

Manhattan Community Board 4

(All Fields Must Be Completed)

Liquor License/Sidewalk Cafe Stipulations Application

CORPORATION NAME Chama Mama LLC		DOING BUSINESS AS (DBA) Chama Mama	
STREET ADDRESS 149 W. 14th Street		CROSS STREETS Avenue of the Americas and 7th Avenue	ZIP CODE 10011
OWNER <i>(Attach a list of all the people that will be associated/listed with the license)</i>	NAME: Tamara Chubinidze	ATTORNEY/ REPRESENTAIVE	NAME: Elke A. Hofmann, Esq
	PHONE: 646-610-2815		PHONE: 212-487-9100
	EMAIL: tamdat2@hotmail.com		EMAIL: elke@eahlaw.com
MANAGER	NAME: Tamara Chubinidze	LANDLORD	NAME: PR 149 West 14, LLC
	PHONE: 646-610-2815		PHONE: 646-243-7249
	EMAIL: tamdat2@hotmail.com		EMAIL:
APPLICATION TYPE (Check One)			
<input checked="" type="checkbox"/> New	Has applicant owned or managed a similar business?		<input checked="" type="radio"/> YES <input type="radio"/> NO
	What is/was the name and address of establishment?		Le Pain Quotidien
	What were the dates applicant was involved with this former premise?		2016-2018
<input type="checkbox"/> Corp Change/Class Change/Removal	What is the license # and expiration date?		N/A
	Is applicant making any alterations or operational changes?		<input type="radio"/> YES <input type="radio"/> NO
	If alterations or operational changes are being made, please describe/list all changes.		
<input type="checkbox"/> Alteration	What is the current license # and expiration date?		
	Please list/describe the nature of all the changes and attach the plans:		
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 type="radio"/> YES	<input checked="" type="radio"/> NO
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="radio"/> YES	<input type="radio"/> NO
Is the 200 Foot Rule applicable? If yes, please attach a diagram of the schools and houses of worship that trigger the rule.		<input type="radio"/> YES	<input checked="" type="radio"/> NO
Has applicant/owner(s) read MCB4 Policy Regarding Concentration and Location of Alcoholic-Serving Establishments?		<input checked="" type="radio"/> YES	<input type="radio"/> 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	8am-11pm	8am-11pm	8am-11pm	8am-11pm	8am-11pm	8am-11pm	8am-11pm	8am-11pm
	Kitchen	7am-11pm	7am-11pm	7am-11pm	7am-11pm	7am-11pm	7am-11pm	7am-11pm	
	Music	8am-11pm	8am-11pm	8am-11pm	8am-11pm	8am-11pm	8am-11pm	8am-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		
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	TBD	74	19	42	0	1	6	N/A	
OUTSIDE <i>(Other than sidewalk café)</i>	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	
SIDEWALK CAFÉ	N/A	N/A	N/A	N/A	N/A				
How many floors are there? What is the capacity for each floor?					2				
How frequently will the owner(s) be at the establishment?					Full 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"/> NO			
Will applicant have bottle or table service for beverage alcohol?					YES	<input checked="" type="checkbox"/> NO			
Will you be hosting private; promotional or corporate events?					<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	Weddings, birthdays, etc.		
Will outside promoters be used on a regular basis? If yes please describe.					YES	<input checked="" type="checkbox"/> NO			
Will you have a security plan? If, yes please attach.					YES	<input checked="" type="checkbox"/> NO			
Will security plan be implemented?					YES	<input type="checkbox"/> NO	N/A		
Will State certified security personnel be used?					YES	<input type="checkbox"/> NO	N/A		
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="radio"/> NO
Does the building have a Certificate of Occupancy ("C of O") or a letter of no objection?	<input checked="" type="radio"/> YES	NO
Is a Public Assembly permit required?	YES	<input checked="" type="radio"/> NO
Are your plans filed with DOB?	<input checked="" type="radio"/> YES	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	Please see attached
	# 2	
	# 3	
	# 4	
	# 5	
Please provide dates when applicant met with the groups listed above.		January 31, 2018
Who was your contact person at each group you met with?		Please see attached
When did applicant post the notice that was provided?		January 31, 2018
Where did applicant post the notice that was provided?		Notice posted on the door to the entrance of the premises
Will applicant provide owner cell phone number to neighbors and respond to complaints that arise? Please provide number in space provided.		<input checked="" type="radio"/> YES <input type="radio"/> NO 646-610-2815
Will applicant inform the Community Board office of its job openings and/or provide a hyperlink to applicants jobs webpage?		<input checked="" type="radio"/> YES <input type="radio"/> NO

