Manhattan Community Board 4 (All Fields Must Be Completed)

Liquor License Stipulations Application

CORPORATION NAME Chelsea Corporate Events LLC			DOING BUSINESS AS (DBA)								
			The Glasshouses								
STREET ADDRESS	S		CROSS STREETS		ZIP CODE						
660 12th Avenu	ıe		W 48th & W 4	19th Streets	10019						
OWNER	NAME:	Jack Guttman		NAME: Terrence	R Flynn Jr.						
(Attach a list of all the people that will	PHONE:	914-671-4180	ATTORNEY/ REPRESENTAIVE	PHONE: 718-945-1000							
be associated/listed with the license)	EMAIL:	jackgutt@gmail.com		EMAIL: trflynnjr@gmail.com							
	NAME:	Perry Brocco		NAME: 677 Elev	enth Avenue LLC						
MANAGER	PHONE:	212-634-8797	LANDLORD	PHONE: 212-671-0578							
	EMAIL:	perry@theglasshouses.com		EMAIL: jiacono(Dbramautogroup.com						
APPLICATI	ON TYP	E (Check One)									
	Has applicar	nt owned or managed a similar business?		Ø s NO							
New	What is/was	the name and address of establishment?		The Glasshouses							
	What were th	ne dates applicant was involved with this former premis	se?								
	What is the p	vior license # and expiration date?									
Transfer	is applicant r	naking any allerations or operational changes?		YES	NO.						
	If alterations	or operational changes are being made, please descri	ibe/list all changes.								
(Alteration	What is the c	urrent license # and expiration date?									
Alteration	Please list/de	escribe the nature of all the changes and attach the pla	ins:								
METHOD O	F OPER	ATION									
TYPE OF ALCOH	IOL	Stiquor/Wine/Beer	O Beer		Wine & Beer						
ESTABLISHMENT TYPE		Restaurant Cabaret C	Night Club O Hote	Bar/Tavem	Catering Establishment						
		Adult Entertainment O Wine Ba	r O Dance Club	O Sports Bar O Club (Fratemal Organization – Members Only)							
Has applicant/owner filed with the SLA? If yes, when? If no, when do you plan to file?			YES 10	Within the next t	ew weeks.						
	cense estab	Pif yes, please attach a diagram of the plishments within a 500 ft. radius of your terest Statement.	YES 🚱								
is the 200 Foot Rule schools and houses		? If yes, please attach a diagram of the that trigger the rule.	YES 🚳								
	r(s) read MC	CB4 Policy Regarding Concentration and	10 NO								

Maria (1981)		l .	(*Closing time w			100	200			200		T		
		MONDA	MONDAY TUESDAY		WEDNESDAY		THURSDAY		FRIDAY		SATURDAY		UNDAY	
HOURS*	Operation	12pm-12a	m 12pm-12am	12pm-12am 12pm-12am		12pn	12pm-12am		12pm-12am		12pm~12am		12pm-12am	
(Indoor Only)	Kitchen	6pm-11pn	n 6pm-11pm		6pm-11pm	6pm	6pm-11pm		6pm-11pm		6pm-11pm		6pm-11pm	
	Music 8pm-11pm		n 8pm-11pm	8pm-11		8pm	8pm-11pm		8pm-11pm 8p		pm-11pm 8pm		-11pm	
If you plan to l (Circle all that	have music, what apply)	type(s)?	васк о јо	UND LIVIONUSIC		(C	0		JUKE BOX		KARAOKE			
					occ	UPANCY								
	Capaci (Certific of Occupa	cate	Maximum#of Persons You Anticipate Occupying Premises (Including Employees)	Numb of Tab	New York Table 1997 And St.	was a second to be a second	per of Serv Only Bars	rice	Number Stand-Up I		Number of at Stand-U			
INSIDE	1800		2000 1800	180	1800	6	6		6		0			
OUTSIDE (Other than sidewalk café)	UTSIDE Uther than / 100 CV DES			0	0	1	1		1		0			
SIDEWALK CAFÉ	EWALK _			0	0									
How many floo	rs are there? Wh	at is the cap	pacity for each floor?	?		1								
How frequently	will the owner(s)	be at the e	stablishment?			alw	ays							
Will you be app there be dancir		to apply fo	r a cabaret license v	with DCA	\? If yes, will	YES	Ø)							
Will applicant h	ave bottle or tabl	e service fo	r beverage alcohol?	ı		YES	0							
Nill you be hos	ting private; pron	notional or c	corporate events?	***************************************		10%	NO							
Nill outside pro	moters be used	on a regular	basis? If yes please	e describ	pe.	YES	0							
Will you have a security plan? If, yes please attach.					Øs.	NO	Wi	II be emailed	l sepa	rately alon	g with o	ther docs		
Will security plan be implemented?					Øs	NO								
Will State certified security personnel be used?						\v@	NO							
Will New York Nightlife Association and NYPD Best Practices be followed?					Ø	NO								
Will applicant be using delivery bicycles? If yes, how many?					YES	0								
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	0								
Where will deliv	ery bicycles be s	tored during	the day when not in	n use?										

