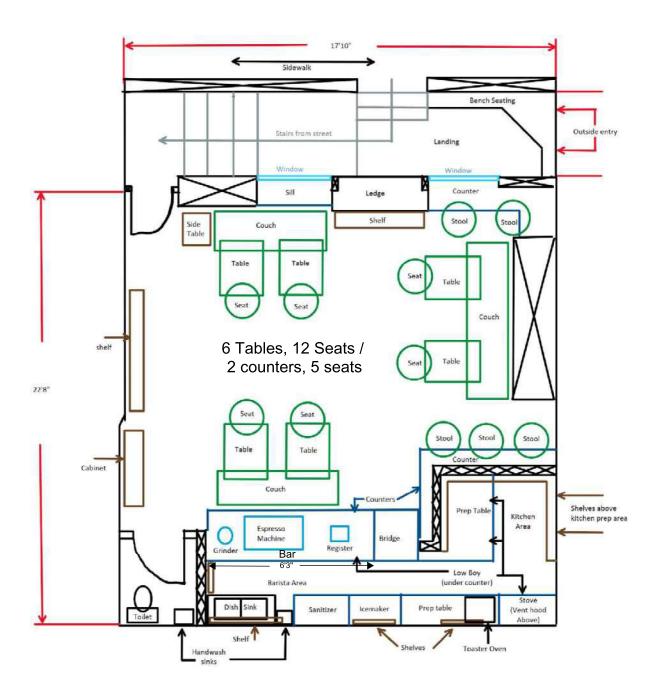
What are the	e Hours of Ope	eration?				
Sunday:	Monday:	Tuesday:	Wednesday:	Thursday:	Friday:	Saturday:
<u>9am</u> to10pm	9am to 10pm	9am to 10pm	9am to 10pm	9am to 10pm	9am to 11pm	<u>9am</u> to <u>11pm</u>
Will the busin	ness employ a	a manager? _	no _X_ yes,	name / experier	nce if known N	<u> Megan Cepull; 10 y</u> rs
Will there be Do you have	security perse or plan to ins	onnel? <u>X</u> no tall French dod	yes(if yeors, accordion do	es, what nights a pors or windows	nd how many' that open? _ <i>`</i>	?)yes
If yes, please	e describe :					····
Will you have	e TV's ? X	no yes (how many?)			
Type of MU	SIC / ENTER	rainment:	_ Live Music	_Live DJJ	uke Box X	Ipod / CDsnone
Expected Vo		X_Backgroun	d (quiet) E	ntertainment lev	el Ampli	fied Music
Do you have	or plan to ins	tall soundproo	fing?no	X_yes		
IF YES, will y	you be using a	a professional :	sound engineer?	no, existing		
Please desc	ribe your sour	nd system and	sound proofing:	One small blue	tooth speake	r; double sheetrock,
no resident	tial neighbor a	above or behin	nd.			
Will you be p	permitting:	_ promoted ev	ents sched	luled performand	ces outs	side promoters
any eve	ents at which a	a cover fee is c	harged? X p	rivate parties		
						ewalk caused by your perating since 2017
Will you be ι	utilizing r	opes mo	ovable barriers	other outsid	e equipment ((describe)
Are your pre	mises within 2	200 feet of any	school, church o	or place of worsh	nip? X no	yes
please subr	nit a block pl	-	area map show	_	-	or on the same block, y to your applicant
Indicate the	distance in fee	et from the pro	posed premise:			
Name of Sch	nool / Church:					
Address:					Distance:	

·····
complaints are made

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

Ad Hoc Collective - Interior



Ad Hoc Collective LLC 13 Christopher Street New York, NY 10014 April 21, 2025





AD HOC COLLECTIVE

cafe and wine bar

COFFEE BAR

Golden Milk

5.5 / 7.5

House Drip Espresso Macchiato Flat White Latte Mocha	sm / lg or iced 4 / 5 4 4.5 5.5/ 6.5 5.5 / 6.5 6.5 / 7.5	Americano Extra Shot Cortado Cappuccino Velvet Au Lait House Cocoa	sm / lg or iced 4.5 / 5.5 3 4.5 5.5 / 6.5 4.5 / 5.5 5 / 6
Iced Coffee	6	Cold Brew	7
MILK OPTIONS Oat Macadamia Pistachio	1 1 2	ADDITIONS Raw Honey / Cinnamon Cardamom Vanilla/Lavender/Rose	0.5 0.75 1
TEAS			
LOOSE LEAF Reg English Breakfas Jasmine Green Peppermint Ginger	5.75 t	Iced / Tea Latte Earl Grey Masala Chai Chamomile Turmeric Ginger	6.75
MATCHA Tea Tea Latte Lemonade	5 / 6 6 / 7.5 8	CHAI TEA LATTES Classic Masala Cardamom Rose	5/6 6/7
BREWED ICEI Tea House Black Seasonal Green Raspberry Hibiso	5.5	Palmer	7
& SUCH			

Iced Calamansi (ade)

7

EARLY BIRD BITES (available	e daily fr	rom 8am to 3pm)		Bread & Butter La Cabra sourdough & whipped cultured butter	10
Yogurt fresh berries, orange honey, Soft Scrambled Eggs	gluten fr	ee oat-quinoa-chia seed granola	13	Crudités seasonal dressed vegetables with ajo blanco and dukkah	14
with toasted sourdough, butter add cheddar cheese & fresh chives +2 add feta & house chili crisp +4				Burrata fennel and medjool date salad, white balsamic & lemon vinaigrette	16
SIDES				Cheese & Accompaniments comte with porcini & pepper oil, manchego with fig vincotto	17
Balthazar Sourdough	5	Gluten Free Toast	5	Salami saucisson sec with preserved broccoli rabe & fennel pollen	16
2 Egg your ways Fresh Fruit	7 6	Bacon Sliced Avocado	6	Smoked Trout Roe toasted brioche, fudgy egg yolk topped with herbed roe salad	22
ALL DAY MENU				Scallop Crudo seared scallops with citrus oil, yuzu kosho & shio kombu	26
Avocado Toast watermelon radish, pickled red onion, fresh herbs on sourdough			13	Toulouse Sausage seared baby gem lettuce & pine nuts	29
Three Cheese Melt house blend of sharp cheddar, mozzarella, colby jack on sourdough add spanish albacore +4			13	DESSERTS	
Green Gazpacho avocado, yuzu kosho, pepitas and calabasa seed oil			13	Panna Cotta vanilla bean oil & chai reduction	14
Cafe Salad baby gem, pine nut vinaigrette, fresh herbs			14	Affogato Onyx espresso & vanilla bean gelato	10

