

Manhattan Community Board 4

(All Fields Must Be Completed)

Liquor License/Sidewalk Cafe Stipulations Application

CORPORATION NAME Chipotle Mexican Grill of Colorado, LLC		DOING BUSINESS AS (DBA) Chipotle Mexican Grill	
STREET ADDRESS 620 9th Ave., New York, NY		CROSS STREETS W. 44th & W 43rd St.	ZIP CODE 10036
OWNER <i>(Attach a list of all the people that will be associated/listed with the license)</i>	NAME: Chipotle Mexican Grill of Colorado LLC	ATTORNEY/ REPRESENTATIVE	NAME: Theresa M. Russo
	PHONE: 303-222-2524		PHONE: 518-407-5800
	EMAIL: Licensing@Chipotle.com		EMAIL: Theresa.Russo@srclawoffices.com
MANAGER	NAME: Fabian Martinez	LANDLORD	NAME: 618 Ninth Avenue LLC
	PHONE: 212-247-3275		PHONE: 212-213-0123
	EMAIL: ny.0681.clinton@chipotle.com		EMAIL: Unknown
APPLICATION TYPE (<input checked="" type="checkbox"/> Liquor License <input type="checkbox"/> Unenclosed Sidewalk Cafe)			
<input type="radio"/> New	Has applicant owned or managed a similar business?	YES	NO
	What is/was the name and address of establishment?		
	What were the dates applicant was involved with this former premise?		
<input type="radio"/> Corp Change/Class Change/Removal	What is the license # and expiration date?		
	Is applicant making any alterations or operational changes?	YES	NO
	If alterations or operational changes are being made, please describe/list all changes.		
<input checked="" type="radio"/> Alteration	What is the current license # and expiration date?	1166051, 11/30/2019	
Please list/describe the nature of all the changes and attach the plans: The premise would like to change its closing time from 10 pm to 11 pm			
METHOD OF OPERATION			
TYPE OF ALCOHOL	<input checked="" type="checkbox"/> Liquor/Wine/Beer & Cider <input type="checkbox"/> Beer & Cider <input type="checkbox"/> Wine/Beer & Cider		
ESTABLISHMENT TYPE	<input checked="" type="checkbox"/> Restaurant <input type="checkbox"/> Cabaret <input type="checkbox"/> Night Club <input type="checkbox"/> Hotel <input type="checkbox"/> Bar/Tavern <input type="checkbox"/> Catering Establishment <input type="checkbox"/> Adult Entertainment <input type="checkbox"/> Wine Bar <input type="checkbox"/> Dance Club <input type="checkbox"/> Sports Bar <input type="checkbox"/> Club (Fraternal Organization - Members Only)		
Has applicant/owner filed with the SLA? If yes, when? If no, when do you plan to file?	<input checked="" type="checkbox"/>	NO	6/14/2005
Is the 500 Foot Rule applicable? If yes, please attach a diagram of the On-Premise liquor license establishments within a 500 ft. radius of your establishment and the Public Interest Statement.	<input checked="" type="checkbox"/>	NO	
Is the 200 Foot Rule applicable? If yes, please attach a diagram of the schools and houses of worship that trigger the rule.	YES	<input checked="" type="checkbox"/>	
Has applicant/owner(s) read MCB4 Policy Regarding Concentration and Location of Alcoholic-Serving Establishments?	<input checked="" type="checkbox"/>	NO	

OPERATIONAL DETAILS (*Closing time will be when establishment is vacated of all patrons)

HOURS* <i>(Indoor Only)</i>		MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY
	Operation	10am - 11pm	10am - 11pm	10am - 11pm	10am - 11pm	10am - 11pm	10am - 11pm	10am - 11pm
	Kitchen	10am - 11pm	10am - 11pm	10am - 11pm	10am - 11pm	10am - 11pm	10am - 11pm	10am - 11pm
	Music	10am - 11pm	10am - 11pm	10am - 11pm	10am - 11pm	10am - 11pm	10am - 11pm	10am - 11pm

