P&B Pesetsky & Bookman

Center For Emerging Culture, Inc. & September Hospitality Management, Inc. as MGR

d/b/a Lightning Society

Community Board SLA License Questionnaire

Pesetsky & Bookman
Applicant's Alcoholic Beverage Counsel
325 Broadway, Suite 501
New York, NY 10007
www.pb.law | (212) 513-1988 | hello@pb.law

Meeting Date: April 2026

APPLICANT INFORMATION:

Name of applicant(s):
Center for Emerging Culture Inc & September Hospitality Management Inc as MGR

Trade name (DBA):
Lightning Society

Premises address:
45 Howard Street AKA 427 Broadway, Floors 2 & 3

Cross Streets and other addresses used for building/premise:

Between Broadway and Mercer Street

CONTACT INFORMATION:

Principal(s) Name(s):
Timothy Phillips (Center For Emerging Culture Inc); Ryan Harris (September Hospitality Management Inc)

Office or Home Address: [redacted]

City, State, Zip: New York, NY 10013

Telephone #: [redacted]

Landlord Name / Contact:
The AJD Building LLC; Michael Chetrit

Landlord's Telephone and Fax: [redacted]

NAMES OF ALL PRINCIPAL(s):	NAMES / LOCATIONS OF PAST / CURRENT LICENSES HELD
Timothy Phillips	
Ryan Harris	Sirrah, 1LW12 Restaurant LLC, 1-3 Little W. 12th Street

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

A catering establishment operating as a private event space for scheduled gatherings with food and beverage service.

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

X a CATERING / CABARET Liquor License Catering Establishment Beer/Wine 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:

Museum

Is any license under the ABC Law currently active at this location? _____ yes _X_ 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 _X_ 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 _X_ Lease ___ Sub-lease ___ Binding Contract to acquire real property ___ other: _____

Type of Building: ___ Residential _X_ Commercial ___Mixed (Res/Com) ___ Other: _____

Number of floor: 5 Year Built : 1871

Describe neighboring buildings:
Mixed

Zoning Designation: M1-5/R9X; SNX

Zoning Overlay or Special Designation (applicable) N/A

Block and Lot Number: 231 / 8

Does the premise occupy more than one building, zoning lot, tax lot or more than one floor? X yes __ no
Floors 2 & 3

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 : _____
LPC has approved proposed work; already underway

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? N/A - no outdoor space

Does the premise currently have a valid Certificate of Occupancy (C of O) and all appropriate permits?

X*no ____ yes *Applied for a change in use from office (B) to eating & drinking establishment (6) - waiting for approval*

If yes, what is the maximum occupancy for the premises? 500* - see rider

If yes, what is the use group for the premises? B*

If yes, is proposed occupancy permitted? X* yes ____ no, explain : _____

*Will apply for a public assembly permit once the change of use of COO is approved

If your occupancy is 75 or greater, do you plan to apply for Public Assembly permit? X* yes ____no

Do you plan to file for changes to the Certificate of Occupancy? X yes _____ no
(if yes, please provide copy of application to the NYC DOB) *Applied for a change in use from office to eating & drinking establishment - waiting for approval*

Will the façade or signage be changed from what currently exist at the premise? ____ no X yes

(if yes, please describe: Exterior signage on ground floor building door windows, and a branded canvas awning over the street elevator on Howard Street

INTERIOR OF PREMISES:

What is the total licensed square footage of the premises? Approx. 5,000 sq. ft. (including stairwells, storage, bathrooms, pantries, etc.)

If more than one floor, please specify square footage by floors: Floor 2: approx. 2,500 sq. ft. ; Floor 3: approx. 2,500 sq. ft.

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 x2 and elevator

How many entrances are there? 2 How many exits? 2 How many bathrooms ? 7

Is there access to other parts of the building? ___ no _X_ yes, explain: See attached diagrams

OVERALL SEATING INFORMATION:

This is a Catering Establishment, and the number of tables and seats will vary per event. The numbers indicated are the maximum number for any given event

Total number of tables? 20* Total table seats? 150*

Total number of bars? 2 Total bar seats? 6

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

Total OVERALL number of seats in Premises : 156*

BARS:

How many *stand-up bars / bar seats are being applied for on the premises? Bars 1 Seats 6

How many service bars are being applied for on the premises? 1

Any food counters? X no ___ yes, describe : _____

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 _X_Other: Catering Establishment

What are the Hours of Operation?

