

P&B Pesetsky & Bookman

Mavik Enterprises Inc.

Community Board SLA License Questionnaire

Pesetsky & Bookman

Applicant's Alcoholic Beverage Counsel

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COMMUNITY BOARD NO. 2, MANHATTAN

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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: 12/02/2025 or 12/04/2025

APPLICANT INFORMATION:

Name of applicant(s): Mavik Enterprises Inc.

Trade name (DBA): Hudson Plate

Premises address: 427 Gansevoort Street, New York, NY 10014

Cross Streets and other addresses used for building/premise:
Gansevoort Peninsula in Hudson River Park; 10th Avenue between Little West 12th Street and Gansevoort Street

CONTACT INFORMATION:

Principal(s) Name(s): Perry Mallas and Stella Mallas

Office or Home Address: [REDACTED]

City, State, Zip: New York, NY 10006

Telephone #: [REDACTED]

Landlord Name / Contact: Hudson River Park Trust / Noreen Doyle

Landlord's Telephone and Fax: (212) 627-2020

NAMES OF ALL PRINCIPAL(s):	NAMES / LOCATIONS OF PAST / CURRENT LICENSES HELD
<u>Perry Mallas</u>	<u>1.) MVNBC Corp. serial #1252536; 189 Franklin Street, New York, NY 10013 2.) SFK Foods Corp. serial #1271030; Flatiron Public Plaza South, New York, NY 10010</u>
<u>Stella Mallas</u>	

Briefly describe the proposed operation (i.e. "We are a family restaurant that will focus on..."):
We will operate the business as a food kiosk serving American comfort food including grilled options, hearty sandwiches and popular appetizers for breakfast, lunch and dinner. The food kiosk will provide a convenient amenity in Hudson River Park open to the public.

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.)

n/a

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

public park

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: _____

n/a

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: **Concession agreement**

Type of Building: Residential Commercial Mixed (Res/Com) Other: **industrial building/stand alone structure- enclosed food concession kiosk**

Number of floor: 1 Year Built : 2024

Describe neighboring buildings:

Park along the Hudson River; commercial and residential buildings located across the Hudson River Greenway on 10th Avenue

Zoning Designation: coastal zone

Zoning Overlay or Special Designation (applicable) Special Hudson River Park District

Block and Lot Number: 651 / 13

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) **n/a** 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 outdoor grounds of Hudson River Park

What is the proposed Occupancy? **inside food kiosk = 5 persons**
outdoor seating = 24 persons

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? 5

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

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 **n/a**

(if yes, please describe: _____)

INTERIOR OF PREMISES:

What is the total licensed square footage of the premises? food kiosk = 470 sq ft.; outdoor dining space = 300 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?

grounds of Hudson River Park on the Gansevoort Peninsula measuring 770 sq ft.

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? 8 Total table seats? 24

Total number of bars? 1* Total bar seats? 0
*point of sale

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

Total OVERALL number of seats in Premises: 24

BARS:

How many *stand-up bars / bar seats are being applied for on the premises? Bars 1* Seats 0
*point of sale

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

Any food counters? no yes, describe: point of sale food and beverage counter, rectangular shape measuring 11'7"

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: food kiosk

What are the Hours of Operation?

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

10AM to 8PM 10AM to 8PM

Will the business employ a manager? no yes, name / experience if known : Vasilios Mallas

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 : front point of sale window of kiosk will remain open during all hours of operation

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? n/a

Please describe your sound system and sound proofing: n/a

Will you be permitting: no promoted events no scheduled performances no outside promoters

no any events at which a cover fee is charged? no 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: n/a

Address: _____ Distance: _____

Name of School / Church: n/a

Address: _____ Distance: _____

Name of School / Church: n/a

Address: _____ Distance: _____

Please provide contact information for Residents / Community Board and confirm that if complaints are made you will address it immediately.

Contact Person: Perry Mallas Phone: [REDACTED]

Address: [REDACTED]

Email: [REDACTED]

Application submitted on behalf of the applicant by:

