

Meeting Date: _____

APPLICANT INFORMATION:

Name of applicant(s): _____
11 Howard St. Leaseco LLC

Trade name (DBA): _____
11 Howard Hotel; The Lounge; The Lobby

Premises address: _____
11 Howard Street, New York, NY 10013

Cross Streets and other addresses used for building/premise: _____
Howard Street and Lafayette Street (138 Lafayette Street)

CONTACT INFORMATION:

Principal(s) Name(s): _____
Philippe Zrihen

Office or Home Address: _____

City, State, Zip: _____

Telephone #: _____ email : _____

Landlord Name / Contact: _____
CRI 11 Howard Street LLC c/o DLA Piper LLP (US)

Landlord's Telephone and Fax: _____

NAMES OF ALL PRINCIPAL(s):	NAMES / LOCATIONS OF PAST / CURRENT LICENSES HELD
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See Ennismore Overview	See Ennismore Overview
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_____	_____
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_____	_____
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Briefly describe the proposed operation (i.e. "We are a family restaurant that will focus on..."):

Ennismore, an experienced international hotel and hospitality operator, will assume operation of 11 Howard, including its lobby bar and existing food and beverage spaces. Ennismore intends to maintain the hotel's established character and existing hours of operation while bringing the premises under Ennismore's high standards of hospitality, management, service, and guest experience.

The existing lounge space currently will be operated under Ennismore's direction as a refined restaurant and lounge, with an emphasis on food and beverage service, comfortable seating, conversation, and a sophisticated hotel-lounge atmosphere. While Ennismore intends to retain the existing approved hours, its operation of the lounge will reflect Ennismore's hospitality-focused approach and will be designed to complement the hotel and surrounding neighborhood.

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:

Hotel

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: 10/31/2026

Soho Hotel Owner, LLC & Soho Hotel Manager LLC / Serial #: 1279933

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:

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: ☐ 1-14 _____ Year Built : 1961

Describe neighboring buildings:

Mixed use - commercial & residential

Zoning Designation: M1-5/R10

Zoning Overlay or Special Designation (applicable) R-1 -Residential, Hotels, Dormitories

Block and Lot Number: 209 / 19

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 : n/a

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 Terrace Suite on 12th floor used for limited private events

What is the proposed Occupancy? up to 70

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? 609

If yes, what is the use group for the premises? Hotel, restaurant and lounge

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: _____

INTERIOR OF PREMISES:

What is the total licensed square footage of the premises? 112,900 sq. ft.

If more than one floor, please specify square footage by floors: See Property Description/Floor Plan

If there is a sidewalk café, rear yard, rooftop, or outside space, what is the square footage of the area?

Terrace Suite on 12th Floor, limited use for private events (until 1:00am)

If more than one floor, what is the access between floors? Stairs and Elevator

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

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

OVERALL SEATING INFORMATION:

Total number of tables? 22 Total table seats? 100

Total number of bars? 1 Total bar seats? 13

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

Total OVERALL number of seats in Premises : 113

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? 1

Any food counters? ☒ no ☐ yes, describe : _____

For Alterations and Upgrades:

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

n/a	
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* 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 x Hotel Other:

What are the Hours of Operation?

*Note: Terrace closing @ 1:00am if not room guest closing @ 4:00am

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

6:00am to 4:00am 6:00am to 4:00am 6:00am to 4:00am 6:00am to 4:00am 6:00am to 4:00am 6:00am to 4:00am 6:00am to 4:00am

Will the business employ a manager? ☐ no ☒ yes, name / experience if known : Ennismore trained Manager

Will there be security personnel? ☐ no ☒ yes(if yes, what nights and how many?) 4 (Thurs-Saturday)

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?) Within hotel rooms

Type of MUSIC / ENTERTAINMENT: ☒ ^{*(acoustic/jazz)} 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: Existing sound system to remain in place

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)*Valet Service

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: _____ Phone: _____

Address: _____

Email : _____

Application submitted on
behalf of the applicant by:

Signed by:  _____
5CAC0A3BEB05406... Signature

Phil Zrihen

Print or Type Name _____

Title Head of Americas _____

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.