LOCATION & ZONING	
is this a Special District? If yes, is it Clinton, West Chelsea or Hudson Yards?	Øs No
Does the building have a Certificate of Occupancy ("C of O") or a letter of no objection?	O NO
Is a Public Assembly permit required?	Øs No
Are your plans filed with DOB?	YES To be filed in January 2016

Community Notification/Rela	lions							
NOTIFICATION:	# 1	West 45th Street B West 47th/48th Str	West 45th Street Block Association: Tim Tanner at tangotanner@gmail.com West 47th/48th Streets Block Association: Larry Roberts at larrymichaetroberts@gmail.com					
List all block associations; tenant associations, co-op boards or condo boards of residential buildings; and	# 2	!	Vest 45th Street Block Association (between 9th/11th Aves): Chana Widawsky at chanawid@gmail.c West 47th/48th Streets Block Association: Kim Bogues at jamesbogues@gmail.com					
community groups that applicant has notified regarding its application. For	# 3		West 46th Street Block Association: Allison Tupper atallisontupper@verizon.net Vest 47th/48th Streets Block Association: Elke Fears at aefearshk@earthlink.net					
each please list both the organization and individual you contacted	# 4		Vest 47th/48th Streets Block Association: Chuck Vassallo at chasmv@hotmail.com Vest 47th/48th Streets Block Association: Steven Riedi at chluderemyc@yahoo.com					
	# 5	West 47th/48th Streets Block Association: Nancy Roylance at nancyroylance@ymail.com West 50th/51st Streets Block Association: Steve Belida at hk5051@gmail.com						
Please provide dates when applicant met w	ith the gr	oups listed above.	No dates hav	ve bee	en set up yet.			
Who was your contact person at each grou	with?	We did not meet anyone yet.						
When did applicant post the notice that was	?	December 16, 2015						
Where did applicant post the notice that wa	J?	On the front	t door	of the building.				
Will applicant provide owner cell phone nuncomplaints that arise? Please provide number		0	Os	NO				
Will applicant inform the Community Board provide a hyperlink to applicants jobs webp	s job openings and/or		Ds.	NO				

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	0				
Do you plan any changes to the existing façade? If yes, please describe.	(Øs	NO	lt's	being built new.		
Will applicant have a vestibule within the establishment?	Øs	NO				
Will applicant use a storm enclosure?	YES	0				
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?	(NO				
Will applicant comply with the NYC noise code?	Ø	NO				
Will the establishment have any of the following: (circle all that apply)	FREN	CH DOOF	ιs	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?	Ø	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?	Ø	NO				
Has applicant obtained an acoustical report from a certified sound engineer to assess potential noise disturbance to the neighboring residents and buildings?	YES	0				
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?	Ø	NO				
Will the kitchen exhaust system extend to the roof?	(D)	NO				
Will the establishment have an illuminated sign?	()	NO		***************************************		
Will the establishment have a canopy extending over the sidewalk?	Øs	NO				
Where will the air conditioner be located? What type is it?	Roof	top units	·			
When was the air conditioner installed?	To be installed					