If you plan to have music, what type(s)? (Circle all that apply)

<input checked="" type="checkbox"/> BACKGROUND	<input type="checkbox"/> LIVE MUSIC	<input type="checkbox"/> DJ	<input type="checkbox"/> JUKE BOX	<input type="checkbox"/> KARAOKE
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OCCUPANCY

	Capacity (Certificate of Occupancy)	Maximum # of Persons You Anticipate Occupying Premises (Including Employees)	Number of Tables	Number of Seats	Number of Service Only Bars	Number of Stand-Up Bars	Number of Seats at Stand-Up Bar
INSIDE	86	86	13	37	1	0	0
OUTSIDE <i>(Other than sidewalk café)</i>	N/A						
SIDEWALK CAFÉ	N/A						

How many floors are there? What is the capacity for each floor? 1 Floor

How frequently will the owner(s) be at the establishment? Premise is manager run

Will there be dancing? YES

Will applicant have bottle or table service for beverage alcohol? YES

Will you be hosting private; promotional or corporate events? YES

Will outside promoters be used on a regular basis? If yes please describe. YES

Will you have a security plan? If, yes please attach. YES

Will security plan be implemented? YES

Will State certified security personnel be used? YES

Will New York Nightlife Association and NYPD Best Practices be followed? NO

Will applicant be using delivery bicycles? If yes, how many? YES

Will delivery bicycles be clearly marked with the name of the restaurant and will staff wear attire clearly noting name as described by NYC Law? YES NO N/A

Where will delivery bicycles be stored during the day when not in use? N/A

LOCATION & ZONING

Is this a Special District? If yes, is it Clinton, West Chelsea or Hudson Yards?	YES	<input checked="" type="checkbox"/>	
Does the building have a Certificate of Occupancy ("C of O") or a letter of no objection?	<input checked="" type="checkbox"/>	NO	
Is a Public Assembly permit required?	YES	<input checked="" type="checkbox"/>	
Are your plans filed with DOB?	YES	<input checked="" type="checkbox"/>	

Community Notification/Relations

NOTIFICATION: List all block associations; tenant associations, co-op boards or condo boards of residential buildings; and community groups that applicant has notified regarding its application. For each please list both the organization and individual you contacted	# 1	
	# 2	
	# 3	
	# 4	
	# 5	
Please provide dates when applicant met with the groups listed above.		
Who was your contact person at each group you met with?		
When did applicant post the notice that was provided?		2/25/2019
Where did applicant post the notice that was provided?		Exterior of the building
Will applicant provide owner cell phone number to neighbors and respond to complaints that arise? Please provide number in space provided.		YES NO
Will applicant inform the Community Board office of its job openings and/or provide a hyperlink to applicants jobs webpage?		YES NO