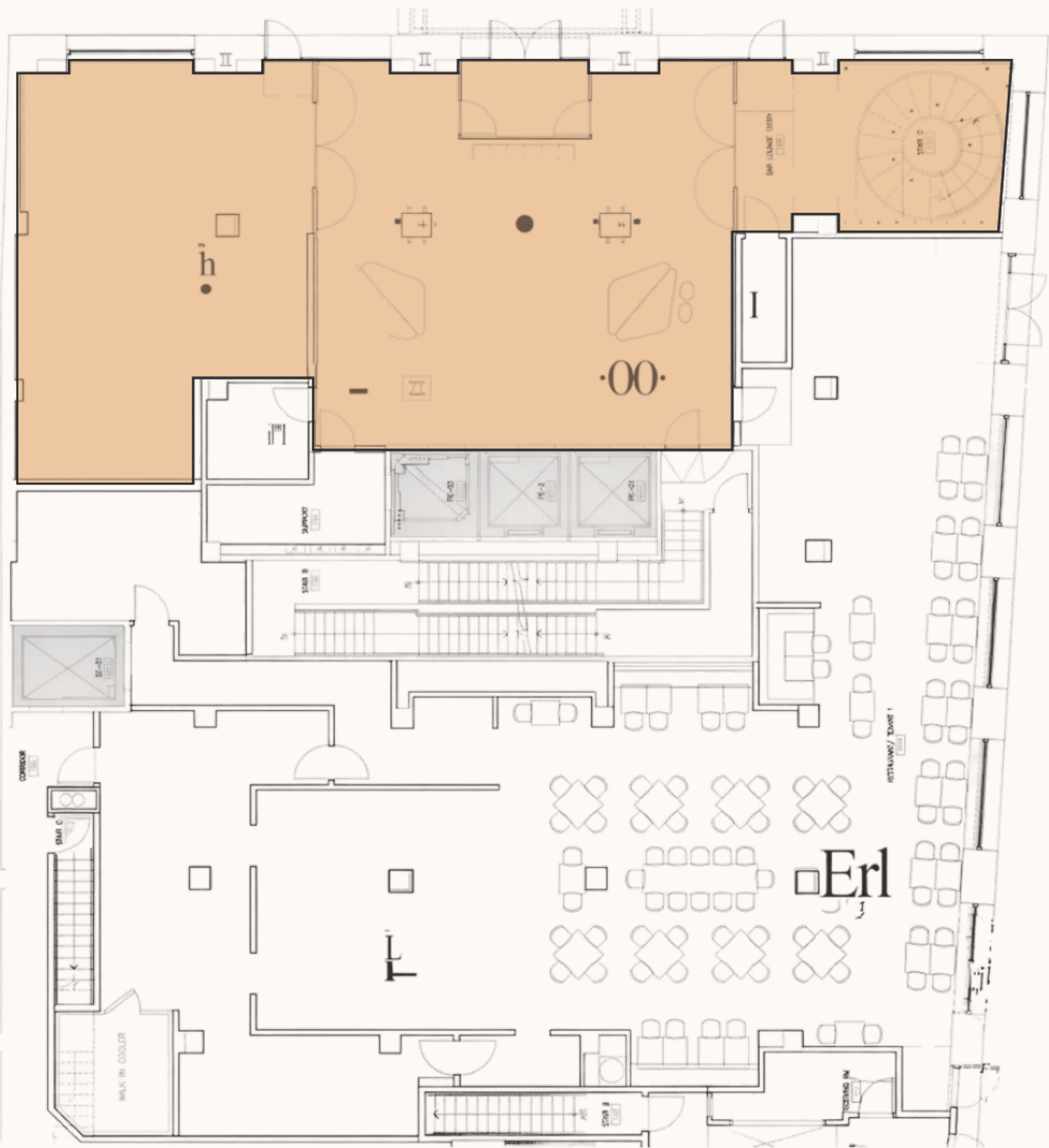


Community Board 2,
Manhattan SLA Licensing
Committee Donna Raftery, Chair

Lower levels programming - option 1

First (ground) floor

Lower lobby incorporating existing cafe space

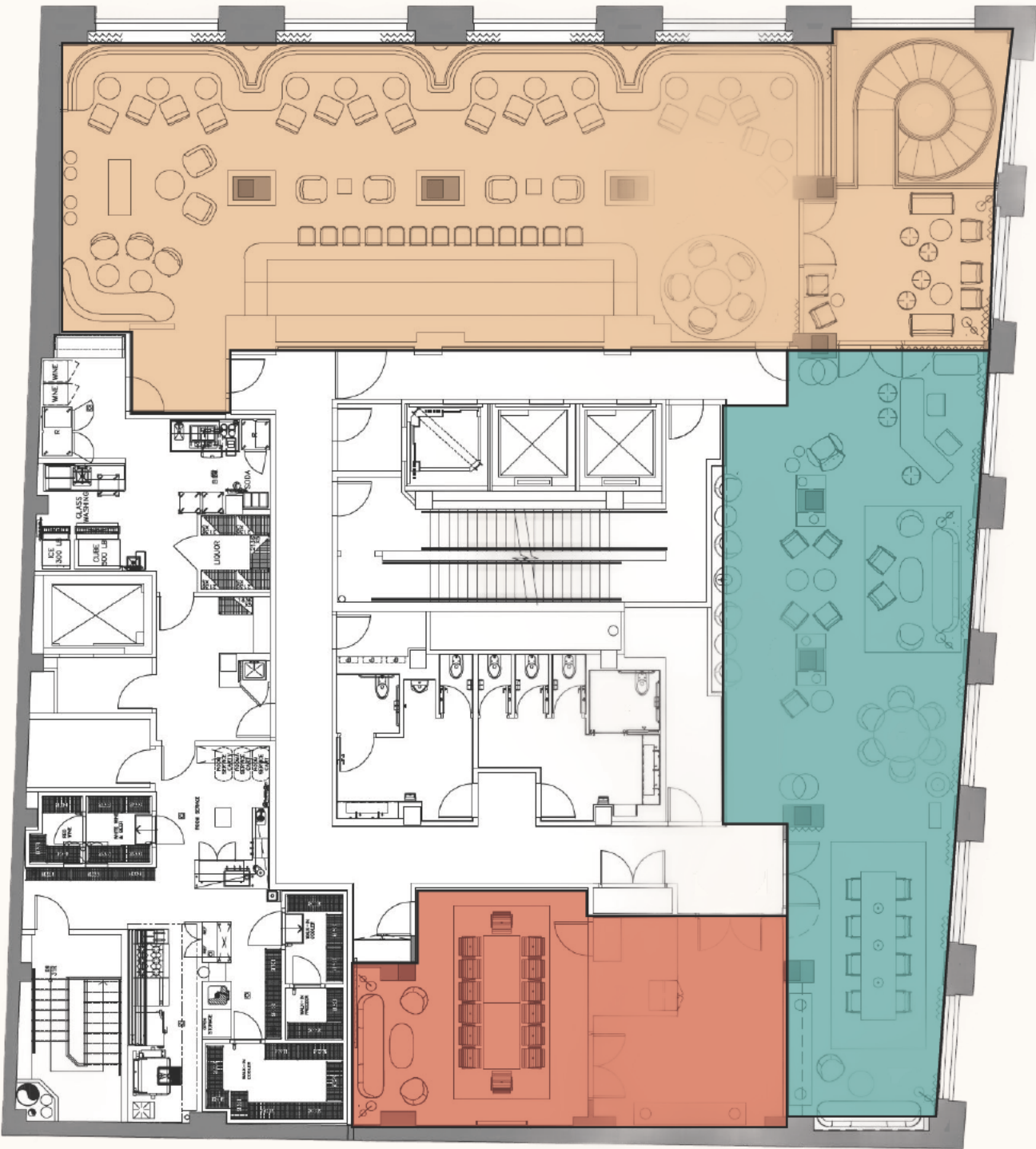


Second floor

Upper lobby incorporating existing bar space

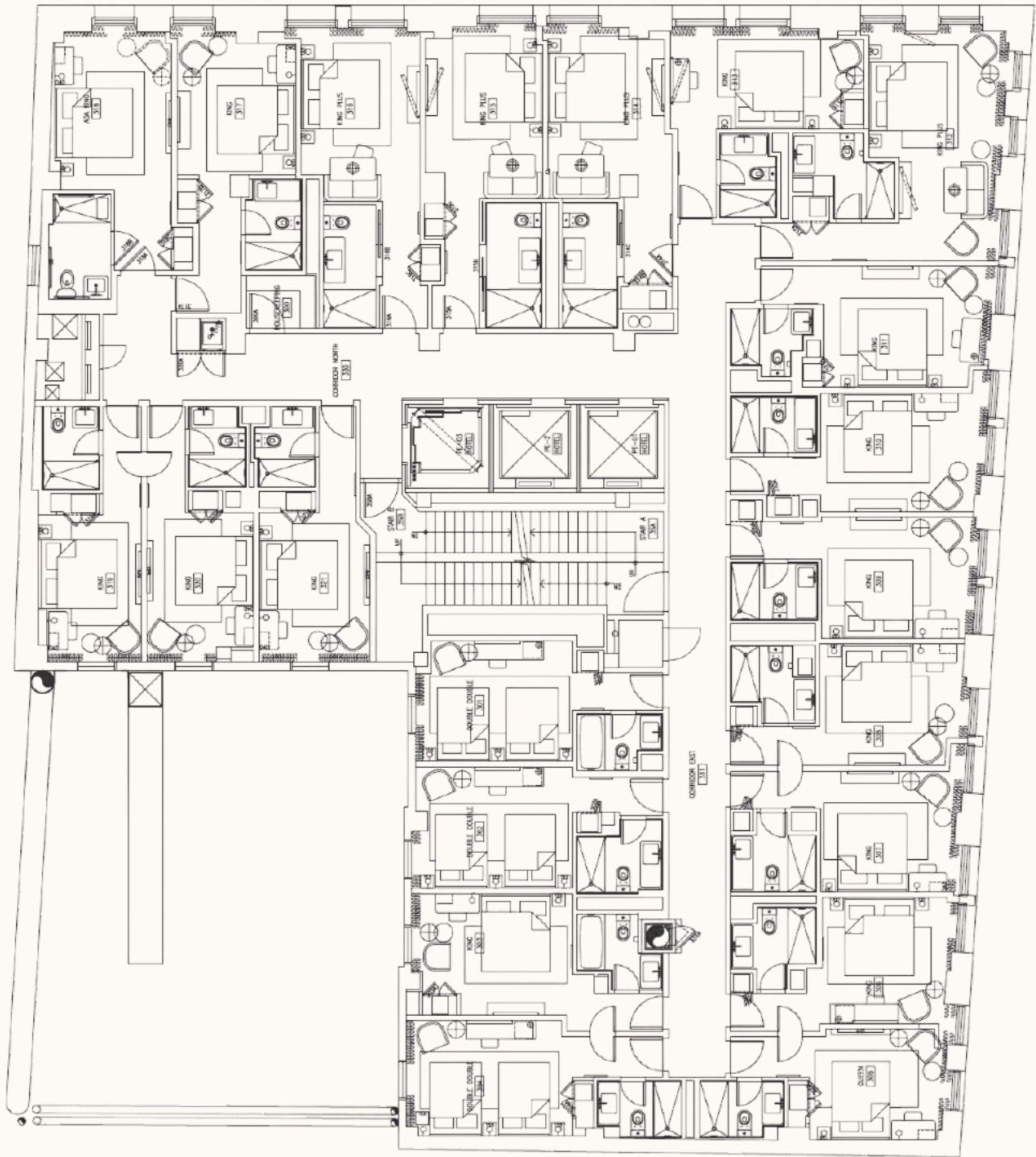
New gym

