

Manhattan Community Board 4

(All Fields Must Be Completed)

Liquor License/Sidewalk Cafe Stipulations Application

CORPORATION NAME		DOING BUSINESS AS (DBA)	
315 W 36th Street Tenant LLC		WeWork	
STREET ADDRESS		CROSS STREETS	ZIP CODE
315 W 36th St, New York, NY 10017		W 36th Street & 8th Avenue	10011
OWNER <i>(Attach a list of all the people that will be associated/listed with the license)</i>	NAME: Please see attached officer list	ATTORNEY/ REPRESENTATIVE	NAME: Theresa M. Russo
	PHONE:		PHONE: 518-407-5800
	EMAIL:		EMAIL: Theresa.Russo@srclawoffices.com
MANAGER	NAME: Kiah Perkins	LANDLORD	NAME: 36 LLC c/o SL Green Realty Corp
	PHONE: Best way to reach Kiah is by email		PHONE: (212) 594-2700
	EMAIL: kperkins@wework.com		EMAIL: Unknown at this time
APPLICATION TYPE (Check One)			
<input checked="" type="radio"/> New	Has applicant owned or managed a similar business?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
	What is/was the name and address of establishment?	WeWork - 115 W. 18th Street, New York, NY 10011	
	What were the dates applicant was involved with this former premise?	May 2015 - Present	
<input type="radio"/> Corp Change/Class Change/Removal	What is the license # and expiration date?		
	Is applicant making any alterations or operational changes?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
	<i>If alterations or operational changes are being made, please describe/list all changes.</i>		
<input type="radio"/> Alteration	What is the current license # and expiration date?		
	<i>Please list/describe the nature of all the changes and attach the plans:</i>		
METHOD OF OPERATION			
TYPE OF ALCOHOL	<input type="radio"/> Liquor/Wine/Beer & Cider <input type="radio"/> Beer & Cider <input checked="" type="radio"/> Wine/Beer & Cider		
ESTABLISHMENT TYPE	<input type="radio"/> Restaurant <input type="radio"/> Cabaret <input type="radio"/> Night Club <input type="radio"/> Hotel <input checked="" type="radio"/> Bar/Tavern <input type="radio"/> Catering Establishment <input type="radio"/> Adult Entertainment <input type="radio"/> Wine Bar <input type="radio"/> Dance Club <input type="radio"/> Sports Bar <input type="radio"/> Club (Fraternal Organization - Members Only)		
Has applicant/owner filed with the SLA? If yes, when? If no, when do you plan to file?	YES	<input checked="" type="checkbox"/>	Applicant will apply for a liquor license at the end of the 30 day notice period
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"/> YES	<input type="checkbox"/> NO	Please see attached 500 Ft. List
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"/> YES	<input type="checkbox"/> NO	

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

		MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY
HOURS* <i>(Indoor Only)</i>	Operation	Offices open 24/7 Alcohol served: 9am - 10 pm	Offices open 24/7 Alcohol served: 9am - 10 pm	Offices open 24/7 Alcohol served: 9am - 10 pm	Offices open 24/7 Alcohol served: 9am - 10 pm	Offices open 24/7 Alcohol served: 9am - 10 pm	Offices open 24/7 Alcohol not served on weekends	Offices open 24/7 Alcohol not served on weekends
	Kitchen	Food Prep area open all hours alcohol is served						
	Music	Background Music at all times, other types of music only for special events (such as educational speakers and business networking events).						
If you plan to have music, what type(s)? (Circle all that apply)			<input checked="" type="checkbox"/> BACKGROUND	<input checked="" type="checkbox"/> LIVE MUSIC	<input type="checkbox"/> DJ	<input checked="" type="checkbox"/> JUKE BOX	<input type="checkbox"/> KARAOKE	