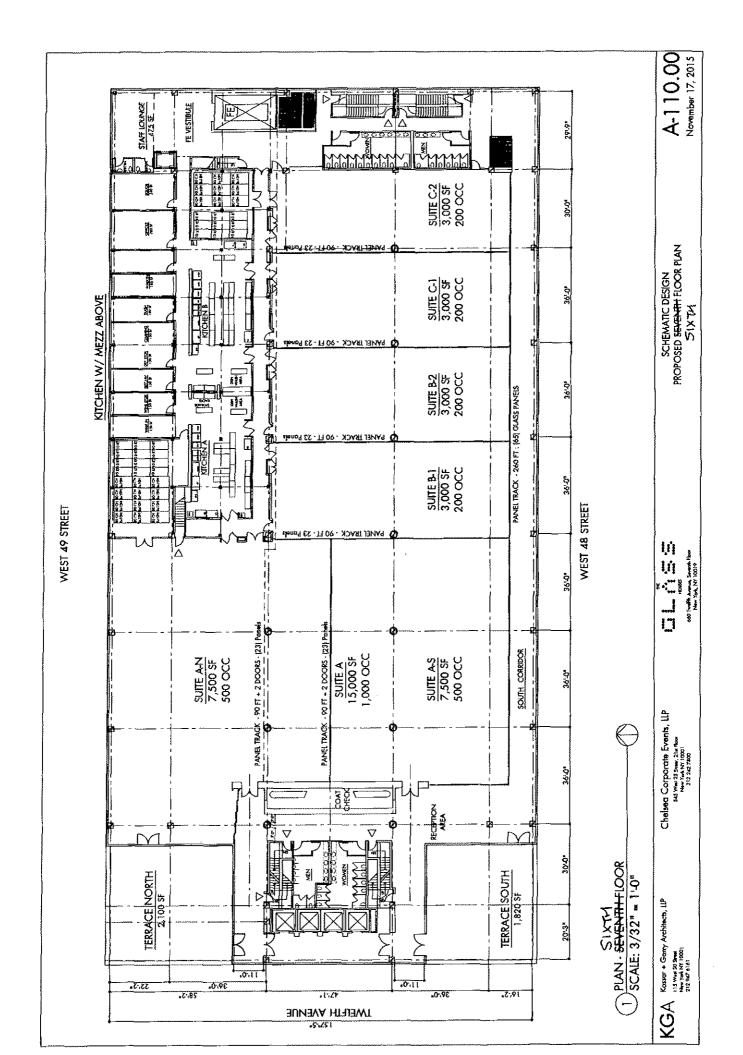
OUTDOOR ITEMS - OTHER THEN SIDEWALK CAFÉ		
Has the applicant/owner(s) read MCB 4 Rear Yard Rooftop Policy?	Øs	NO
Will applicant use any outdoor spaces: rooftop, rear yard, patio, porch, balcony, pavilion, tents, deck or gazebo? If yes, which one(s)?	O	NO
Are the floorplans for the outdoor space(s) included?	10	NO
Will applicant close and vacate the outdoor space(s) by 11PM on Friday & Saturday and 10 PM on all other days?	100	NO
Will the service and consumption of alcohol in any outdoor space only be via seated food service?	VD	NO
Will applicant not allow standing space for patrons to drink or smoke in any outdoor space(s)?	Os	NO
Will there be no amplified music, as per the law?	(B)s	NO
If amplified sound is played inside the establishment, will windows and doors be closed?	0	NO.
Will applicant agree to post signs outside asking customers to respect the neighbors'?	Ø	NO
Will applicant agree to train staff to encourage a peaceful environment?	Ø	NO
Will applicant provide effective sound control (landscaping enclosure, soundproofing tenants apartments)	Ø	NO:
Will there be a lighting plan that allows safe usage of the outdoor space without disrupting neighbors?	Ø	NO NO