Existing M&E space retained

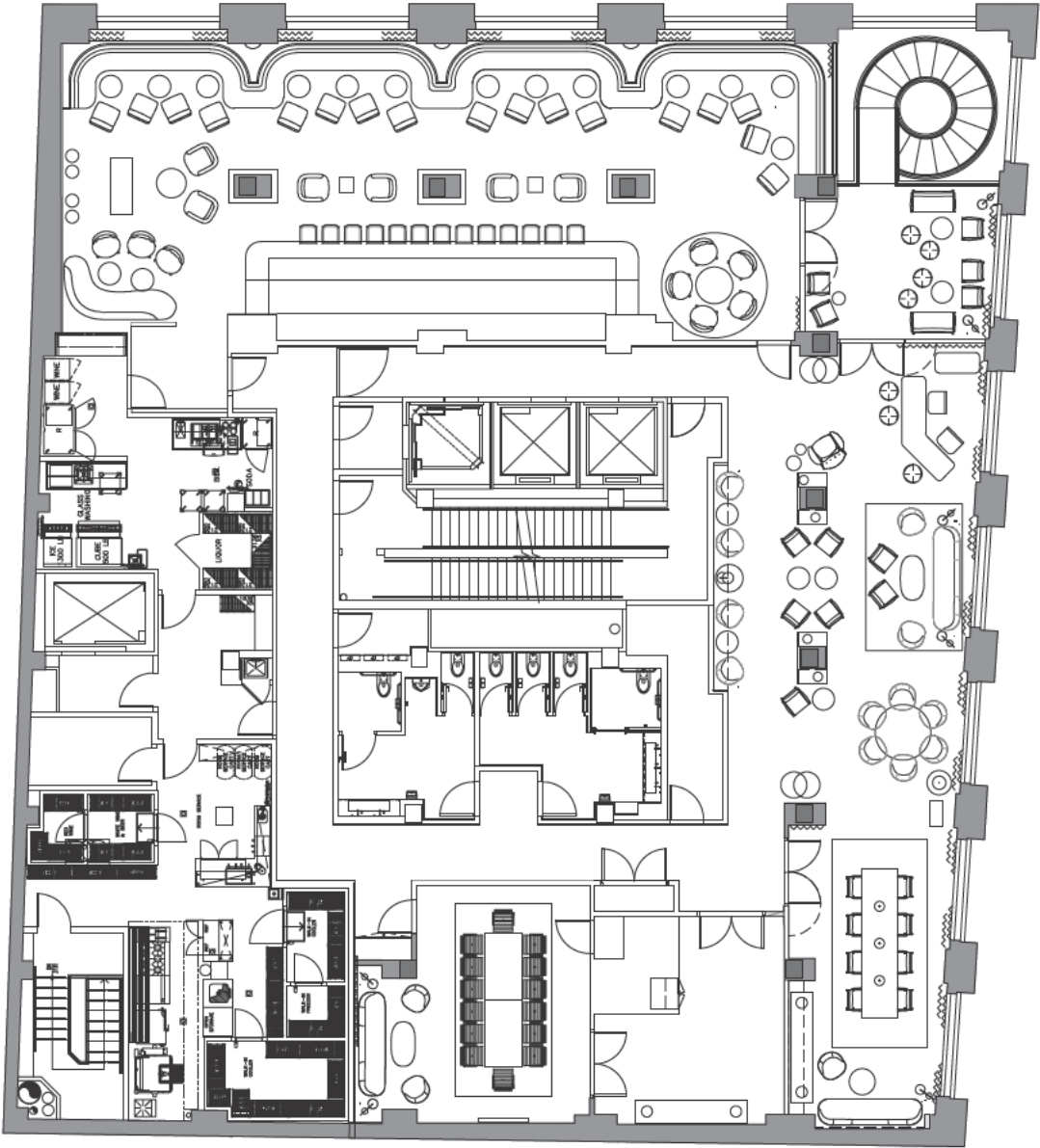


Third floor

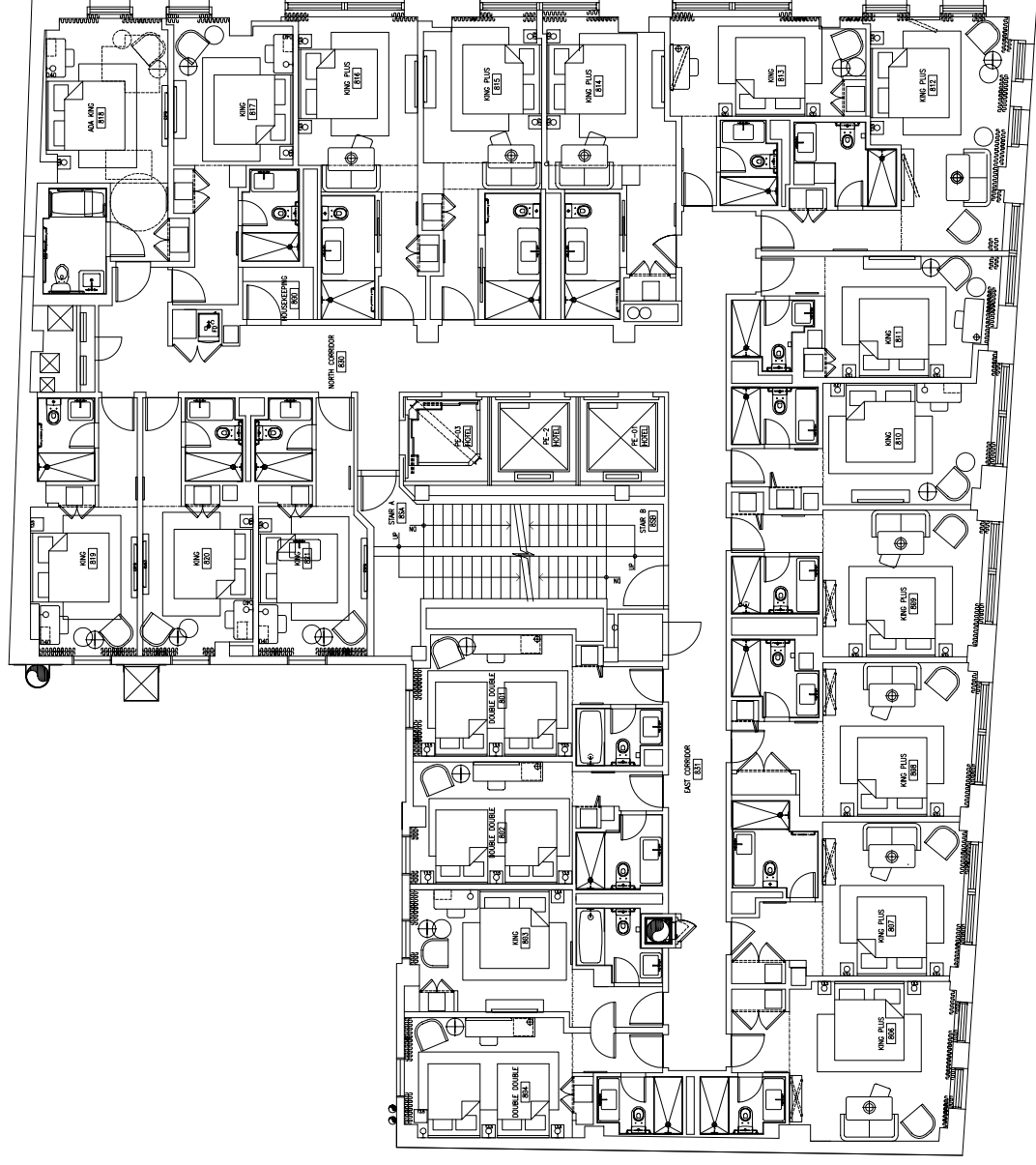
Existing guest room inventory retained



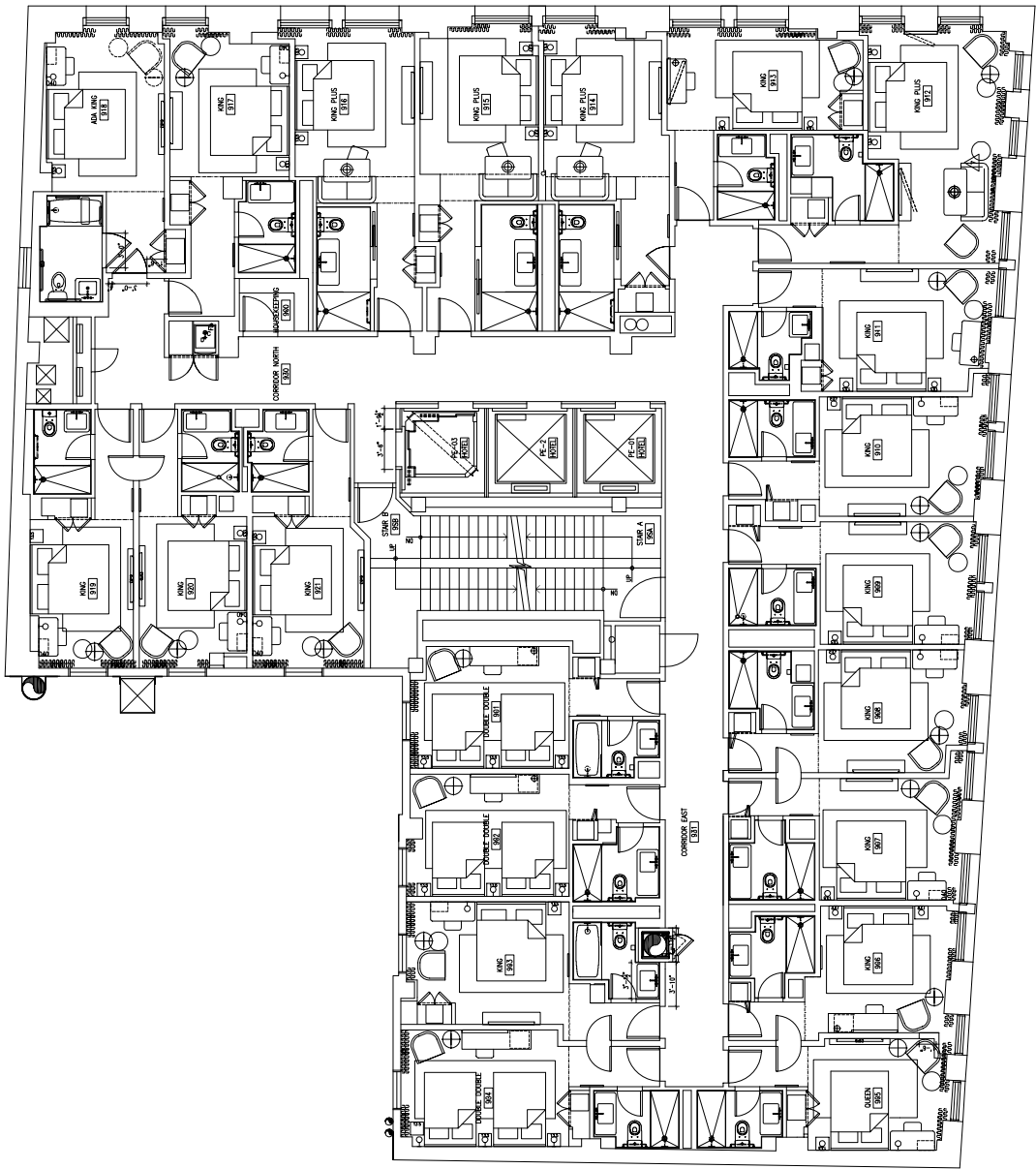
Floor Plan
Second Floor Repositioning



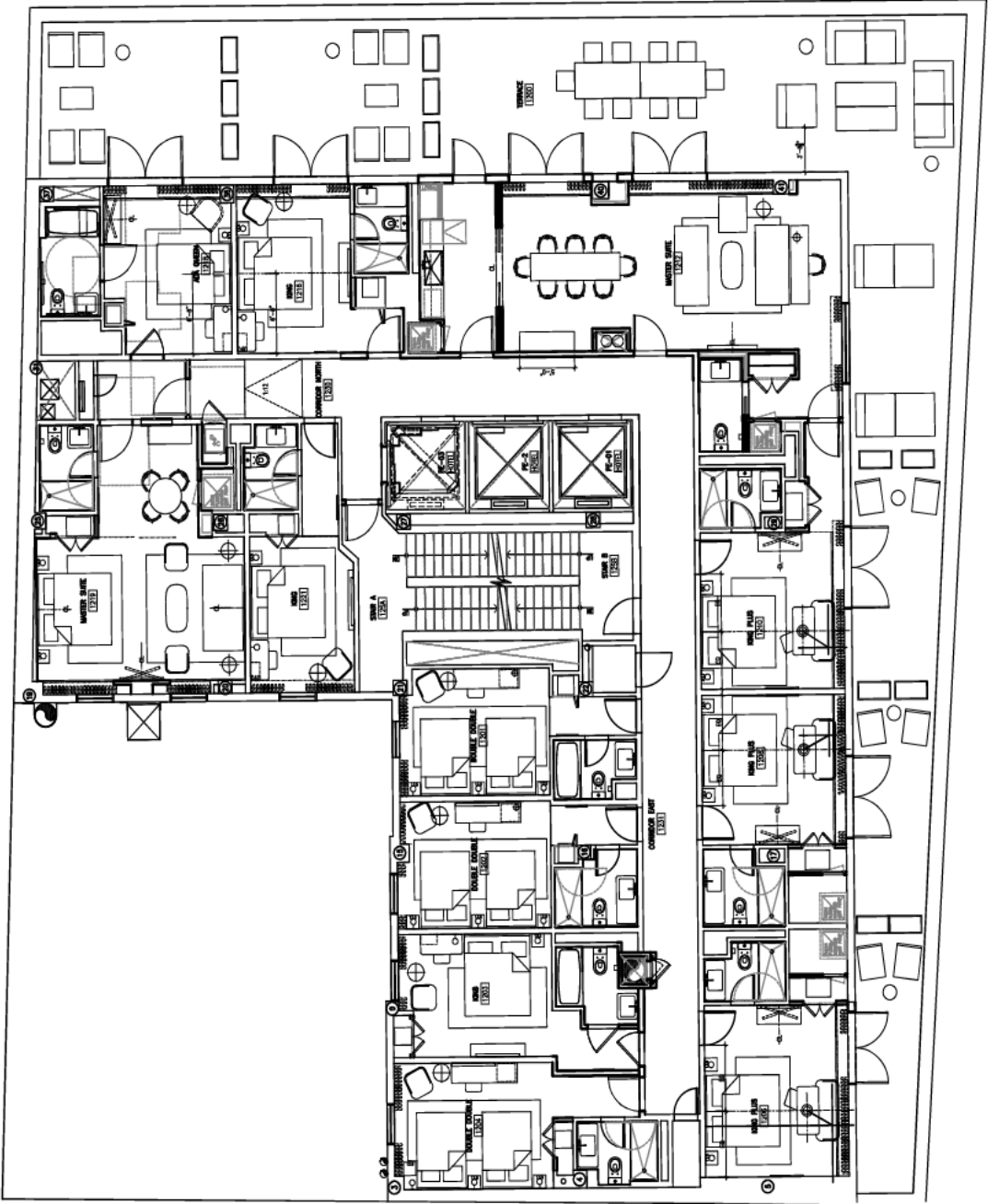
Floor 8



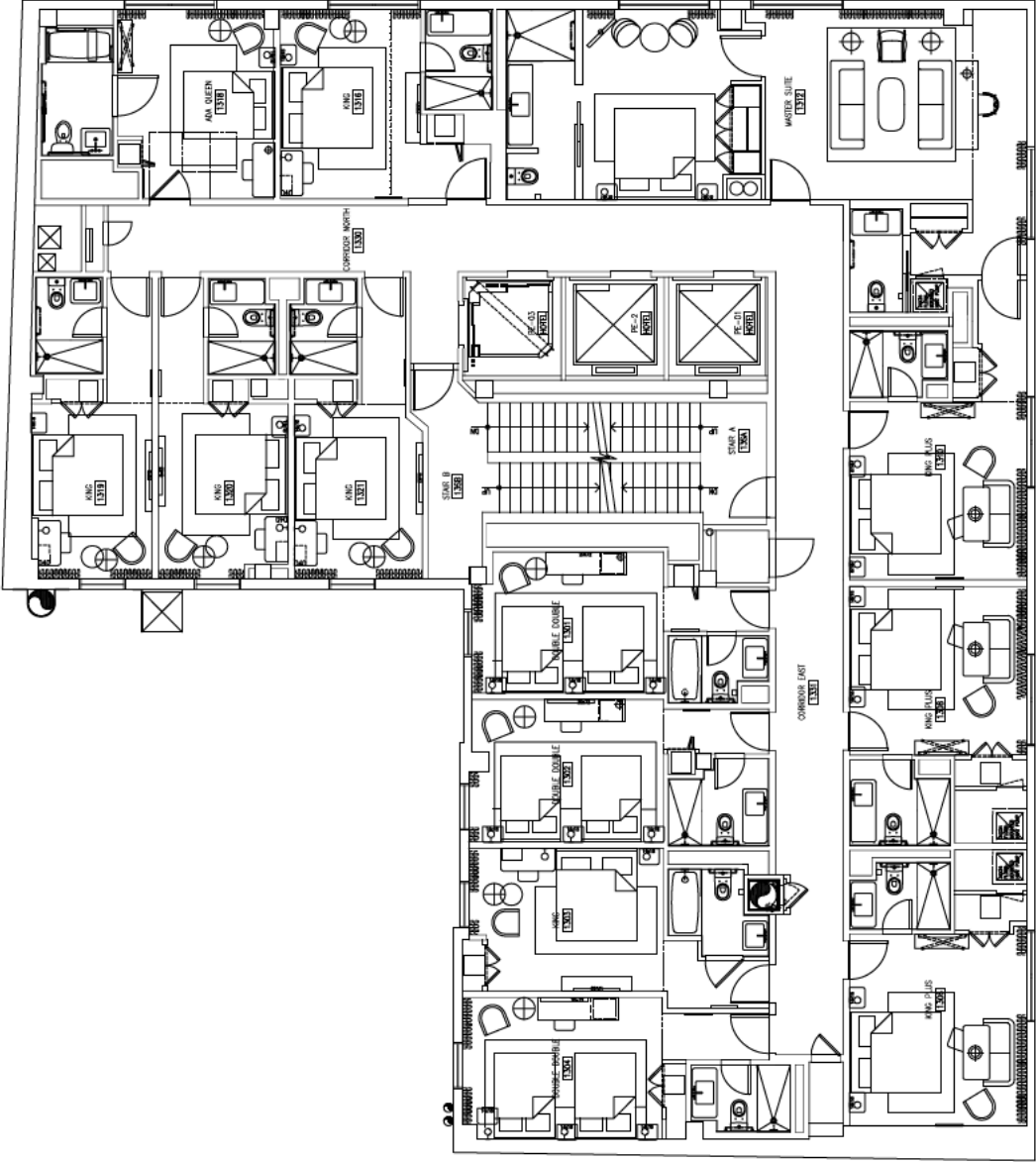
Floors 9-11



Floor 12



Floors 14-15