	First Name	Last Name	Email
Council Chelsea Block Association (Include him for everything in Chelsea aside from his block)	Bill	Borock	wborock@hotmail.com
100/200 West 15 Street	Kimon	Retzos	n15mstr@mac.com
100/200 West 15 Street	Steve	Starosta	steve@w15ba.com
300 West 15th Street	Jim	Jasper	jiasper@gc.cuny.edu
100 West 16th Street	Paul	Groncki	paul@groncki.com
100 West 16th Street	Eric	Bornze	eric_bornze@gmail.com
200 West 16th Street	Will	Rogers	wilrogers@gmail.com
Fulton House Tenant Association (W 16th St. to W 19th St. from 9th/10th Avenue)	Miguel	Acevedo	acevedoandassociates@gmail.com
100 West 17th/18th Street	Craig	Slutzkin	craig_slutzkin@outlook.com: craigs1029@aol.com
100 West 17th/18th Street	Judy	Klein	jakmail@earthlink.net
300 West 18th/19th Street	Cheryl	Kupper	clkupper@aol.com
300 West 18th/19th Street (President)	Ethan	Felson	Ethan_Felson@jewishfederations.org
300 West 18th/19th Street	Gloria	Lowe	laranleira@gmail.com
100 West 19th/20th/21st/22nd Street	Sally	Borock	wborock@hotmail.com
100 West 19th/20th/21st/22nd Street	Bill	Greenspan	sallymq@gmail.com
100 West 19th/20th/21st/22nd Street	Diane	Nichols	beacon195@aol.com
100 West 19th/20th/21st/22nd Street	Gerald	Germany	germanygerald@aol.com
100 West 19th/20th/21st/22nd Street	Melissa	Stern	m@melissa-stern.com
200 West 19th/20th/21st/22nd/23rd Street	Michael	Walsh	mwalshny@yahoo.com
200 West 19th/20th/21st/22nd/23rd Street	Pamela	Wolff	pamela@angel.net
200 West 19th/20th/21st/22nd/23rd Street	Dottie	Francoure	dfranco243@earthlink.net
200 West 19th/20th/21st/22nd/23rd Street	Pat	Cooke	form@me.com
500 West 19th Street	Merle	Lister	merle.levine@gmail.com
300 West 20th Street	Neil	Selkirk	neil@neiselkirk.com
300 West 20th Street	Carol	Olt	colt@nyc.rr.com
300 West 20th Street	Albert	Taylor	alberttaylor@gmail.com
400 West 20th Street	Leslie	Dovel	lesley@lvitchord.com
300 West 21st/22nd/23rd Street	Eleanor	Horowitz	eleanor@quiltedcorner.com
300 West 21st/22nd/23rd Street	Andra	Gabrielle	300wba@gmail.com
300 West 21st/22nd/23rd Street	Phyllis	Waisman	phylliswaisman@gmail.com
400 West 21st/22nd/23rd Street	Zazel	Loven	zazelovent@yahoo.com
400 West 21st/22nd/23rd Street	Mary	Swartz	mis@nyc.rr.com
400 West 21st/22nd/23rd Street	Eileen	McElduff	emce33@aol.com
400 West 21st/22nd/23rd Street	Jean	Blair	jblair@bobchristianson.com
400 West 21st/22nd/23rd Street	Karen	Jacob	w400ba@gmail.com
100 West 25th Street	Carla	Nordstrom	west25thstreetproject@gmail.com
100 West 26th Street	Susan	Butenwieser	susanb1011@aol.com
100 West 26th Street	Dan	Shulman	shulman@spokeasy.net
Chelsea-Elliot Tenant Association (W 25th/26th Street from 9th/10th Avenue)	Florence	Dent	fdenthunter@gmail.com
Chelsea-Elliot Tenant Association (W 25th/26th Street from 9th/10th Avenue)	Darlene	Waters	dwaterash@gmail.com
Penn South (W 23rd to W 29th Street from 8th/9th Avenue)	Brendan	Keaney	bkeaney@pennsouth.coop
Penn South (W 23rd to W 29th Street from 8th/9th Avenue)	Mario	Mazzoni	education@pennsouth.coop
London Terrace Towers (W 23rd/24th Street from 9th/10th Avenue)	Carl	Reinlib	(212) 675-2000
London Terrace Gardens (W 23rd/24th Street from 9th/10th Avenue)	Andy	Humm	andvhumm@aol.com
London Terrace Tenants Association	Inge	Ivchenko	tenaris@lita.info
Hotel Americano			(212) 216-0000
Highline537	Scott	Hupe	212-888-3700
Donna Langman Costumes	Donna	Langman	donna@donnalangman.com

