

Meeting Date: MARCH 2026

**APPLICANT INFORMATION:**

Name of applicant(s): LEVANTO LLC

Trade name (DBA): LEVANTO

Premises address: 149 GRAND 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: NEW YORK NY 10023

Telephone #: [REDACTED] email: [REDACTED]

Landlord Name / Contact: 147-149 GRAND STREET OWNER LLC

Landlord's Telephone and Fax: [REDACTED]

**NAMES OF ALL PRINCIPAL(s):**      **NAMES / LOCATIONS OF PAST / CURRENT LICENSES HELD**

JACOPO BORGALLI

N/A

NICCOLO' CURRARINO

N/A

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

UPSCALE ITALIAN TRATTORIA

**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.)

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

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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: \_\_\_\_\_

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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:

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**PREMISES:**

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: 1920

Describe neighboring buildings: LOW RISE MIXED COMMERCIAL / RESIDENTIAL BLDGS

Zoning Designation: M1-5B

Zoning Overlay or Special Designation (applicable) \_\_\_\_\_

Block and Lot Number: 233 / LOT 15

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? \_\_\_\_\_

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: \_\_\_\_\_

**PRIOR OF PREMISES:**

What is the total licensed square footage of the premises? 2,450

If more than one floor, please specify square footage by floors: 1,450 first floor 1,000 basement

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? STAIRS

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

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

**OVERALL SEATING INFORMATION:**

Total number of tables? 20 Total table seats? 45

Total number of bars? 1 Total bar seats? 4

Total number of "other" seats? N/A please explain: \_\_\_\_\_

Total OVERALL number of seats in Premises: 49

**BARS:**

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

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: \_\_\_\_\_

\* 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:

10:44 to 12:44 AM, 12:44 to 12:44 AM, 10 to 12:30, 10:44 to 12:44, 11:44 to 12:30, 10:44 to 12:30 AM

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?) \_\_\_\_\_

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 1/2 " 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: Jacopo BORGACCI Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Email: \_\_\_\_\_

Application submitted on behalf of the applicant by:

Jacopo Borgacci  
Signature

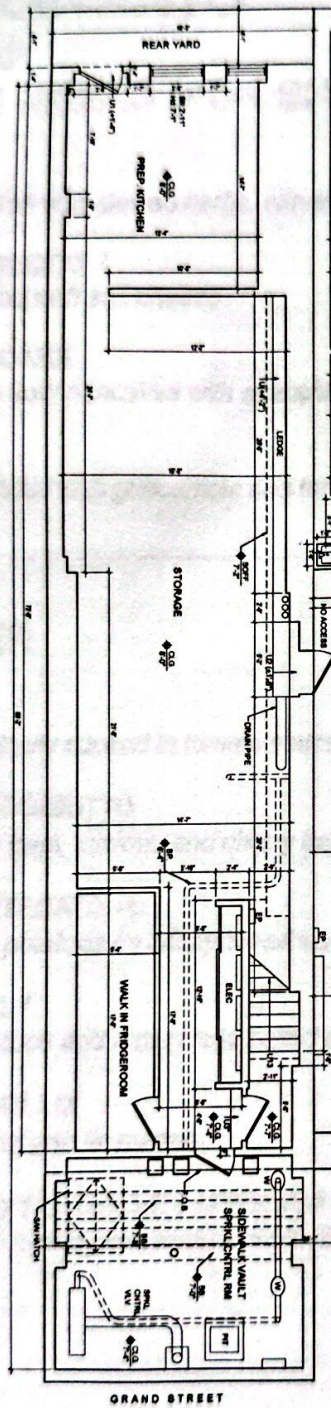
Print or Type Name \_\_\_\_\_

Title \_\_\_\_\_

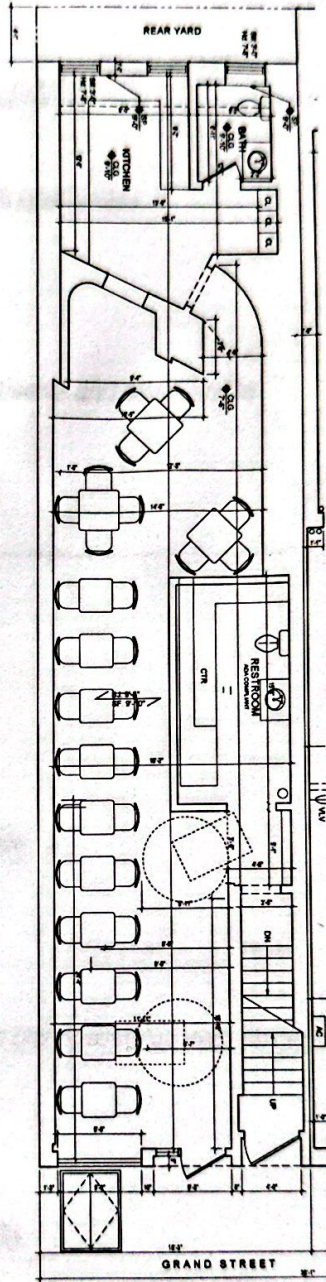
Thank you for your cooperation. Please return this questionnaire along with the other required documents as soon as you can. This will expedite your application and avoid any unnecessary delays. Use additional pages if necessary.

Donna Raftery

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



149 Grand St  
 1st Floor  
 149  
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149 Grand St  
 1st Floor  
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# 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*

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## 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*

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## **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*

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## **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*

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## 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