

HELBRAUN || LEVEY

PRINCE EATERY LLC
199 PRINCE STREET
NEW YORK, NY 10012

MANHATTAN COMMUNITY BOARD 2

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COMMUNITY BOARD No. 2, MANHATTAN

3 WASHINGTON SQUARE VILLAGE

NEW YORK, NY 10012-1899

www.cb2manhattan.org

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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 and return to the Community Board 2 office by fax or mail to arrive at least **5 business days** before the Committee meeting. In addition, bring **10 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 following months 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 within 500 ft. of this location including Beer and Wine.
2. Floor plans of the premise, including all tables and chairs and kitchen lay out to be licensed. Please also include any schematics for sidewalk café, backyard garden space and/or rooftop areas if applicable.
3. Provide any plans filed or to be filed with the Buildings Department.
4. Proposed menu, if applicable.
5. Certificate of Occupancy or Letter of No Objection for the premises.
6. Letter of Understanding or Letter of Intent from the Landlord.
7. Provide proof of community outreach with signatures or letters from Residential Tenants at location and from surrounding buildings. (i.e. a letter from the neighborhood block association or petition in support.)
8. A copy of your NYS Liquor Authority application as it will be submitted to the SLA. (excluding financial information)

APPLICANT INFORMATION:

Name of applicant(s):

PRINCE EATERY LLC

Trade name (DBA):

ROMY

Premises address:

199 PRINCE STREET, NEW YORK, NY 10012

Cross Streets and other addresses used for building/premise:

SULLIVAN & MACDOUGAL

CONTACT INFORMATION:

Principal(s) Name(s):

COBI LEVY

Office or Home Address: 199 PRINCE STREET

City, State, Zip: NEW YORK, NY 10012

Telephone #:

[REDACTED]

Landlord Name / Contact:

PRINCE STREET INVESTMENT COMPANY, LLC

Landlord's Telephone and Fax: --

NAMES OF ALL PRINCIPAL(s):

COBI LEVY

NAMES / LOCATIONS OF PAST / CURRENT LICENSES HELD

*PLEASE SEE PRINCIPAL LICENSE HISTORY ATTACHED

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

NEIGHBORHOOD STEAKHOUSE RESTAURANT

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.)

THIS IS A TRANSFER APPLICATION WITH THE LICENSEE PRINCIPESSA SOHO LLC (#0340-22-114412).

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

RESTAURANT LICENSED FOR FULL LIQUOR UNDER PRINCIPESSA SOHO LLC (#0340-22-114412).

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: _____

PLEASE SEE NOTES ABOVE.

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:

PLEASE SEE NOTES ABOVE.

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 : 1906

Describe neighboring buildings:

MIXED-USE (COMMERCIAL & RESIDENTIAL)

Zoning Designation: R7-2

Zoning Overlay or Special Designation (applicable) N/A

Block and Lot Number: 518 / 7502

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 : PENDING - UPDATED SIGNAGE NEEDED

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 N/A

What is the proposed Occupancy? 74

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

☐ no ☒ yes *PLEASE SEE DOB SCREENSHOT ATTACHED FOR PREMISES LNO*

If yes, what is the maximum occupancy for the premises? 74

If yes, what is the use group for the premises? USE GROUP 6

If yes, is proposed occupancy permitted? ☒ yes ☐ no, explain : N/A

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

(if yes, please describe: SIGNAGE TO BE UPDATED WITH APPLICANT'S TRADE NAME

INTERIOR OF PREMISES:

What is the total licensed square footage of the premises? 600 SQ FT

If more than one floor, please specify square footage by floors: GROUND FLOOR ONLY; 600 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? N/A GROUND FLOOR ONLY

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

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

OVERALL SEATING INFORMATION:

PLEASE NOTE - THERE IS NOT A CUSTOMER BAR IN THE TRADITIONAL SENSE. PLEASE SEE DIAGRAM ATTACHED

Total number of tables? 13 Total table seats? 50

Total number of bars? 1 Total bar seats? 0

Total number of "other" seats? 0 please explain : N/A

Total OVERALL number of seats in Premises : 50

BARS:

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

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

Any food counters? ☒ no yes, describe : N/A

For Alterations and Upgrades:

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

N/A, THIS IS NOT AN ALTERATION

* 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:
5PM to 1AM 5PM to 1AM 5PM to 1AM 5PM to 1AM 5PM to 1AM 5PM to 1AM 5PM to 1AM

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

Will there be security personnel? ☒ no ☐ yes(if yes, what nights and how many?) N/A

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?) N/A

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)

NA, BACKGROUND MUSIC ONLY

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: _____
STANDARD RESTAURANT SPEAKERS THROUGHOUT PREMISES

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

☐ any events at which a cover fee is charged? ☒ private parties (ON OCCASSION)

APPROX 10-20 PER YEAR

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) PLEASE SEE NOTES BELOW

Will you be utilizing ☐ ropes ☐ movable barriers ☐ other outside equipment (describe) _____

MOST PATRONS WILL ARRIVE ON FOOT AND PUBLIC TRANSPORTATION. NO WAIT LINES WILL BE FORMED OUTSIDE PREMISES

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: N/A Distance: _____

Name of School / Church: _____

Address: _____ Distance: _____

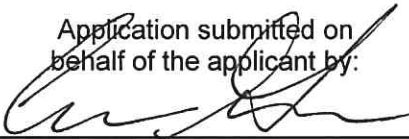
Please provide contact information for Residents / Community Board and confirm that if complaints are made you will address it immediately.