BUILDING DESIGN			
State the name and type of business previously located in the space.			
Has a liquor-licensed establishment previously occupied this space at any time? If yes, please provide the name of the business.	YES	<input checked="" type="radio"/> NO	
Do you plan any changes to the existing façade? If yes, please describe.	YES	<input checked="" type="radio"/> NO	Landlord is updating facade as part of general building restorations
Will applicant have a vestibule within the establishment?	YES	<input checked="" type="radio"/> NO	
Will applicant use a storm enclosure?	YES	<input checked="" type="radio"/> NO	
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="radio"/> YES	NO	
Will applicant comply with the NYC noise code?	<input checked="" type="radio"/> YES	NO	
Will the establishment have any of the following: (circle all that apply)	<input checked="" type="radio"/> FRENCH DOORS	<input type="radio"/> GARAGE DOORS	<input type="radio"/> 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?	<input checked="" type="radio"/> YES	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?	<input checked="" type="radio"/> YES	NO	
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="radio"/> YES	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="radio"/> YES	NO	
Will the kitchen exhaust system extend to the roof?	<input checked="" type="radio"/> YES	NO	Existing
Will the establishment have an illuminated sign?	<input checked="" type="radio"/> YES	NO	
Will the establishment have a canopy extending over the sidewalk?	<input checked="" type="radio"/> YES	NO	
Where will the air conditioner be located? What type is it?	Existing		
When was the air conditioner installed?	Unknown		

OUTDOOR ITEMS - OTHER THEN SIDEWALK CAFE

Has the applicant/owner(s) read MCB 4 Rear Yard Rooftop Policy?	<input checked="" type="radio"/> YES	<input type="radio"/> 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="radio"/> YES	<input checked="" type="radio"/> NO	
Are the floorplans for the outdoor space(s) Included?	<input type="radio"/> YES	<input type="radio"/> 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="radio"/> YES	<input type="radio"/> NO	N/A
Will the service and consumption of alcohol in any outdoor space only be via seated food service?	<input type="radio"/> YES	<input type="radio"/> NO	N/A
Will applicant not allow standing space for patrons to drink or smoke in any outdoor space(s)?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	
Will there be no amplified music, as per the law?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	
If amplified sound is played inside the establishment, will windows and doors be closed?	<input type="radio"/> YES	<input type="radio"/> NO	N/A
Will applicant agree to post signs outside asking customers to respect the neighbors'?	<input type="radio"/> YES	<input type="radio"/> NO	N/A
Will applicant agree to train staff to encourage a peaceful environment?	<input type="radio"/> YES	<input type="radio"/> NO	N/A
Will applicant provide effective sound control (landscaping enclosure, soundproofing tenants apartments)	<input type="radio"/> YES	<input type="radio"/> NO	N/A
Will there be a lighting plan that allows safe usage of the outdoor space without disrupting neighbors?	<input type="radio"/> YES	<input type="radio"/> NO	N/A

OUTDOOR ITEMS – SIDEWALK CAFE			
Has the applicant/owner(s) read MCB4 Sidewalk Café Policy?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	
Will applicant be applying for a sidewalk café now or in the future?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	In the future
Is applicant in this application seeking to include a sidewalk café in its liquor license?	<input type="radio"/> YES	<input type="radio"/> NO	N/A, Please see above
If yes, has applicant submitted an application and plans to NYC Dept. of Consumer Affairs? Please attach application and plans.	<input type="radio"/> YES	<input type="radio"/> NO	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="radio"/> YES	<input type="radio"/> NO	N/A
Will applicant be serving alcohol in the sidewalk café? If so, will you have waiter service?	<input type="radio"/> YES	<input type="radio"/> NO	N/A
Will the café have a 3 ft. wide serving aisle running the entire length of the sidewalk cafe?	<input type="radio"/> YES	<input type="radio"/> NO	N/A
Will applicant mark the perimeter of the café on the sidewalk?	<input type="radio"/> YES	<input type="radio"/> NO	N/A
Will the service and consumption of alcohol in the sidewalk café only be via seated food service?	<input type="radio"/> YES	<input type="radio"/> NO	N/A
Will the sidewalk café not provide standing space for drinking or smoking?	<input type="radio"/> YES	<input type="radio"/> NO	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="radio"/> YES	<input type="radio"/> NO	N/A
Will applicant have a lighting plan that will allow safe usage of the outdoor space without disrupting neighbors?	<input type="radio"/> YES	<input type="radio"/> NO	N/A
Will all furniture, plants and barricades be stored inside between the evening closing hours and the morning opening hours?	<input type="radio"/> YES	<input type="radio"/> NO	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="radio"/> YES	<input type="radio"/> NO	N/A
Will applicant use umbrellas?	<input type="radio"/> YES	<input type="radio"/> NO	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="radio"/> YES	<input type="radio"/> NO	N/A