Regular Operations: *See Rider

Sunday:	Monday:	Tuesday:	Wednesday:	Thursday:	Friday:	Saturday:
7:30AM to 10:30PM	7:30AM to 10:30PM	7:30AM to 10:30PM	7:30AM to 10:30PM	7:30AM to 10:30PM	7:30AM to 12AM	7:30AM to 12AM

Will the business employ a manager? ___ no _X_ yes, name / experience if known : _____

Will there be security personnel? ___ no _X_ yes(if yes, what nights and how many?) 2-4 on weekends; additional security, as needed, for special events

Do you have or plan to install French doors, accordion doors or windows that open? _X_ no ___ yes

If yes, please describe : N/A

Will you have TV's ? _X_ no ___ yes (how many?) _____

Type of MUSIC / ENTERTAINMENT: _X_ Live Music _X_ Live DJ ___Juke Box _X_ Ipod / CDs ___none

Expected Volume level: _X_ Background (quiet) ___ Entertainment level _X_ Amplified Music
(check all that apply)

Do you have or plan to install soundproofing? ___no _X_ yes

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

Please describe your sound system and sound proofing: See attached sound plan

Will you be permitting: ___ promoted events ___ scheduled performances ___ outside promoters

___ any events at which a cover fee is charged? _X_ private parties

Do you have plans to manage or address vehicular traffic and crowd control on the sidewalk caused by your establishment? ___ no _X_ yes (if yes, please attach plans) See attached traffic plan

Will you be utilizing ___ ropes ___ movable barriers ___other outside equipment (describe) ____

See rider*

Are your premises within 200 feet of any school, church or place of worship? _X_ 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: Timothy Phillips Phone: 646-267-9344

Address: [redacted]

Email : [redacted]

Application submitted on
behalf of the applicant by:

_____
Signature

Print or Type Name Timothy Phillips

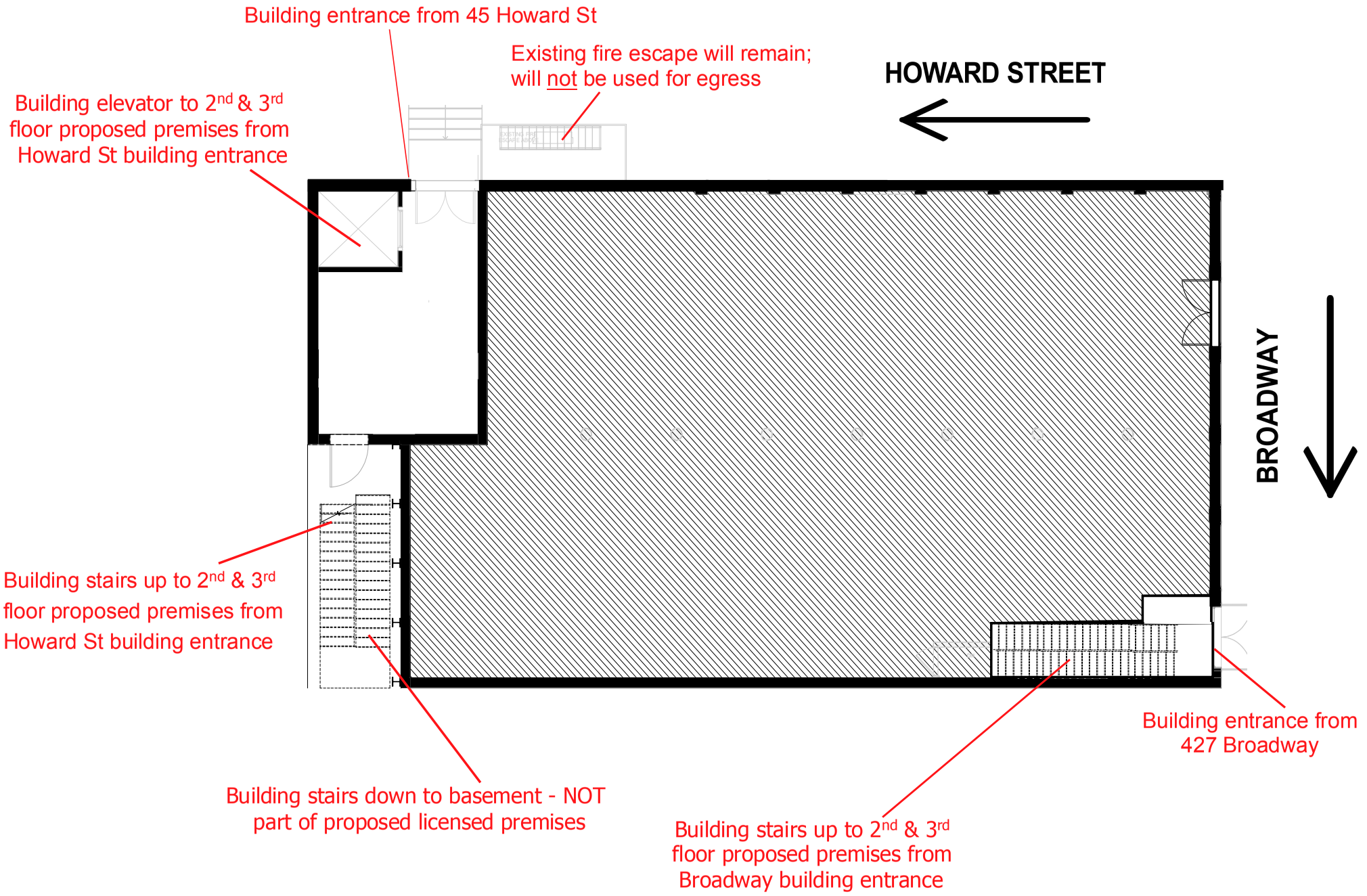
Title President

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

Special Events Rider

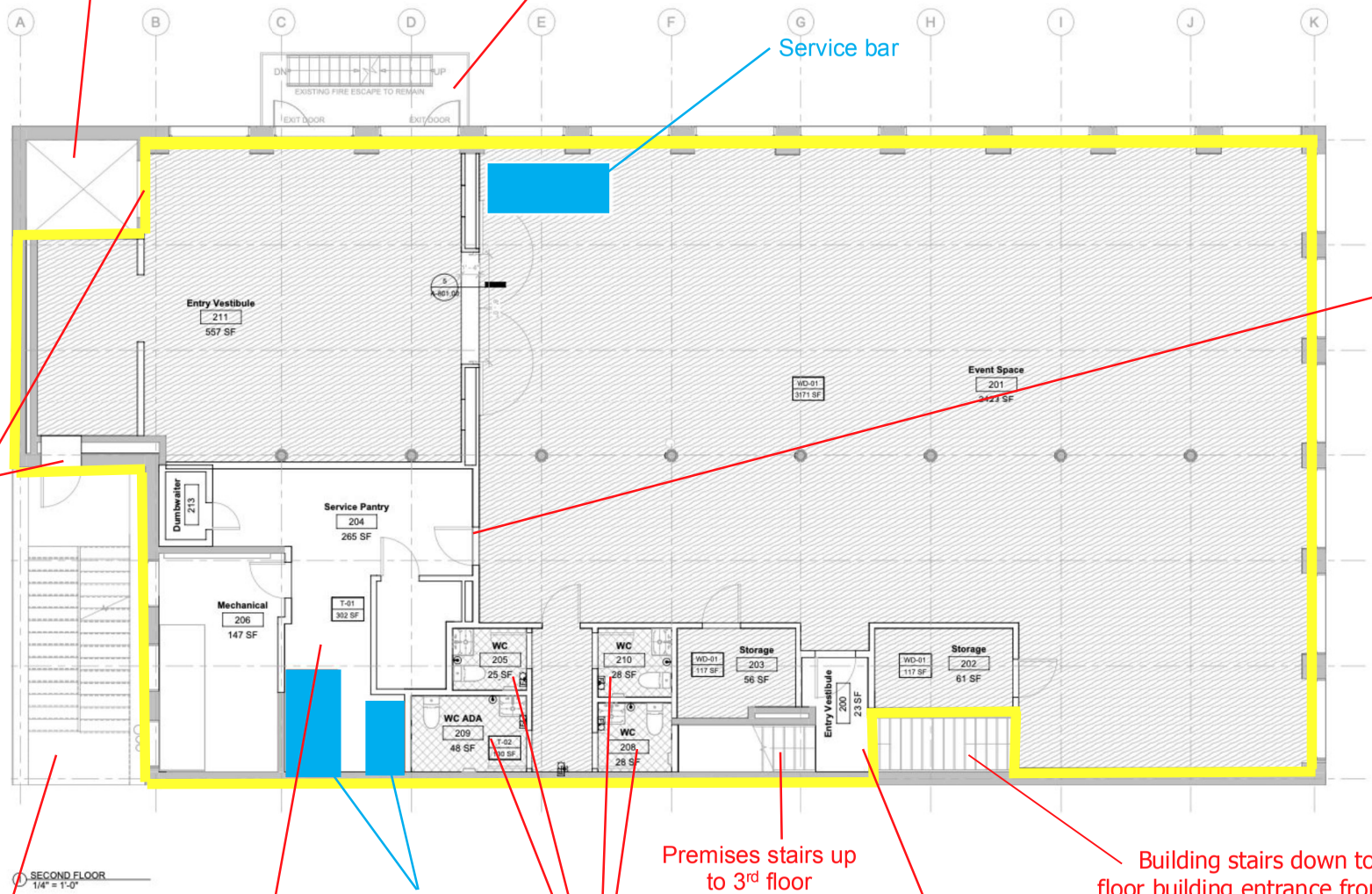
	Regular Operations	Special Events *No more than 10 per year*
Hours	7:30AM – 10:30PM, Sunday – Thursday 7:30AM – 12AM, Friday + Saturday	7:30AM – 12AM, Sunday – Thursday 7:30AM – 2AM, Friday + Saturday
Max Occ.	400	500
Wait Lines	No outdoor wait lines permitted past 6PM	Outdoor wait lines permitted past 6PM
Security	2-4 security personnel on weekends	Additional security personnel, as needed (est. 6-10)



