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COMMUNITY BOARD No. 2, MANHATTAN

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Greenwich Village ✦ Little Italy ✦ SoHo ✦ NoHo ✦ Hudson Square ✦ Chinatown ✦ Gansevoort Market

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: _____

APPLICANT INFORMATION:

Name of applicant(s): Manor Estate Wines USA LLC

Trade name (DBA): TBC

Premises address: 61 Carmine Street, NY, NY, 10014

Cross Streets and other addresses used for building/premise:

CONTACT INFORMATION:

Principal(s) Name(s): Sharleen Ravishankar

Office or Home Address: _____

City, State, Zip: New York, NY, 10014

Telephone #: _____

Landlord Name / Contact: Carmine Tierra LLC

Landlord's Telephone and Fax: _____

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

N/A

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

A small, neighborhood-focused establishment operating as a morning café offering coffee and pastries, including croissants and similar items, and transitioning into a wine bar and tasting room in the afternoon and evening. The concept will showcase boutique wines and a curated selection of boutique producers from around the world. The establishment will provide a seated, hospitality-driven experience with table service, focusing on wine education and guided tastings. A menu of small plates and light fare—including cheese and charcuterie, seasonal appetizers, and simple prepared dishes—will be available throughout service to complement the wine program. The atmosphere will be relaxed and low-volume, catering to local residents and professionals, and not operated as a late-night or high-volume bar.

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:

Personal office space (with limited use by the Owner of the building)

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: _____

Type of Building: Residential Commercial Mixed (Res/Com) Other: _____

Number of floor: Ground Year Built : 1900

Describe neighboring buildings: Restaurants, bars, shops, residential, services ie: laundromatte

Zoning Designation: C2-6

Zoning Overlay or Special Designation (applicable) _____

Block and Lot Number: 582 / 26

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 sidewalk

What is the proposed Occupancy? 40

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? _____

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: Minor façade improvements including discreet signage and soft lighting, with aesthetic upgrades designed to be consistent with the existing neighborhood character.
No significant structural changes are proposed.

INTERIOR OF PREMISES:

What is the total licensed square footage of the premises? 300sf

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?
Approximately 100-120 sq ft (subject to DOT approval)

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? no yes, explain: _____

OVERALL SEATING INFORMATION:

Total number of tables? ~10 Total table seats? Approximately 18-24 indoors

Total number of bars? 1 Total bar seats? Approximately 8-12

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

Total OVERALL number of seats in Premises : Approximately 26-36

BARS:

How many * stand-up bars / bar seats are being applied for on the premises? Bars 1 as listed Seats ~10-15 as listed

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

Any food counters? no yes, describe : Food preparation and service counter for small plates

For Alterations and Upgrades:

Please describe all current and existing bars / bar seats and specific changes: _____

New bar and seating layout to support a small, seated wine bar with table service.

* 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: _____

*Cafe/Wine bar and tasting room with small plates service

What are the Hours of Operation?

Sunday: Monday: Tuesday: Wednesday: Thursday: Friday: Saturday:
9am to 12am 8am to 12am 8am to 12am 8am to 12am 8am to 12am 8am to 1am 9am to 1am

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: _____

Low-volume background music only; no amplified sound, DJs, or live music.

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

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

*Limited to small, pre-arranged, seated private events such as wine tastings or birthday celebration or corporate gatherings, buy outs of the space; no promoted events, DJs, or standing receptions.

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: _____

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: Sharleen Ravishankar Phone: [REDACTED]

Address: [REDACTED]

Email : [REDACTED]

Application submitted on behalf of the applicant by:

Signature

Print or Type Name Sharleen Ravishankar

Title Owner

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

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Donna Raftery, Second Vice Chair



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COMMUNITY BOARD 2 APPLICATION FOR A STATE LIQUOR AUTHORITY LICENSE ADDENDUM FOR OUTDOOR SEATING

For a Liquor License Application that includes any outdoor areas, please complete the following:

- Submit a diagram of outdoor seating indicating length and width of area(s) and location of all tables and chairs. Include all obstructions (trees, fire hydrants, proximity to bus stops, bike racks, signs, etc.).
- Submit photos of the premises where the sidewalk café and/or roadbed will be located. Required photos show one frontal, one left and one right side view of proposed sidewalk café and/or roadbed.
 - Photos must show complete sidewalk and/or roadway area where sidewalk café and/or roadbed will be including views to curb and neighboring properties.
 - For rear yard, show photos of yard and surrounding area, including upper view of adjacent buildings.

Name of Applicant: Manor Estate Wines USA LLC trading as (TBC)

Address of Premises: 61 Carmine Street, NY, NY, 10014

Sidewalk café will have no more than (If premises is located on a corner please indicate for both streets):

3 tables and 6 seats on Carmine Street

 tables and seats on Street

Hours of sidewalk café: 8am to 10pm.

Describe any obstructions (trees, fire hydrant, proximity to bus stop, etc):

Fire hydrant located in the roadway approximately 15 feet from the premises frontage; outdoor seating will be positioned to maintain all required clearances and pedestrian path requirements.

Roadbed will have no more than (If premises is located on a corner please indicate for both streets):

 tables and seats on Street

 tables and seats on Street

Hours of roadbed: to .

Describe any obstructions (trees, fire hydrant, proximity to bus stop, etc):

Rear yard / Rooftop (circle) will have no more than tables and seats

Hours of rear yard / rooftop: to .

Does seating extend beyond the business frontage? No Yes

Will outdoor dining structures **on the sidewalk** be enclosed on three (3) or more sides? No Yes

Will outdoor dining structures **on the roadbed** be enclosed on three (3) or more sides? No Yes

Is there any outdoor music, speakers or TVs? No Yes, please describe:

Will heating elements be used? No Yes, please describe: If required.