COCKTAILS 18

Night Maid

gin, lime, cucumber, mint

Golden Ginger

vodka, apricot, ginger, pineapple, soda

Superstar

tequila, aperol, lime, grapefruit, agave

Pacific Gold

mezcal, lo fi, lime, passionfruit, habanero

Espresso Martini

vodka, banana, cold brew

Lemon House

gin, vermouth, aqua di cedro, lemon bitters

Vesper

vodka, gin, cocchi americano

Old Fashioned

bourbon, angostura bitters

Mezcal Negroni

mezcal, vermouth, red bitter

WINES BY THE GLASS

Sparkling

Pét-Nat Blanc 17

Champagne 26

White

Chenin Blanc 18

Chardonnay 18

Rosé & Orange

Provence Rosé 17

Sicilian Orange 17

Red

Pinot Noir chilled 18

Langhe Nebbiolo 19

BEER

Miller High Life 7

Kronenbourg 9

Can

Ebbs No. 3 IPA 11

Good Times N/A 9

NON ALCOHOLIC COCKTAILS 14

Easy Dose It

aplos arise, lime, grapefruit, agave, rosemary tonic

Clean Citrus

red bitter n/a, hibiscus, honey, orange, lemon

Evening Sess

cold brew, tonic, nutmeg

First Light

turmeric, pineapple, honey, black pepper

SMALL PLATES 15

TUNA TARTARE

crispy lotus root, saffron purée de patatas

OCTOPUS ROLL

brioche, aioli, pickled red onion

FRIED CALAMARI

lemon, red pepper aioli