Center for Emerging Culture Inc

Ground Floor

Center for Emerging Culture Inc
Second Floor



SECOND FLOOR
1/4" = 1'-0"

Building elevator

Existing fire escape will remain; will not be used for egress

Service bar

Employee access to food prep area, only; no patron access

Entrance to 2nd floor proposed premises from Howard St building entrance

Premises stairs up to 3rd floor

Building stairs down to ground floor building entrance from Broadway

Building stairs up to 3rd floor and down to ground floor building entrance from Howard St

Food prep area

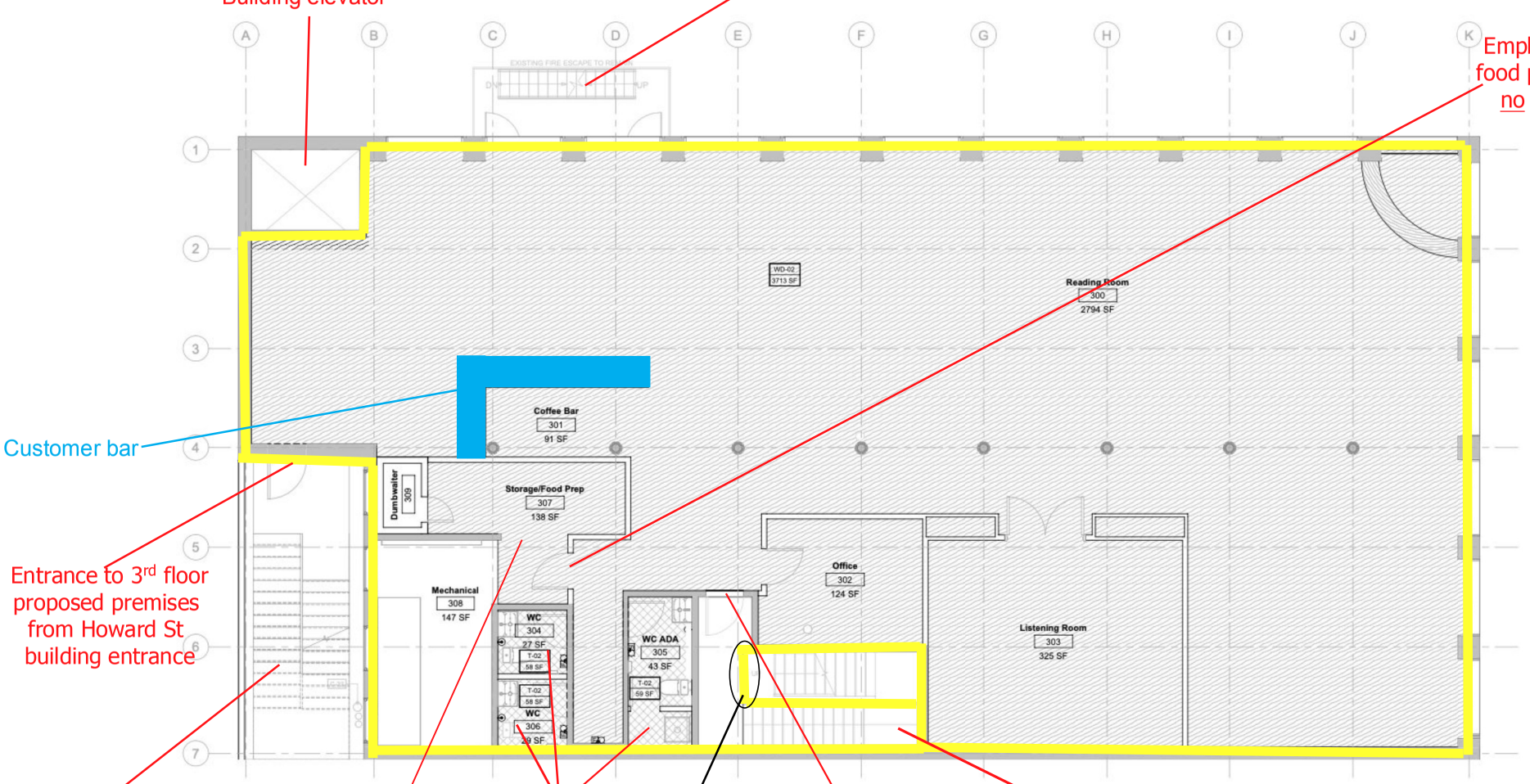
Alcohol storage

Bathrooms

Entrance to 2nd floor proposed premises from Broadway building entrance

Center for Emerging Culture Inc

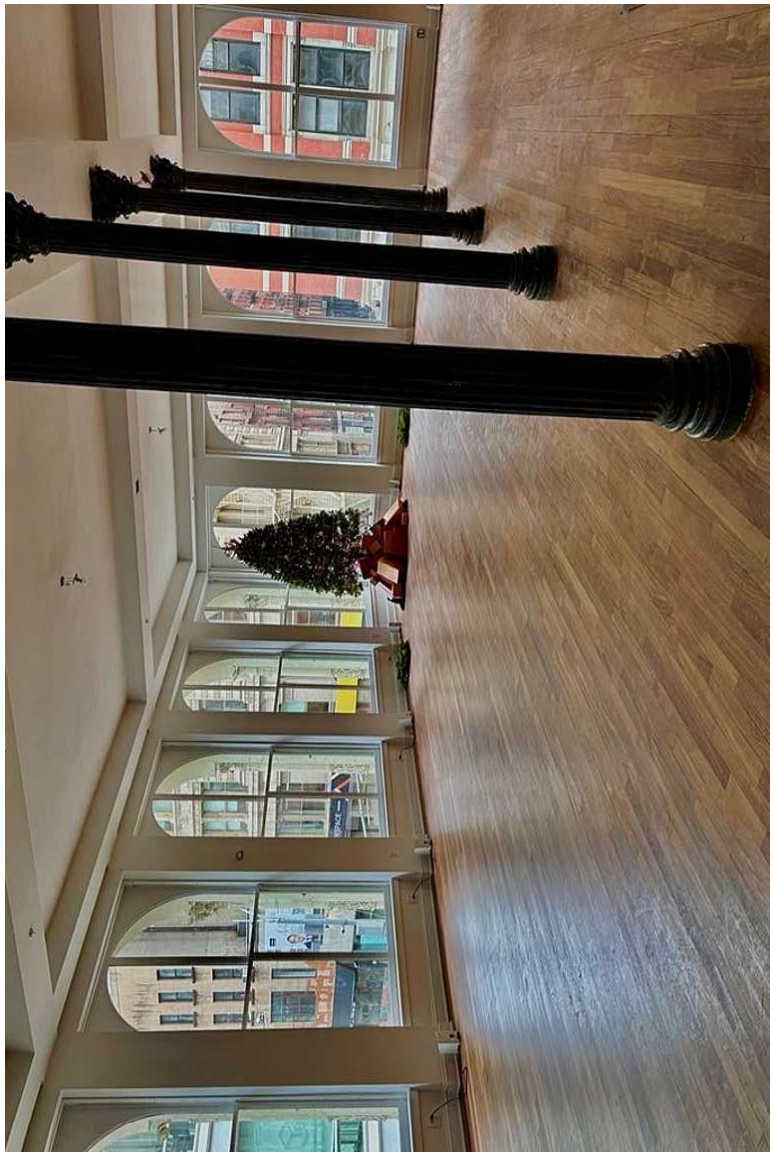
Third Floor

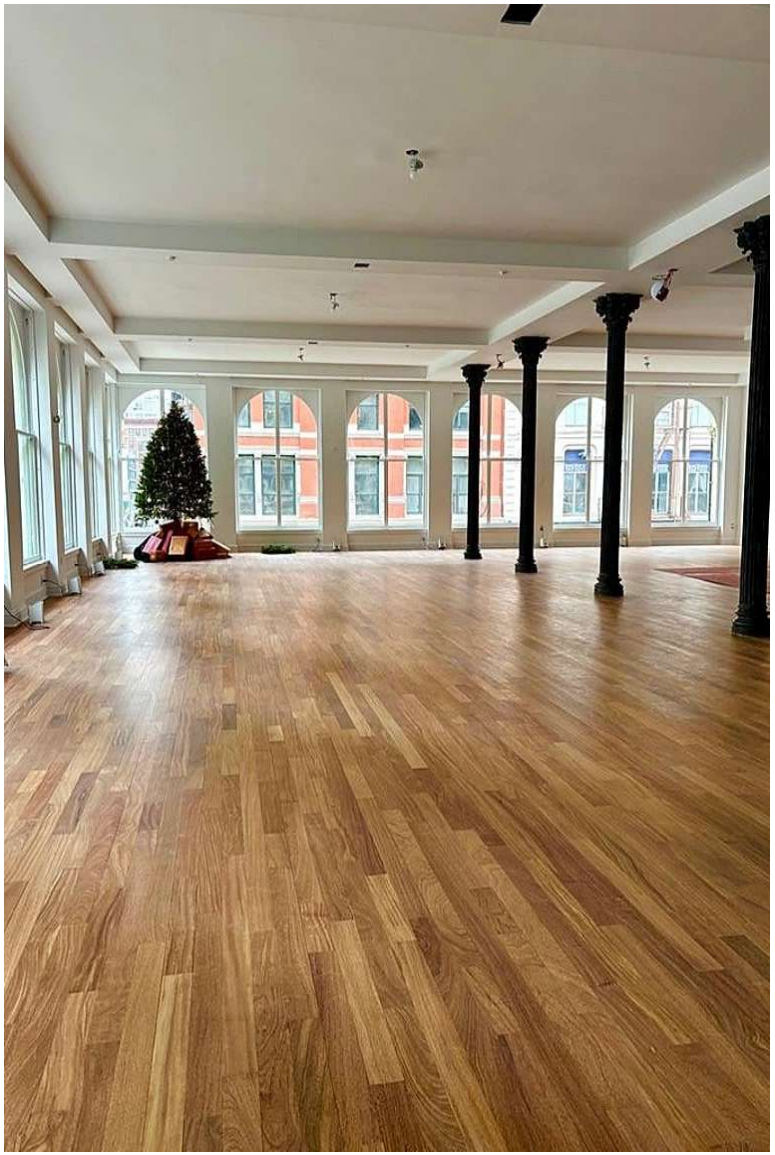


Proposed Premises - 2nd and 3rd Floors

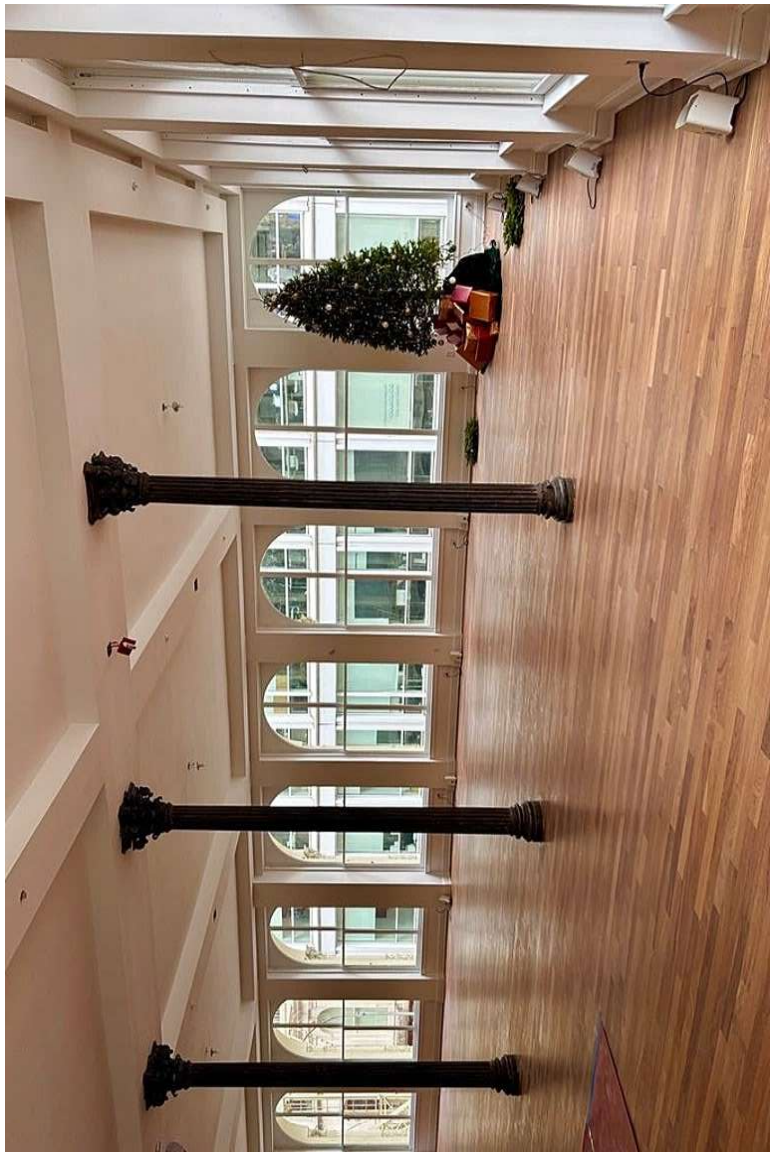
Building Entrance from 45 Howard Street

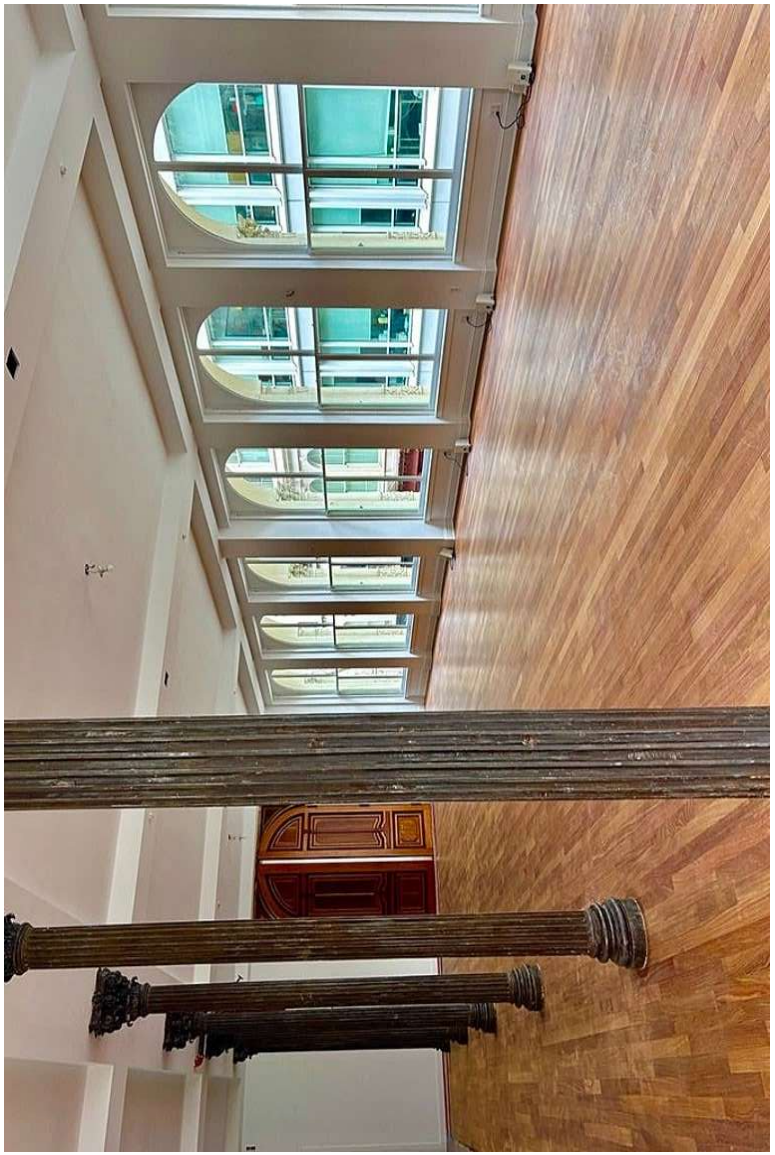
Building Entrance from 427 Broadway



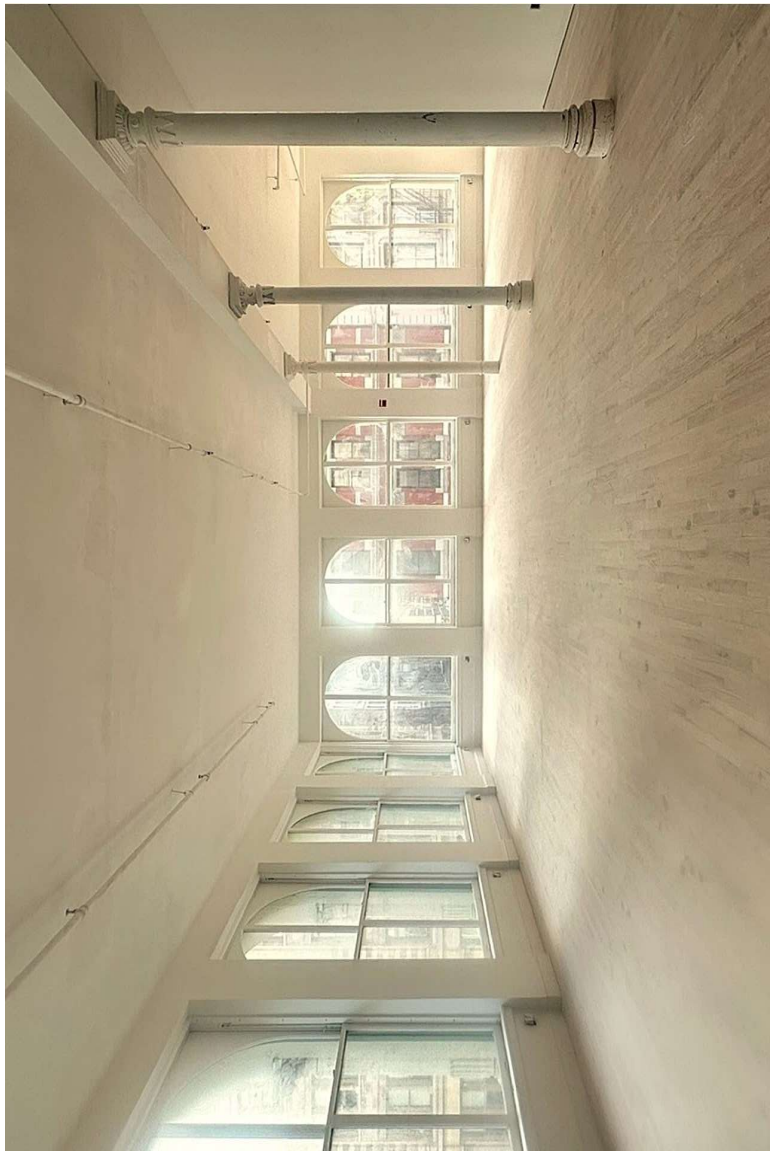