BUILDING DESIGN

State the name and type of business previously located in the space.	N/A		
Has a liquor-licensed establishment previously occupied this space at any time? If yes, please provide the name of the business.	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	Currently licensed
Do you plan any changes to the existing façade? If yes, please describe.	YES	<input checked="" type="checkbox"/>	
Will applicant have a vestibule within the establishment?	YES	<input checked="" type="checkbox"/>	
Will applicant use a storm enclosure?	YES	<input checked="" type="checkbox"/>	
Will applicant not place any items or obstructions on the sidewalk, for example, sandwich boards, sidewalk signs, freestanding menus and plants, as per the law?	<input checked="" type="checkbox"/>	<input type="checkbox"/> NO	
Will applicant comply with the NYC noise code?	<input checked="" type="checkbox"/>	<input type="checkbox"/> NO	
Will the establishment have any of the following: (circle all that apply) N/A	FRENCH DOORS	GARAGE DOORS	WINDOWS THAT CAN BE OPENED
Will applicant close all windows, French doors, garage doors when any music or amplified sound (including televisions) is played inside the establishment? N/A	YES	<input type="checkbox"/> NO	
Will applicant close all windows, French doors, garage doors by 11 PM Friday and Saturday and 10 PM on all other days even if no music or amplified sound is played inside the establishment? N/A	YES	<input type="checkbox"/> NO	
Has applicant obtained an acoustical report from a certified sound engineer to assess potential noise disturbance to the neighboring residents and buildings?	YES	<input checked="" type="checkbox"/>	
Will applicant follow the recommendations of a certified sound engineer to mitigate potential noise disturbance to the neighboring residents and buildings, including placing speakers on the floor of the establishment?	YES	<input checked="" type="checkbox"/>	
Will the kitchen exhaust system extend to the roof?	<input checked="" type="checkbox"/>	<input type="checkbox"/> NO	
Will the establishment have an illuminated sign?	YES	<input checked="" type="checkbox"/>	
Will the establishment have a canopy extending over the sidewalk?	YES	<input checked="" type="checkbox"/>	
Where will the air conditioner be located? What type is it?			
When was the air conditioner installed?			

OUTDOOR ITEMS - OTHER THEN SIDEWALK CAFÉ		N/A	
Has the applicant/owner(s) read MCB 4 Rear Yard Rooftop Policy?	YES	NO	
Will applicant use any outdoor spaces: rooftop, rear yard, patio, porch, balcony, pavilion, tents, deck or gazebo? If yes, which one(s)?	YES	NO	
Are the floorplans for the outdoor space(s) included?	YES	NO	
Will applicant close and vacate the outdoor space(s) by 11PM on Friday & Saturday and 10 PM on all other days?	YES	NO	
Will the service and consumption of alcohol in any outdoor space only be via seated food service?	YES	NO	
Will applicant not allow standing space for patrons to drink or smoke in any outdoor space(s)?	YES	NO	
Will there be no amplified music, as per the law?	YES	NO	
If amplified sound is played inside the establishment, will windows and doors be closed?	YES	NO	
Will applicant agree to post signs outside asking customers to respect the neighbors'?	YES	NO	
Will applicant agree to train staff to encourage a peaceful environment?	YES	NO	
Will applicant provide effective sound control (landscaping enclosure, soundproofing tenants apartments)	YES	NO	
Will there be a lighting plan that allows safe usage of the outdoor space without disrupting neighbors?	YES	NO	

OUTDOOR ITEMS – SIDEWALK CAFÉ N/A

Has the applicant/owner(s) read MCB4 Sidewalk Café Policy?	YES	NO	
Will applicant be applying for a sidewalk café now or in the future?	YES	NO	
Is applicant in this application seeking to include a sidewalk café in its liquor license?	YES	NO	
If yes, has applicant submitted an application and plans to NYC Dept. of Consumer Affairs? Please attach application and plans.	YES	NO	
Will applicant close and vacate the sidewalk café by 11 PM on Friday & Saturday and 10 PM on all other days?	YES	NO	
Will applicant be serving alcohol in the sidewalk café? If so, will you have waiter service?	YES	NO	
Will the café have a 3 ft. wide serving aisle running the entire length of the sidewalk café?	YES	NO	
Will applicant mark the perimeter of the café on the sidewalk?	YES	NO	
Will the service and consumption of alcohol in the sidewalk café only be via seated food service?	YES	NO	
Will the sidewalk café not provide standing space for drinking or smoking?	YES	NO	
Will applicant use any portable natural gas heaters? If so, do you have the requisite approvals from DOB & the Fire Department?	YES	NO	
Will applicant have a lighting plan that will allow safe usage of the outdoor space without disrupting neighbors?	YES	NO	
Will all furniture, plants and barricades be stored inside between the evening closing hours and the morning opening hours?	YES	NO	
Will all furniture be stored inside between December 21 st and March 21 st , and any other day when it rains or snows?	YES	NO	
Will applicant use umbrellas?	YES	NO	
If construction or construction protection has reduced the sidewalk width, will applicant always maintain an 8 foot clear path of sidewalk between the perimeter of the café and the closes obstruction including construction barricades?	YES	NO	