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	240	No more than about 50 in licensed premises on each floor.	16	28	0	3	13 seats at 1 bar; 9 seats at 1 bar. Total = 22 seats
OUTSIDE <i>(Other than sidewalk café)</i>	No Outdoor Area						
SIDEWALK CAFÉ	No Outdoor Area						

How many floors are there? What is the capacity for each floor?	2 floors on this license - 9&10. Capacity of each floor = 120	
How frequently will the owner(s) be at the establishment?	Undetermined at this time.	
Will you be applying or intending to apply for a cabaret license with DCA? If yes, will there be dancing?	YES	<input checked="" type="checkbox"/>
Will applicant have bottle or table service for beverage alcohol?	YES	<input checked="" type="checkbox"/>
Will you be hosting private; promotional or corporate events?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO We will occasionally host events, such as educational speakers for our members.
Will outside promoters be used on a regular basis? If yes please describe.	YES	<input checked="" type="checkbox"/> NO WeWork employees will monitor alcohol consumption to make sure minors and intoxicated individuals are not served. Additional security will be in place, including cameras and access control (ID card verification).
Will you have a security plan? If, yes please attach.	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
Will security plan be implemented?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
Will State certified security personnel be used?	YES	<input checked="" type="checkbox"/> NO WeWork will not have security guards - we will have employees monitoring consumption.
Will New York Nightlife Association and NYPD Best Practices be followed?	YES	<input type="checkbox"/> NO N/A
Will applicant be using delivery bicycles? If yes, how many?	YES	<input checked="" type="checkbox"/> NO
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	<input type="checkbox"/> 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"/>	Event space will not meet the requirements
Are your plans filed with DOB?	<input checked="" type="checkbox"/>	NO	

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	Hell's Kitchen Neighborhood Association: Kathleen Treat at kathleentreat123@gmail.com	
	# 2		
	# 3		
	# 4		
	# 5		
Please provide dates when applicant met with the groups listed above.		Applicant met with additional neighbors on 9/14/17 and sent emails to CB-4 Board President John Chalice & Cecilia Lau on 11/3/17 & 11/17/17. Applicant also held a call with Mr. Chalice and a neighbor on 10/23/17.	
Who was your contact person at each group you met with?		See Above	
When did applicant post the notice that was provided?		11/28/17	
Where did applicant post the notice that was provided?		On front door/window of the establishment	
Will applicant provide owner cell phone number to neighbors and respond to complaints that arise? Please provide number in space provided.		<input checked="" type="checkbox"/>	NO If any complaints arise applicant will respond via neighborfeedback@wework.com or (646) 776-3215
Will applicant inform the Community Board office of its job openings and/or provide a hyperlink to applicants jobs webpage?		YES	NO Unknown at this time

BUILDING DESIGN			
State the name and type of business previously located in the space.	Office Space		
Has a liquor-licensed establishment previously occupied this space at any time? If yes, please provide the name of the business.	YES	NO <input checked="" type="checkbox"/>	
Do you plan any changes to the existing façade? If yes, please describe.	YES	NO <input checked="" type="checkbox"/>	
Will applicant have a vestibule within the establishment?	YES	NO <input checked="" type="checkbox"/>	
Will applicant use a storm enclosure?	YES	NO <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"/>	NO	Applicant will not place any items on the side walk
Will applicant comply with the NYC noise code?	<input checked="" type="checkbox"/>	NO	
Will the establishment have any of the following: (circle all that apply)	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?	YES	NO	N/A - (windows will be closed at all times)
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?	YES	NO	N/A - (windows will be closed at all times)
Has applicant obtained an acoustical report from a certified sound engineer to assess potential noise disturbance to the neighboring residents and buildings?	<input checked="" type="checkbox"/>	NO	
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?	<input checked="" type="checkbox"/>	NO	Instead of installing noise remediation measures on the 10th floor as indicated in the report, we took the further step to repurpose entirely the 10th floor from member gathering space to standard WeWork office space, at a significant cost to WeWork. We have not had any subsequent noise complaints since moving the space.
Will the kitchen exhaust system extend to the roof?	YES	<input checked="" type="checkbox"/>	
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?	HVAC units are part of a VRF system and located on the roof.		
When was the air conditioner installed?	Installed in 2015		