THIS APPLICATION DOES NOT EXTEND TO ANY SIDEWALK.

ADDITIONAL STIPULATIONS: (Office Use Only)

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
3/7/18 full board meeting, with 35 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 Holambloc
 CB4 BLP Committee Co-Chair


 Yoni Bolster
 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 →

Tamara Chubiridze

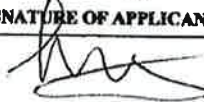
PRINT NAME OF APPLICANT



SIGNATURE OF APPLICANT

1/27/18

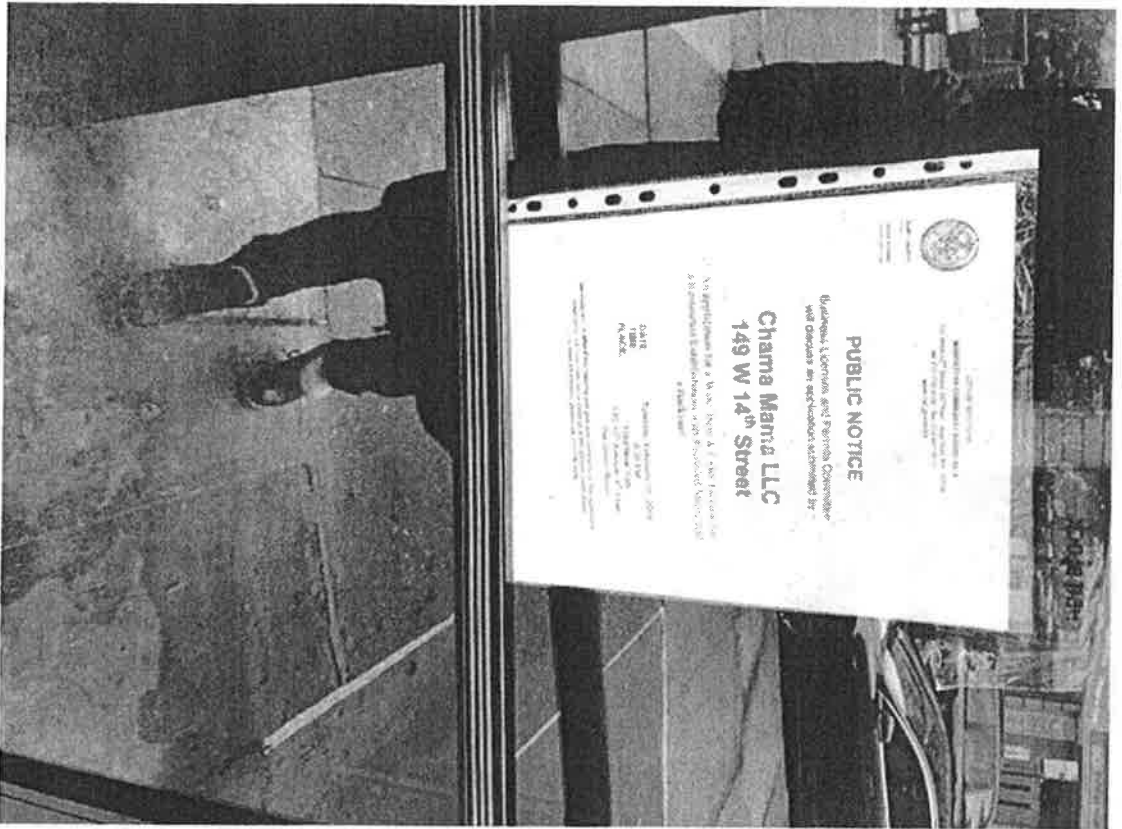
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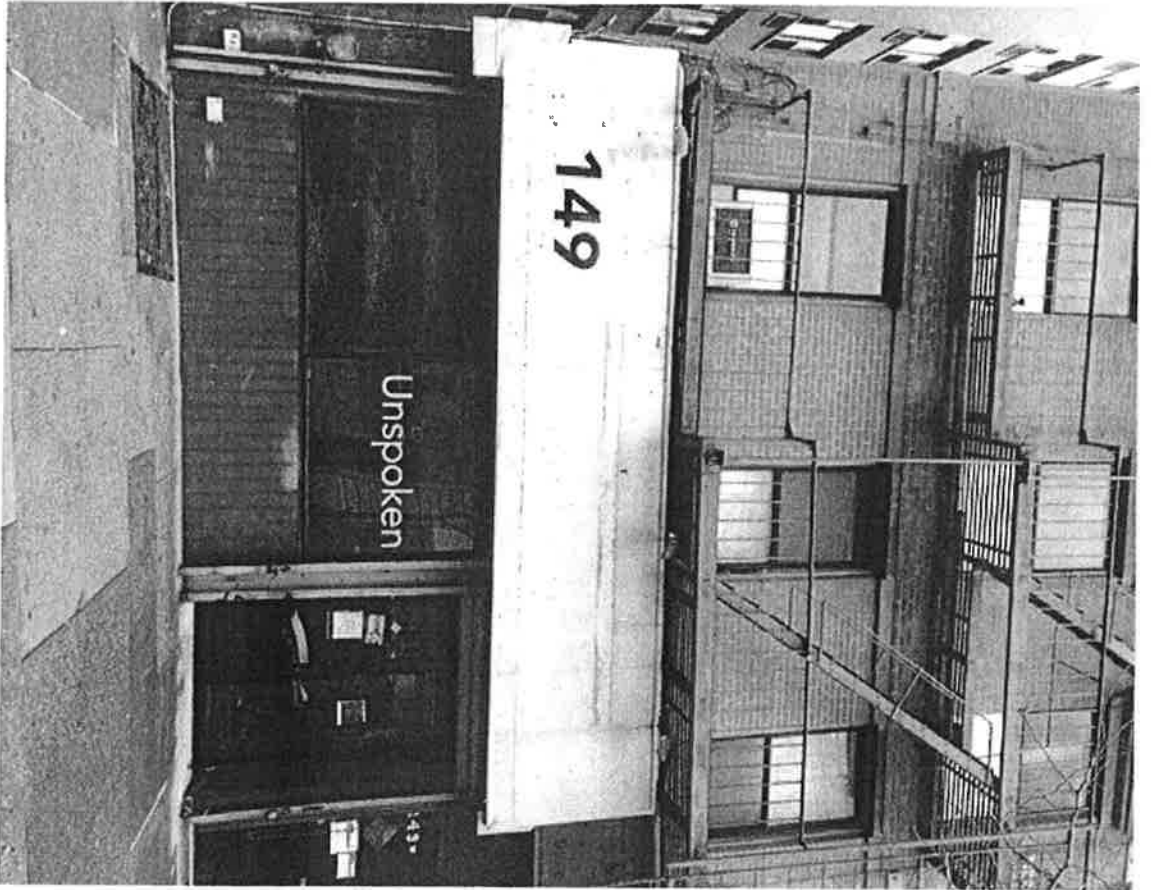