x 
Signature

Print or Type Name Perry Mallas

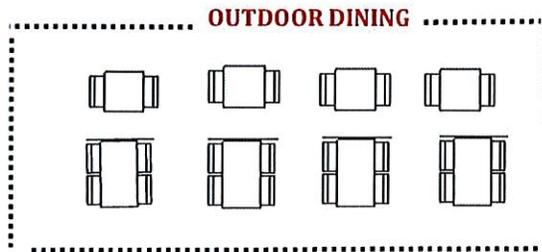
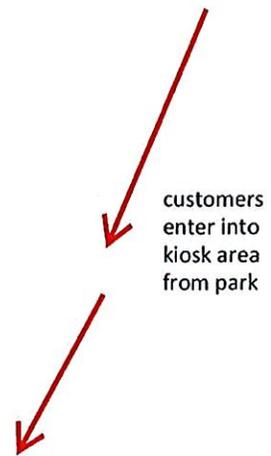
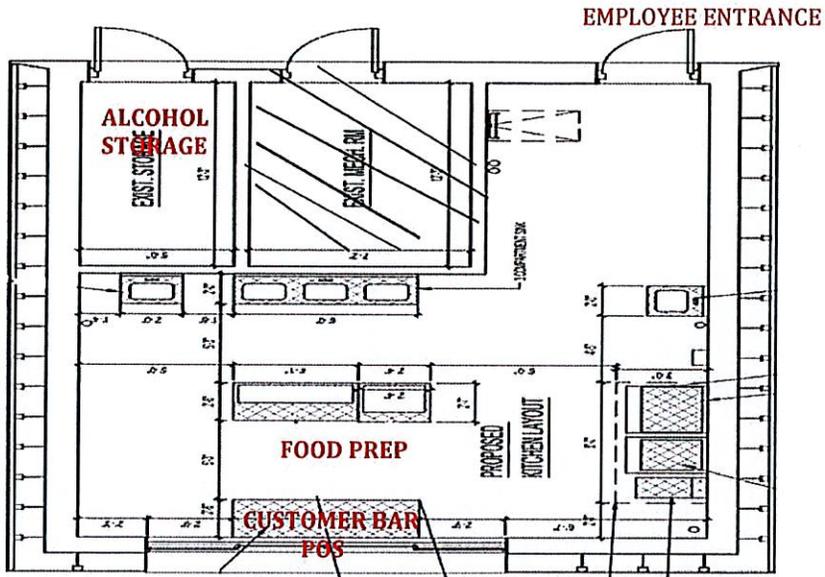
Title President

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, Chair

FLOOR PLAN
MAVIK ENTERPRISES INC.
427 GANSEVOORT STREET
NEW YORK, NY 10014





MENU

Hot Drinks

Coffee _____	3.50	Espresso _____	3.50
Mocha _____	4.00	Breve _____	3.75
Maple _____	4.00	Cortadi _____	4.25
Hot Cider _____	3.95	Cappuccino _____	5.00
Chai _____	5.00	Latte _____	5.50
Dirty Chai _____	6.50	Maple Latte _____	5.75
Hot Cocoa _____	4.00	Mocha Latte _____	5.75

Cold Drinks

Iced Coffee _____	3.95
Lemonade _____	4.00
Iced Tea _____	3.95
Selzer Lemonade _____	6.00

Breakfast

Eggs

Classic Egg Sandwich

Choice of roll, bagel, or multi grain bread

Add ons

Egg Whites _____	1.50
Gluten free bread _____	1.50
Croissant _____	1.50
Ciabatta _____	0.75
Egg Whites _____	1.50
Bacon, Sausage, or Turkey Bacon _____	1.50
Cheese _____	1.00
Avocado _____	1.75

Ham and Cheese Croissant _____ 8.95

Avocado Toast _____ 10.95

Smoothies

Better Butter _____ 5.75
almond butter, banana, dark chocolate, raw agave, cinnamon, almond milk, skinny chia

Skinny Chia _____ 5.75
raspberry, banana, chia seeds, lemon, water

Maui Wowie _____ 5.75
mango, pineapple, strawberry, coconut water

Green Team _____ 5.75
spinach, kale, cucumber, green apple, pineapple, coconut oil, almond milk

Fresh Juices

Forest Green _____ 8.50
kale, spinach, celery, parsley, lemon, green apple and aloe vera

Watermelon Cooler _____ 8.50
100% pure hydrating watermelon juice, ginger, lemon juice (16oz), celery, carrots, beets, ginger with achinacea and lax seed oil

Paninis and Wraps

Pesto Chicken Panini _____ 11.95
Chicken pesto, arugula, tomatoes, romano cheese and pesto aioli on ciabatta

Fresh Roast Turkey Panini _____ 11.95
Roast turkey, havarti, roasted peppers and pesto aioli on ciabatta

Chicken Caesar Wrap _____ 11.95
Grilled chicken, crispy romaine lettuce, parmesan romano and caesar dressing

Hummus Wrap (v) _____ 11.95
Hummus, avocado, roasted peppers and sprouts

Buffalo Chicken Wrap _____ 11.95
Spicy buffalo chicken, lettuce, tomato, and chunky blue cheese dressing

Hot From the Grill

Hamburger _____ 11.50
Angus beef, lettuce, tomato on a brioche bun. Add american, Cheddar or swiss (+1)

Substitute Beyond Patty(v)
Chicken BLT _____ 12.50
Hot grilled chicken, avocado, bacon, lettuce and tomato on a roll.

Ruben Melt _____ 11.50
Hot pastrami, swiss, sauerkraut with mustard on rye.

Crispy Chicken Sandwich _____ 11.50
Crispy chicken, pickles, lettuce, tomato, chipotle aioli on a brioche bun.

Apps and Sides

Quesadillas

Cheese, black bean served with guac, sour cream and salsa. Add chicken (+3) _____ 11.50

Chicken tenders _____ 9.50

Fries _____ 6

Cajun Fries _____ 6

Hummus and pita chips _____ 7.50