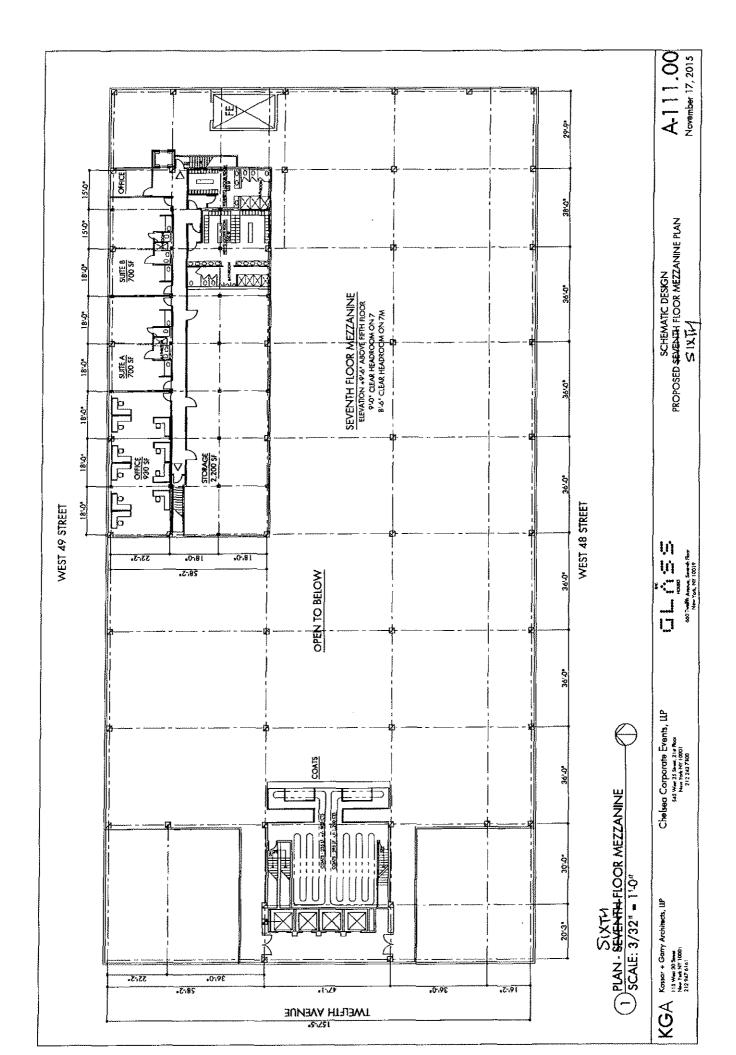
OUTDOOR ITEMS - SIDEWALK CAFÉ - There will be no side	walk cal		
Has the applicant/owner(s) read MCB4 Sidewalk Café Policy?	YES	NO	
Will applicant be applying for a sidewalk café now or in the future?	YES	NO	
Is applicant in this application seeking to include a sidewalk café in its liquor license?	YES	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 cafe?	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 21st and March 21st, 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 cafe and the closes obstruction including construction barricades?	YES	NO	