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



OUTDOOR ITEMS – SIDEWALK CAFÉ			
Has the applicant/owner(s) read MCB4 Sidewalk Café Policy?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Will applicant be applying for a sidewalk café now or in the future?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Is applicant in this application seeking to include a sidewalk café in its liquor license?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
If yes, has applicant submitted an application and plans to NYC Dept. of Consumer Affairs? Please attach application and plans.	<input type="checkbox"/>	<input type="checkbox"/>	N/A
Will applicant close and vacate the sidewalk café by 11 PM on Friday & Saturday and 10 PM on all other days?	<input type="checkbox"/>	<input type="checkbox"/>	N/A
Will applicant be serving alcohol in the sidewalk café? If so, will you have waiter service?	<input type="checkbox"/>	<input type="checkbox"/>	N/A
Will the café have a 3 ft. wide serving aisle running the entire length of the sidewalk cafe?	<input type="checkbox"/>	<input type="checkbox"/>	N/A
Will applicant mark the perimeter of the café on the sidewalk?	<input type="checkbox"/>	<input type="checkbox"/>	N/A
Will the service and consumption of alcohol in the sidewalk café only be via seated food service?	<input type="checkbox"/>	<input type="checkbox"/>	N/A
Will the sidewalk café not provide standing space for drinking or smoking?	<input type="checkbox"/>	<input type="checkbox"/>	N/A
Will applicant use any portable natural gas heaters? If so, do you have the requisite approvals from DOB & the Fire Department?	<input type="checkbox"/>	<input type="checkbox"/>	N/A
Will applicant have a lighting plan that will allow safe usage of the outdoor space without disrupting neighbors?	<input type="checkbox"/>	<input type="checkbox"/>	N/A
Will all furniture, plants and barricades be stored inside between the evening closing hours and the morning opening hours?	<input type="checkbox"/>	<input type="checkbox"/>	N/A
Will all furniture be stored inside between December 21 st and March 21 st , and any other day when it rains or snows?	<input type="checkbox"/>	<input type="checkbox"/>	N/A
Will applicant use umbrellas?	<input type="checkbox"/>	<input type="checkbox"/>	N/A
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?	<input type="checkbox"/>	<input type="checkbox"/>	N/A

ADDITIONAL STIPULATIONS: (Office Use Only)

- Hours of Operation: Offices open 24/7, alcohol served 9 a.m.- 10 p.m. Monday - Friday
- Volume settings on all speakers systems and systems for amplified sound shall be capped at reasonable levels, and all controls will be accessible only to authorized WeWork staff

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.

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.

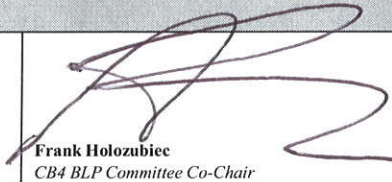


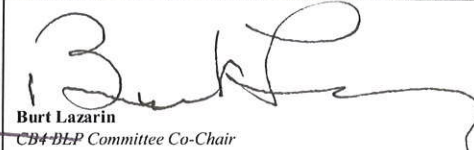
Manhattan Community Board 4 (MCB4) recommends:
 (MCB4's recommendation is based on a vote taken at its
 11/3/18 full board meeting, with 34 members voting in favor
 of the recommendation, 0 members opposed, 1 members
 abstaining and 1 present but not eligible)

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 Holozubiec
 CB4 BLP Committee Co-Chair


 Burt Lazarin
 CB4 BLP Committee Co-Chair

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 →


 PRINT NAME OF APPLICANT


 SIGNATURE OF APPLICANT

12/12/17
 DATE

Counsel, Compliance
 Network