

Meeting Date: _____

APPLICANT INFORMATION:

Name of applicant(s): Jacopo Borgalli

Trade name (DBA): Levanto

Premises address: 1Jane st , New York ,NY, 10013

Cross Streets and other addresses used for building/premise:

CONTACT INFORMATION:

Principal(s) Name(s): Jacopo Borgalli

Office or Home Address: [REDACTED]

City, State, Zip: [REDACTED]

Telephone #: [REDACTED] email : [REDACTED]

Landlord Name / Contact: 63rd west realty

Landlord's Telephone and Fax: _____

NAMES OF ALL PRINCIPAL(s):	NAMES / LOCATIONS OF PAST / CURRENT LICENSES HELD
<u>Jacopo Borgalli</u>	<u>N/A</u>
<u>Nicolo currarino</u>	<u>N/A</u>
<u> </u>	<u> </u>

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

We are going to be an elevated italian trattoria that focus on providing amazing

quality and service to the neighbors. Our motto is "quality over quantity" not just

when it comes to ingredients, but people too.

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.)

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

Beauty salon

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 : 1927

Describe neighboring buildings:

all low rise residential buildings

Zoning Designation: c1-6

Zoning Overlay or Special Designation (applicable) n/a

Block and Lot Number: 616 / 27

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? TBD

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? TBD

If yes, what is the use group for the premises? BUSINESS

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? 595

If more than one floor, please specify square footage by floors: _____

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

If more than one floor, what is the access between floors? _____

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? 13 Total table seats? 28

Total number of bars? 1 Total bar seats? TBD

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

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 TBD

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: _____

* 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 X Restaurant ____ Club/ Cabaret ____ Hotel ____ Other: _____

What are the Hours of Operation?

Sunday: Monday: Tuesday: Wednesday: Thursday: Friday: Saturday:
12 to 11 12 to 11 12 to 11 12 to 11 12 to 11 12 to 12am 12 to 12am

Will the business employ a manager? ☐ no ☒ yes, name / experience if known : tbd

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 : _____

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? _____

Please describe your sound system and sound proofing: _____

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").

Text

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: Jacopo Borgalli Phone: [REDACTED]

Address: [REDACTED]

Email : info@levantonyc.com

Application submitted on
behalf of the applicant by:

Jacopo Borgalli
Signature

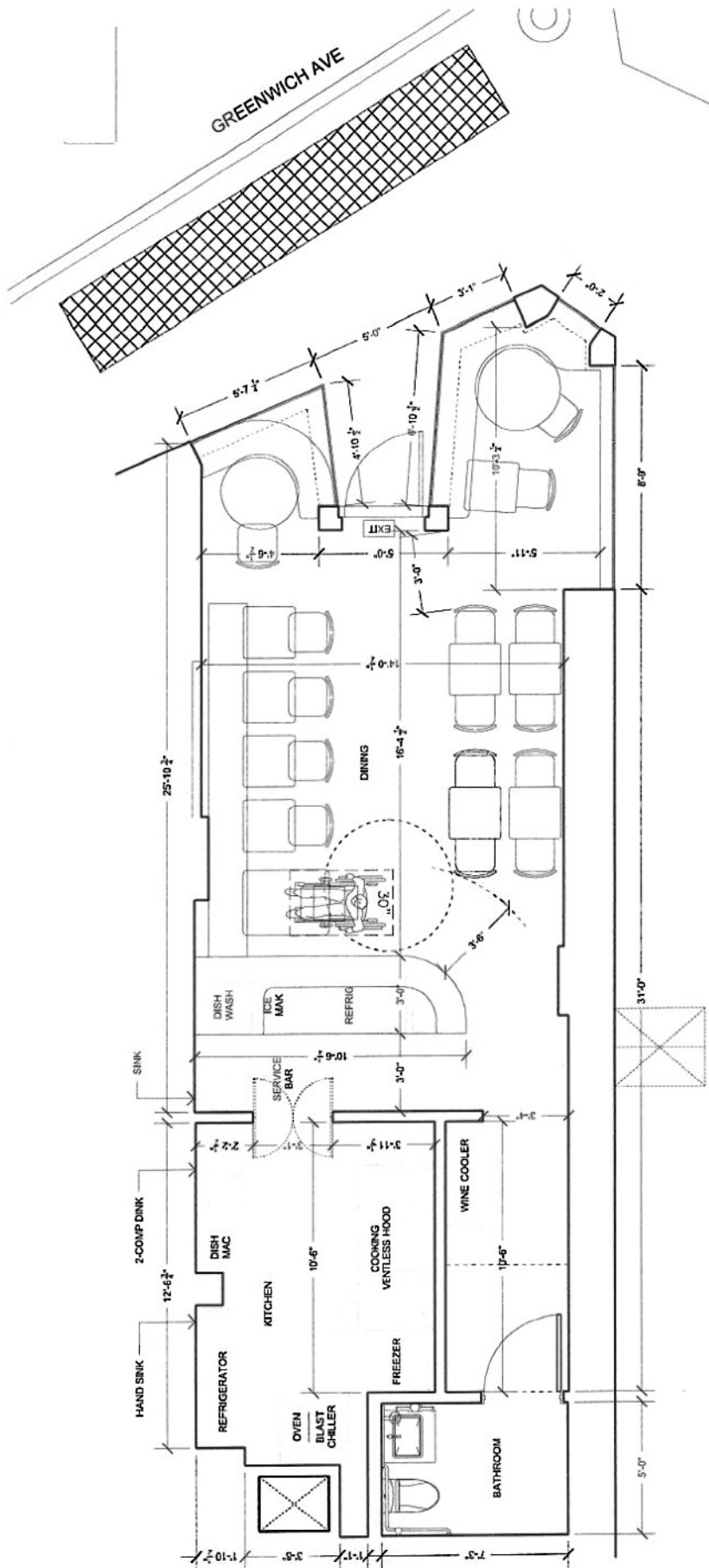
Print or Type Name _____

Title _____

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.

Donna Raftery

Community Board 2,
Manhattan SLA Licensing
Committee Donna Raftery, Chair



NAME: LEVANTO LLC
 DBA: LEVANTO
 ADDRESS: 115 GREENWICH AVE
 NEW YORK 10014

GROUND FLOOR PLAN

Scale 1/4" = 1'-0"

MENU LEVANTO

TERRA DI MEZZO (FOR SHARING)

GATAFIN

Fried ravioli stuffed with stewed herbs, served with aioli sauce

FOCACCIA DI RECCO

Thin focaccia filled with soft cheese

FARINATA PANCAKE

Savory chickpea flour pancakes with stracchino cheese and black truffle

AVOTOZZO

Small sandwich filled with guacamole and tomato

APPETIZER

POLPETTE

Veal meatballs slowly cooked in tomato sauce

BURRATA E PROSCIUTTO

24-month Parma ham, burrata, and cherry tomatoes

BACCALA MANTECATO

Creamy cod and potatoes on crispy bread wafers

PIZZA SOUFFLE

Bowl of tomato sauce and mozzarella baked in the oven, covered with pizza dough

BATTUTA E MIDOLLO

Veal tartare served with its marrow

UOVO MORBIDO TARTUFO E PARMIGIANO

Poached egg with parmesan sauce and black truffle

PASTA

PANSOTTI IN SALSA DI NOCI

mezzelune ravioli stuffed with herbs, served with walnut sauce

RISOTTO CAVOUR

Creamy risotto with cheese fondue and veal demi-glace

RAVIOLI AL RAGU

Herb-stuffed ravioli with slow-cooked veal ragù

CORZETTI AL LIMONE

Pasta discs sautéed in a lemon and butter sauce

SPAGHETTO SULLO SCOGLIO

Spaghetti with seafood and cherry tomato sauce

GNOCCHI AL PESTO

Potato gnocchi with basil and pine nut sauce

PENNE ALLA LEVANTESE

Penne with pesto sauce and creamy cherry tomato sauce

MAIN COURSE

COTOLETTA ALLA VALDOSTANA

Breaded veal cutlet fried with mozzarella and cooked ham

PESCATO DEL GIORNO ALLA LIGURE

Fish of the day baked with potatoes, cherry tomatoes, olives, and pine nuts

BISTECCA E VERDURE –

Ribeye cooked on a plank, served with seasonal vegetables

TONNO SICILIA

Fried tuna fillet with tomato, capers, and onions

POLLO ALLA LIGURE

Chicken cooked in its sauce with pine nuts and Taggiasca olives

ZUPPA DI PESCE

Mixed seafood soup served with toasted bread

DESSERTS

PANNA COTTA

Cooked cream with pistacchio sauce

TIRAMISU'

A classic Italian dessert made with layers of coffee-soaked ladyfingers, creamy mascarpone cheese

GELATO & FRIENDS

Vanilla gelato made at the moment which can be finished with various toppings and nuts to your taste

"Please inform our staff of any food allergies or intolerances. We will be happy to offer variations to our dishes to accommodate your needs; however, as we do not have dedicated preparation areas, we cannot guarantee the absence of cross-contamination."

list of allergens

-  = Gluten
-  = Dairy
-  = Eggs
-  = Tree nuts
-  = Fish
-  = Shellfish
-  = Soy