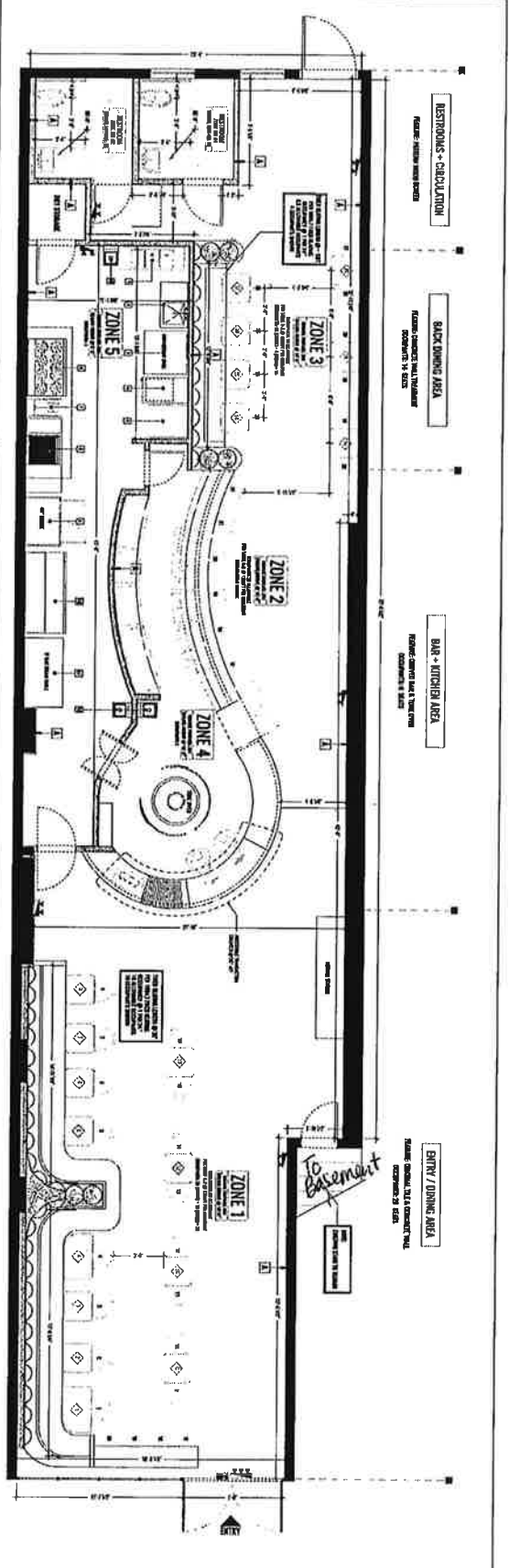
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List of Licenses within 500ft

Name	Address	Approx. Distance
1 MC 137 INC	137 W 14TH ST	150 ft
4 CASWELL PEARSON ENTERPRISES LTD	202 WEST 14TH STREET	260 ft
2 CON & CON CATERERS INC	205 W 14TH STREET	270 ft
3 DE ARMAS ENTERPRISES CORP	207 W 14TH ST	285 ft
5 4777 LLC	70 7TH AVE	330 ft
6 PEI MUSSEL KITCHEN LLC	154 W 13TH STREET	420 ft
7 CHEF WANG'S HOUSE LLC	88 7TH AVENUE	430 ft
8 W13 PIZZA LLC	140 W 13TH ST	490 ft
ABMW FOOD INC	108 W 14TH ST	515 ft
232 W 14 RESTAURANT CORP	232 W 14TH ST	515 ft







EQUIPMENT SCHEDULE

ZONE	NO.	SYMBOL	DESCRIPTION	MODEL NO.
ZONE 1	1	[Symbol]	3" SCH 40S BLACK STEEL - 4" DIA. TUBING (20' x 20' x 20')	10-3 1/2" DIA. STEEL
	2	[Symbol]	1" SCH 40S BLACK STEEL - 4" DIA. TUBING (20' x 20' x 20')	10-3 1/2" DIA. STEEL
	3	[Symbol]	1" SCH 40S BLACK STEEL - 4" DIA. TUBING (20' x 20' x 20')	10-3 1/2" DIA. STEEL
	4	[Symbol]	1" SCH 40S BLACK STEEL - 4" DIA. TUBING (20' x 20' x 20')	10-3 1/2" DIA. STEEL
ZONE 2	1	[Symbol]	1" SCH 40S BLACK STEEL - 4" DIA. TUBING (20' x 20' x 20')	10-3 1/2" DIA. STEEL
	2	[Symbol]	1" SCH 40S BLACK STEEL - 4" DIA. TUBING (20' x 20' x 20')	10-3 1/2" DIA. STEEL
	3	[Symbol]	1" SCH 40S BLACK STEEL - 4" DIA. TUBING (20' x 20' x 20')	10-3 1/2" DIA. STEEL
	4	[Symbol]	1" SCH 40S BLACK STEEL - 4" DIA. TUBING (20' x 20' x 20')	10-3 1/2" DIA. STEEL
	5	[Symbol]	1" SCH 40S BLACK STEEL - 4" DIA. TUBING (20' x 20' x 20')	10-3 1/2" DIA. STEEL
	6	[Symbol]	1" SCH 40S BLACK STEEL - 4" DIA. TUBING (20' x 20' x 20')	10-3 1/2" DIA. STEEL
	7	[Symbol]	1" SCH 40S BLACK STEEL - 4" DIA. TUBING (20' x 20' x 20')	10-3 1/2" DIA. STEEL
	8	[Symbol]	1" SCH 40S BLACK STEEL - 4" DIA. TUBING (20' x 20' x 20')	10-3 1/2" DIA. STEEL
	9	[Symbol]	1" SCH 40S BLACK STEEL - 4" DIA. TUBING (20' x 20' x 20')	10-3 1/2" DIA. STEEL
	10	[Symbol]	1" SCH 40S BLACK STEEL - 4" DIA. TUBING (20' x 20' x 20')	10-3 1/2" DIA. STEEL
	11	[Symbol]	1" SCH 40S BLACK STEEL - 4" DIA. TUBING (20' x 20' x 20')	10-3 1/2" DIA. STEEL
	12	[Symbol]	1" SCH 40S BLACK STEEL - 4" DIA. TUBING (20' x 20' x 20')	10-3 1/2" DIA. STEEL