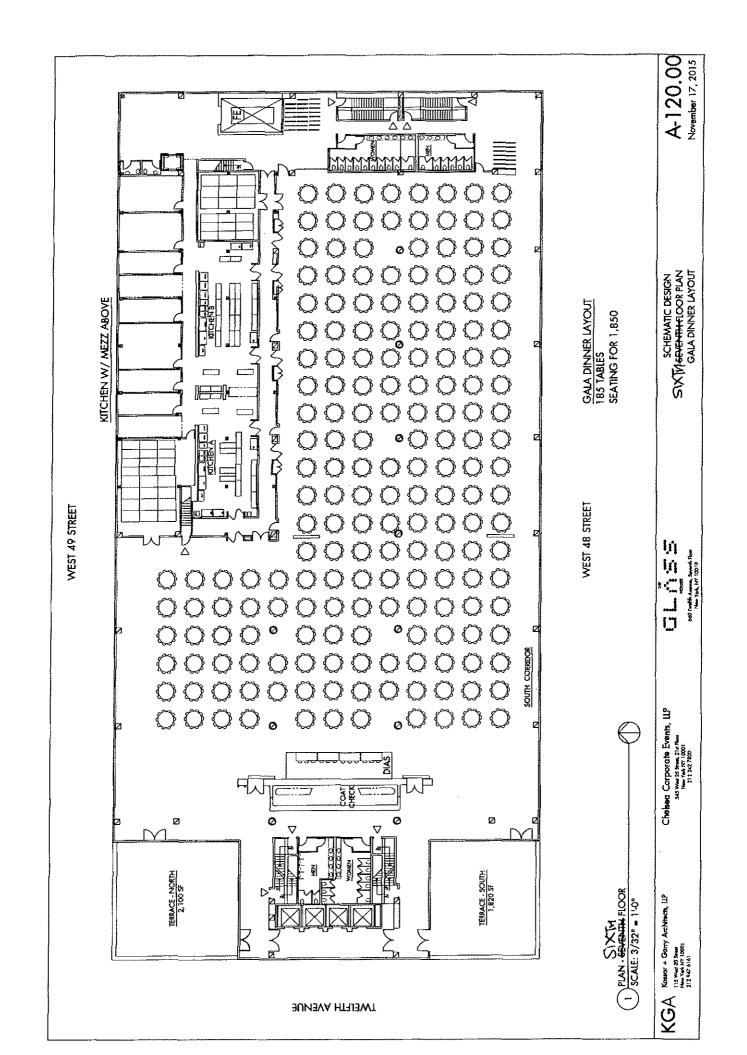
ADDITIONAL STIPULATIONS: (Office Use Only)
- Windows abuting outdoor space will not capable of being opened
- There will be no music or amplified sound in the outdoor space
- All events will be private and not open to the public. There will be no tickets or admission sold in advance or at the door
- Applicant will provide contact number to the community
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

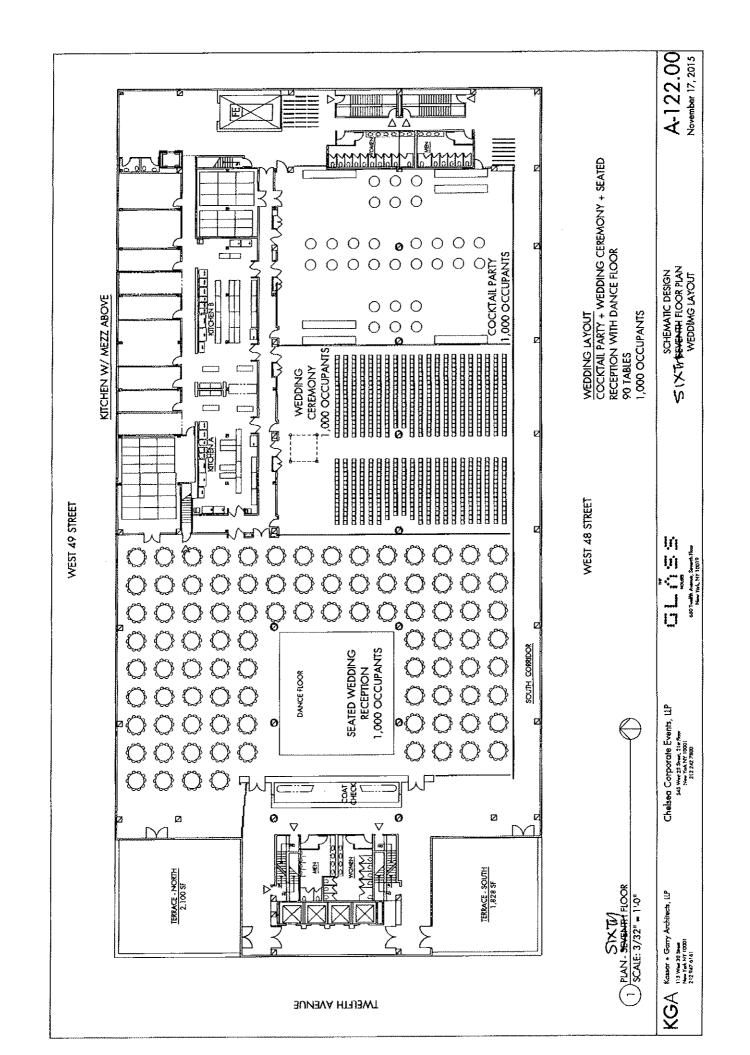
ADDITIONAL STIPULATIONS: (Office Use Only), Continued
the extent any additional stipulation on pages 7 and 8 of this application conflicts with any response on
nges 1 – 6 of this application, the stipulations on pages 7 and 8 control.