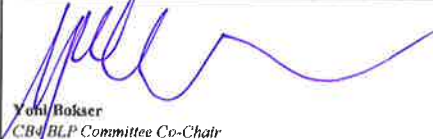
ADDITIONAL STIPULATIONS: (Office Use Only), *Continued*

To the extent any additional stipulation on pages 7 and 8 of this application conflicts with any response on pages 1 – 6 of this application, the stipulations on pages 7 and 8 control.

Manhattan Community Board 4 (MCB4) recommends:
 (MCB4's recommendation is based on a vote taken at its
 April 3, 2019 full board meeting, with 32 members voting in favor
 of the recommendation, 0 members opposed, 0 members
 abstaining and 0 present but not eligible)

Denial unless all stipulations agreed to by applicant/owner are part of the method of operation
 Denial Approval

CB4 REPRESENTATIVES

 Nelly Gonzalez CB4 Assistant District Manager	 Frank Hozubiec CB4 BLP Committee Co-Chair	 Yoni Bokser CB4 BLP Committee Co-Chair
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APPLICANT AGREEMENT WITH THE COMMUNITY

Applicant agrees to these stipulations as the basis for the community support of this application and acknowledges that all of these stipulations are essential prerequisites to the MCB4 recommendation regarding this application. Applicant agrees to have these stipulations incorporated in the method of operation of its liquor license. The stipulations in this application constitute the entire agreement between MCB4 and applicant and may only be altered in writing signed by MCB4 and applicant. These stipulations supersede any oral statements or representations in connection with this application.

SIGN HERE →	ROBERT MAGRANE PRINT NAME OF APPLICANT	 SIGNATURE OF APPLICANT	3/12/19 DATE
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ATTORNEY
 212-598-5900