2nd Floor





2nd Floor Cont.



3rd Floor

MENU

DIPS

- ***Tzatziki*** *– pita, olives, crudités*
- ***Guacamole*** *– taro chips*

SMALLS

- ***Shishito Peppers*** *– miso glaze – 12*
- ***Buffalo Chicken or Cauliflower*** *– 16 | 12*
- ***Crispy Brussels Sprouts*** *– 14*
- ***Burrata*** *– tomato, basil (v) – 18*

SALADS *(add vegan chicken 10 | chicken 10 | salmon 10)*

- ***Market Greens*** *– crispy onions, carrots, chia seeds – 17*
- ***Ahi Tuna Poke Bowl*** *– avocado, cucumber, fresno, jasmine brown rice – 22*

SANDWICHES

- ***Southern Fried Chicken Sandwich*** *– cabbage slaw, pickle, Calabrian chili aioli – 20*
- ***Cheeseburger*** *– cheddar, mustard, iceberg, tomato, pickles, fries – 21*
- ***Vegan Burger*** *– lettuce, tomato, pickles, mustard mayo, sweet potato fries (pb) – 22*

WOOD-FIRED PIZZA

- ***Buffalo Mozzarella*** *– tomato, basil, oregano – 22*
- ***Mushroom*** *– goat cheese, pearl onion, dill (v) – 23*
- ***Salami*** *– tomato, mozzarella, mushroom – 24*
- ***Plant-Based*** *– artichoke, olive, hemp ricotta (pb) – 21*