Contact Person: COBI LEVY Phone: [REDACTED]

Address: 199 PRINCE STREET, NEW YORK, NY 10012

Email : [REDACTED]

Application submitted on
behalf of the applicant by:



Signature

Print or Type Name HELBRAUN & LEVEY LLP C/O ADRIANNA GOLOVATII

Title REPRESENTATIVE

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
Carter Booth, Co-Chair
Robert Ely, Co-Chair

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APPLICANT LICENSE HISTORY

Business Name	Business Address	
515 W 18TH STREET EATERY LLC	515 W 18TH STREET, NEW YORK, NY 10010	
Type of Interest	Date Interest Began	License Serial Number
OWNER	2022	0340-22-112054

Business Name	Business Address	
PRINKIPAS LLC	210 6TH AVENUE UNIT 1F, NEW YORK, NY 10012	
Type of Interest	Date Interest Began	License Serial Number
OWNER	2019	0340-23-137082

Name of Applicant	Address of Premises	
ADINA LLC	22 EAST 13TH STREET, NEW YORK, NY 10003	
Disposition	Date of Filing	License Serial Number
INACTIVE	01/8/2019	0340-21-119893

PRINCESSA SOHO LLC
ACTIVE

199 PRINCE STREET, NEW YORK, NY 10012
#0340-22-114412

MENU

RAW BAR

Tuna Tartar
*pineapple,
avocado, shallots*
24

Salmon Belly
*pear, wasabi,
sesame*
26

Yellowtail
*charred lime, pine nuts,
ginger*
24

STARTERS

Caviar Pancake
smoked sour cream, chives 20

Steak Tartar "GG"
foie, horseradish 34

Grilled Tiger Prawns
chili dusted 22

Corn Ravioli
brown butter, parsley 24

SALADS

Caesar
*little gem, castelfranco,
milk bread croutons* 18

Grilled Vegetables
*zucchini, corn, squash
asparagus, peppers* 20

Annabel
*hearts of palm, cucumber, avocado,
tomatoes, crispy shallots* 28

MAIN COURSES

the Lobster
herbs, lemon butter 44

Grilled King Salmon
miso cured 36

Roast Chicken
cherry bomb sauce 33

Romy Burger
bacon, onion jam, gruyere 28

Iberico Ribs
smoked peach glaze 46

New York Strip
wasabi chimichurri 72

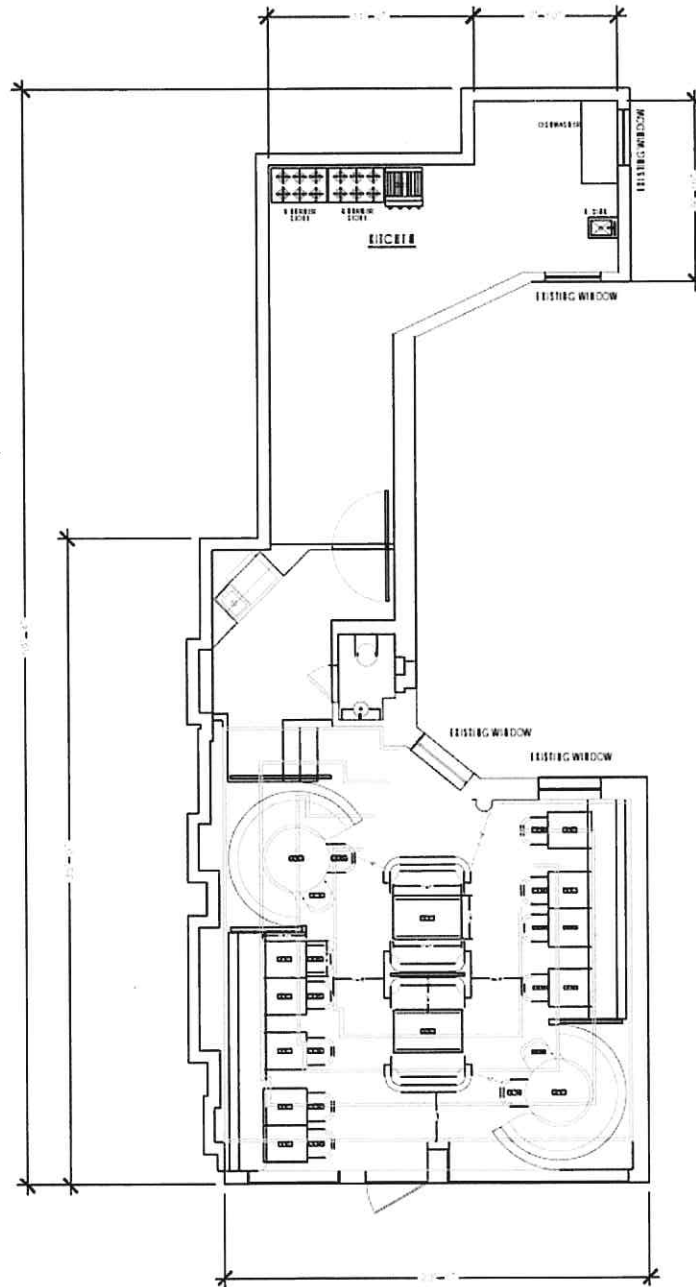
Wagyu Porterhouse
*30 day dry-aged
snake river farms mp*

SIDES

Thick Cut Fries 12 A New Potato 14 Immaculate Broccoli 14

Maple Bacon Cabbage Wedge 14 BBQ Mushrooms 16 Grilled Asparagus 16

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