BERGMANN
associates
Engineers / Architects / Surveyors

M. TINGLEY

F. WALLACE

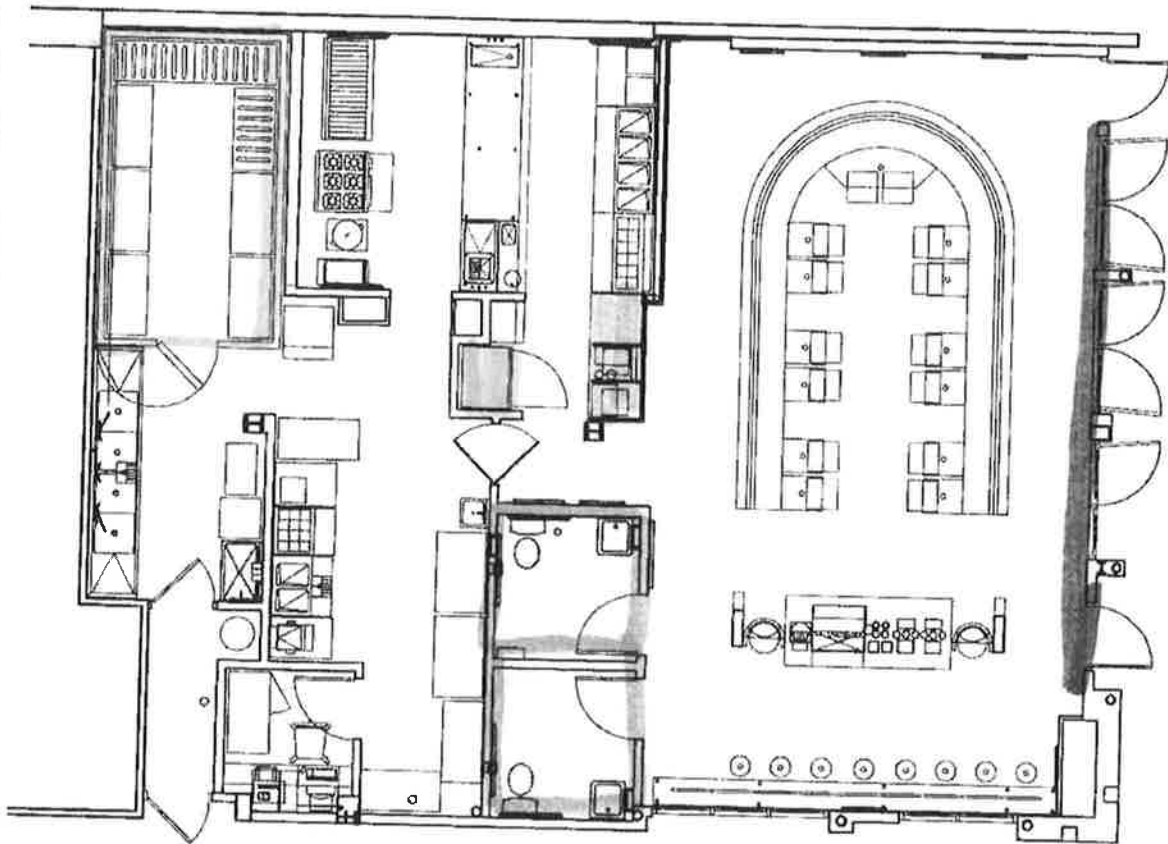
MARCH 15, 2005

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LB-2

CHIPOTLE MEXICAN GRILL- CLINTON: LIQUOR AUTHORITY EXHIBIT

1/8" = 1'-0"

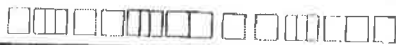


- Bar

- Main Entrance

- Alcohol Storage

- Restrooms



11/13/05



Proximity Report for Location:

March 5, 2019

620 9 Ave, New York, NY, 10036

On-Premise Licenses within 500 Feet

Name	Address	Approx. Distance
WESTWAY DINER INC	614 616 9TH AVENUE	30 ft
CHIPOTLE MEXICAN GRILL OF COLORADO LLC	620 9TH AVE AKA 358 W 44 ST	50 ft
PORTICI RESTAURANT INC	621 9TH AVE	80 ft
BKUK 6 CORP	400 402 W 44TH ST	110 ft
R&R WESTSIDE LLC	356 W 44TH ST	110 ft
RACHEL ON NINTH CORP	608 9TH AVE	125 ft
NINTH AVENUE SALOON INC	627 9TH AVENUE	130 ft
BKUK 10 CORP	623 9TH AVE	140 ft
PONENTE LLC	628 9TH AVENUE	140 ft
HORSHOES INC	611 9TH AVENUE	150 ft
DANAS LLC	630 NINTH AVE	170 ft
LA SCALA RESTAURANT LLC	630 NINTH AVE	170 ft
MDDCAR CORP	401 W 43RD ST	225 ft
NINTH AVENUE TOMATO INC	635 9TH AVENUE	230 ft
ZONEA FOOD & BEVERAGE INC	403 W 43RD ST	235 ft
PULPO LLC	402 W 43RD ST	250 ft
ILURAS LLC	358 W 44 ST 2ND FLOOR	325 ft
THOMPSON REST INC	358 W 44TH ST	325 ft
SRISTIENVONG INC	592 9TH AVE	330 ft
SHNY RESTAURANT GROUP LLC	643 645 9TH AVENUE	350 ft
647 NINTH AVE CORP	647 9TH AVE	375 ft
PROGETTO INC	352 W 44TH ST	380 ft
RESTAURANT & CAFE ON NINTH CORP	653 9TH AVENUE	450 ft
TUM TUM BKK CORP	650 652 9TH AVE	460 ft
407 WEST 42ND STREET CORP	407 W 42ND STREET	500 ft