WOOD FIRED XO SCALLOP DUO

XO butter, chilli, lime

DRESSED CRAB ON TOAST

Cox's apple, guindilla, jamón lardo

PATATAS PALHAS

matchstick potatoes, soft confit egg, bravas sauce, chives

PAN CON TOMATE

sourdough, garlic, tomato

PADRON PEPPERS

citrus Maldon salt

GRILLED CHORIZO

thyme honey, Rioja

BITES 10

Fried Olives

blue cheese-stuffed, buffalo aioli, celery leaves

Croquettes

potato, parmesan, chives

Grilled Cheese

black truffle béchamel

Fries

garlic aioli, chili ketchup

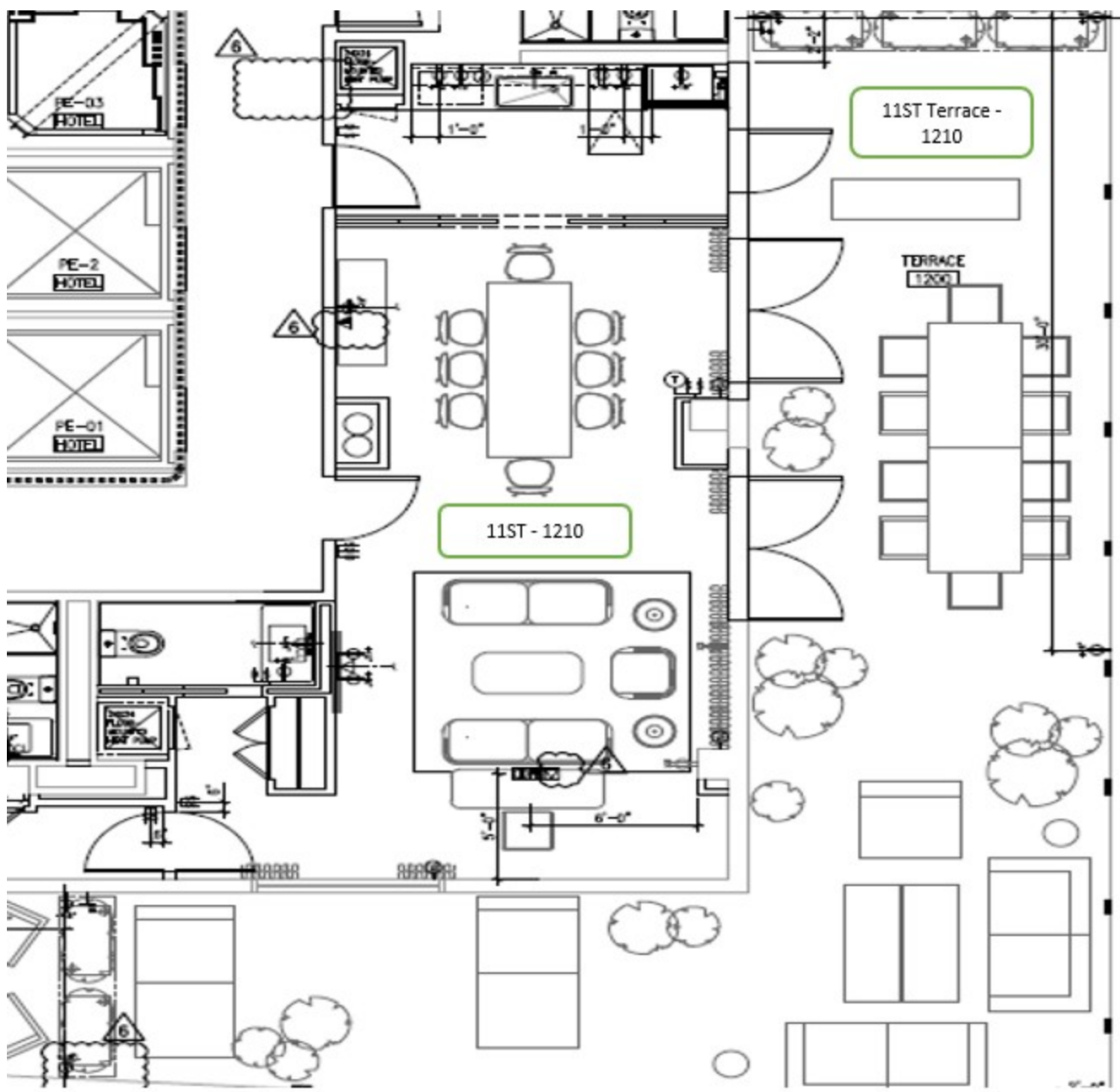
Sundae

banana dulce de leche gelato, caramel crunch, coconut

OUTDOOR ADDENDUM &
FLOORPLAN



Will heating elements be used? ☐ No ☒ Yes, please describe: TBD during private events during



PICTURES