CONSTRUCTION NOTES

FINISH NOTES

PLUMB LEGEND

ELECTRICAL LEGEND

MECHANICAL LEGEND

GENERAL NOTES

A 100.00

FLOOR PLAN



CHEFDAVE ●●●●●martin

Chama Mama Working Menu

Veg Items-

Stuffed Red Bell Peppers-
Walnut stuffing

Stuffed Eggplant-
with pomegranate

Magic Mushroom Soup with Tarragon

Lobio-

Organic Kidney beans are marinated overnight with red onion, garlic, cilantro, vinegar and slow cooked in a clay pot served with fresh baked Mchadi (Georgian style combread)

Pickled Plate-

Garlic, red onion, red cabbage, green tomato and Hungarian peppers (red)

Spreads-

- 1- Walnut
- 2- Spinach

Platter of Roasted Mushrooms & Red Bell Pepper

Cucumber, Tomato & Red Onion Salad with Ralsins

Arugula, Beet & Green Bean Salad

Fried Squash/Pumpkin with Sea Salt & Pomegranate Sauce

Proteins-

Chicken Soup (chikhirtma)

Creamy Garlic Chicken- Roasted Chicken Thighs in creamy garlic broth

Kharcho w Short Ribs (TBD)

Kebabs- Lamb, Chicken & Beef (marinades and seasoned)
With dipping sauces-walnut yogurt & plum sauce

Mini Meatballs with Spicy Tomato Sauce

Pan Seared Hake with Cauliflower & Pistachio Sauces

Breads-

Klin Bread for the table-if we get the tandoori style oven

4615 Center Blvd #3807 ~Long Island City, NY 11109~ 949-378-2006
chefdavemartin.com and chefdavemartin@gmail.com

CHEFDAVE ●●●●●martin

Khachapuri-3 types
Egg & Cheese
Georgian Sulguni Cheese
Mushrooms, Tarragon & Garlic

Khinkali- 2 types
Our signature Georgian style dumplings that are pan fried with the filling of your choice of:
Braised Lamb, onions, chili pepper & cumin and braising liquid
OR
Nadugi Cheese, walnut & mint (Vegetarian)

Cornbread –small madeline size /MCHADI

Green Grits-

Croquettes-2 types
Sulguni
Braised Beef

Cheeses-

Sulguni- house made

Achma-Georgian Lasagna

Immeruli
Guda
Feta

Sweets-

Walnut caramel truffle-

Orange & Berry Pound Cake with Clementine Sauce

Fried Donuts filled with vitamin C sauce

Parfait style dessert

Lemon Tart

Tabletop Items-

Red & Green Adjika

Kiln Bread

Tarragon Vinegar

Beverages-

4615 Center Blvd #3807 ~Long Island City, NY 11109~ 949-378-2006
chefdavemartin.com and chefdavemartin@gmail.com

CHEFDAVE ●●●●●martin

Wines-

European Selection makes the most sense-fun & affordable

Beer-

Euro beers and maybe Estrella on tap

Water-

Still & Sparkling on tap

Coffee & Tea Program-

You have this handled

House made Beverages and Non-Alcoholic Beverages-

Vitamin C drink & Tea version

&

Pom Lemonade