Denial unless all stipulations agreed to by applicant/owner are part of the method of Manhattan Community Board 4 (MCB4) recommends: operation O Denial O Approval **CB4 REPRESENTATIVES** Nelly Gonzalez Frank Holozubiec Burt Lazarin CB4 BLP Committee Co-Chair CB4 BLP Committee Co-Chair CB4 Assistant District Manager 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. Verified by PDFfiller I 12/15/2015 SIGN HERE Jàck Gillitha 12/15/2015 SIGNATURE OF APPLICANT DATE PRINT NAME OF APPLICANT









A-110.00 November 17, 2015 \$5.0 SUITE C-2 3,000 SF 200 OCC 1 ŧ SCHEMATIC DESIGN PROPOSED SEVENTIFICOR PLAN STXTA T T S N S O D 3,000 SF 200 OCC KITCHEN W/ MEZZ ABOVE 丰 **ķ**. 3,000 SF 200 OCC 1); j. PANEL TRACK - 260 FT. (65) GLASS PANELS 1 (} ; 排 SUITE B-1 3,000 SF 200 OCC WEST 48 STREET WEST 49 STREET New York, NY 10032 90 FF + 2 300085 - (23) Pose 90 FT + 2 DOORS - (23) Po SUITE A 15,000 SF 1,000 OCC SOUTH CORREDOR SUITE AN 7,500 SF 500 OCC SUITE AS 7,500 SF 500 OCC Chelsea Carporate Events, LIP
sis must share a series
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sis sea sea must series ∇ ğ PLAN - SEVENTH FLOOR 1 SCALE: 3/32" = 1-0" TERRACE SOUTH TERRACE NORTH Kesser + Gorry Architects, LP 112 steels 112 hours and 112 steels 112 steels 113 steels 20:31 *A*5.11 AM HOOK .2.2. .Z·.85 KGA KGA TWELFTH AVENUE

-Numbers 1 thru 10 marked in pen indicates locations where the security guards will be placed. Security Plan



Sample Menu Reception & Seater Dinner

Butlered Drinks White Wine Sparkling Water with Lime

Bar Snacks Maple Bacon Popcorn Dark Chocolate Espresso Bark

Passed HDs
Steak Frites
Sbeef Short Rib Wellington
Yellowtail Sashimi
Lobster Mac and Cheese
Chicken Waffles
French Onion Soup Grilled Cheese
Five Mushroom Ragout Tartle
Artichoke Fondue

Seated Dinner
Butter Trio: Herb, Truffle, Sea Sal
Iceberg Lettuce Wedge with crumbled blue cheese, buttermilk dressing
Biscuits and Baguettes
Braised Short Ribs and Filet
Lemon Thyme Baked Branzino

Coffee & Tea

NOTE: This is just a sample menu.

Since we are not a restaurant, our menu will change per event.

