

Manhattan Community Board 4

Liquor License/Sidewalk Cafe Stipulations Application

(All Fields Must Be Completed)

CORPORATION NAME EL MIL SABORES INC.		DOING BUSINESS AS (DBA) N/A	
STREET ADDRESS 695 9TH AVENUE, NY, NY 10036		CROSS STREETS 47 AND 48 STREETS	ZIP CODE 10036
OWNER <small>(Attach a list of all the people that will be associated/listed with the license)</small>	NAME: ERUVEY MENDOZA	ATTORNEY/ REPRESENTATIVE	NAME: ENRIQUE LEAL, ESQ
	PHONE: 646-327-0305		PHONE: 212-927-5972
	EMAIL: ERUVEYMENDOZA73@GMAIL.COM		EMAIL: ENRIQUELEAL219@GMAIL.COM
MANAGER	NAME: SAME AS ABOVE	LANDLORD	NAME: CLINTON CORNER HDFC
	PHONE:		PHONE: 212-810-6409
	EMAIL:		EMAIL: CLINTONCHDFC@GMAIL.COM
APPLICATION TYPE (<input checked="" type="checkbox"/> <i>Liquor License</i> <input type="checkbox"/> <i>Unenclosed Sidewalk Cafe</i>)			
<input checked="" type="radio"/> New	Has applicant owned or managed a similar business?	YES	<input checked="" type="checkbox"/> 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
	<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 checked="" type="radio"/> Restaurant <input type="radio"/> Cabaret <input type="radio"/> Night Club <input type="radio"/> Hotel <input 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"/> NO	WILL FILE JANUARY, 2020
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.	YES	<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"/> NO	
Has applicant/owner(s) read MCB4 Policy Regarding Concentration and Location of Alcoholic-Serving Establishments?	<input checked="" type="checkbox"/> YES	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	7am 9pm	7am 9pm	7am 9pm	7am 9pm	7am 9pm	7am 9pm	7am 6pm	
	Kitchen	7am 9pm	7am 9pm	7am 9pm	7am 9pm	7am 9pm	7am 9pm	7am 6pm	
	Music	NEVER							
If you plan to have music, what type(s)? (Circle all that apply)		BACKGROUND		LIVE MUSIC	DJ	JUKE BOX	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	N/A	13/14	5	2 ea.	NONE	NONE	NONE		
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?					ONE FLOOR - APPROX 12 CUSTOMERS				
How frequently will the owner(s) be at the establishment?					DAILY				
Will there be dancing?					YES	NO			
Will applicant have bottle or table service for beverage alcohol?					YES	NO			
Will you be hosting private; promotional or corporate events?					YES	NO			
Will outside promoters be used on a regular basis? If yes please describe.					YES	NO			
Will you have a security plan? If, yes please attach.					YES	NO			
Will security plan be implemented?					YES	NO			
Will State certified security personnel be used?					YES	NO			
Will New York Nightlife Association and NYPD Best Practices be followed?					YES	NO			
Will applicant be using delivery bicycles? If yes, how many?					YES	NO	1		
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			
Where will delivery bicycles be stored during the day when not in use?					BASEMENT				

LOCATION & ZONING		
Is this a Special District? If yes, is it Clinton, West Chelsea or Hudson Yards?	YES	<input checked="" type="checkbox"/> NO
Does the building have a Certificate of Occupancy ("C of O") or a letter of no objection?	<input checked="" type="checkbox"/> YES	NO
Is a Public Assembly permit required?	YES	<input checked="" type="checkbox"/> NO
Are your plans filed with DOB?	YES	<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	SEE ATTACHED LIST (THE ONE FROM CBB4)
	# 2	
	# 3	
	# 4	
	# 5	
Please provide dates when applicant met with the groups listed above.	NONE	
Who was your contact person at each group you met with?	N/A	
When did applicant post the notice that was provided?	12/21/19	
Where did applicant post the notice that was provided?	FRONT GLASS DOOR	
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"/> YES	NO 646-327-0305
Will applicant inform the Community Board office of its job openings and/or provide a hyperlink to applicants jobs webpage?	YES	<input checked="" type="checkbox"/> NO BUT WILL DO SO IF YOU WISH

BUILDING DESIGN			
State the name and type of business previously located in the space.	695 LEON BAKERY INC - bakery/eat in restaurant		
Has a liquor-licensed establishment previously occupied this space at any time? If yes, please provide the name of the business.	YES	NO	695 LEON BAKERY INC.
Do you plan any changes to the existing façade? If yes, please describe.	YES	NO	
Has the applicant/owner(s) read MCB 4 ADA Guidelines Memo?	YES	NO	
Is the entrance ADA Compliant?	YES	NO	
Do you plan any changes to the existing façade? If yes, please describe.	YES	NO	
Will applicant have a vestibule within the establishment?	YES	NO	
Will applicant use a storm enclosure?	YES	NO	
Will applicant agree not to place any items or obstructions on the sidewalk, for example, sandwich boards, sidewalk signs, freestanding menus and plants, as per the law?	YES	NO	
Will applicant comply with the NYC noise code?	YES	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	BUT NO MUSIC IS PLAYED
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	
Has applicant obtained an acoustical report from a certified sound engineer to assess potential noise disturbance to the neighboring residents and buildings?	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?	YES	NO	
Will the kitchen exhaust system extend to the roof?	YES	NO	
Will the establishment have an illuminated sign?	YES	NO	
Will the establishment have a canopy extending over the sidewalk?	YES	NO	
Where will the air conditioner be located? What type is it?	KITCHEN - CENTRAL A/C		
When was the air conditioner installed?	OVER 6 YEARS AGO		

OUTDOOR ITEMS - OTHER THEN SIDEWALK CAFÉ			
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	N/A
Will applicant not allow standing space for patrons to drink or smoke in any outdoor space(s)?	YES	NO	YES, CORRECT, WILL NOT ALLOW IT
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	N/A
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	N/A
Will there be a lighting plan that allows safe usage of the outdoor space without disrupting neighbors?	YES	NO	N/A

OUTDOOR ITEMS – SIDEWALK CAFÉ

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

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.

<p>Manhattan Community Board 4 (MCB4) recommends: (MCB4's recommendation is based on a vote taken at its February 5, 2020 full board meeting, with <u>39</u> members voting in favor of the recommendation, <u>0</u> members opposed, <u>0</u> members abstaining and <u>0</u> present but not eligible)</p>	<p><input checked="" type="radio"/> Denial unless all stipulations agreed to by applicant/owner are part of the method of operation</p> <p><input type="radio"/> Denial <input type="radio"/> Approval</p>
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CB4 REPRESENTATIVES

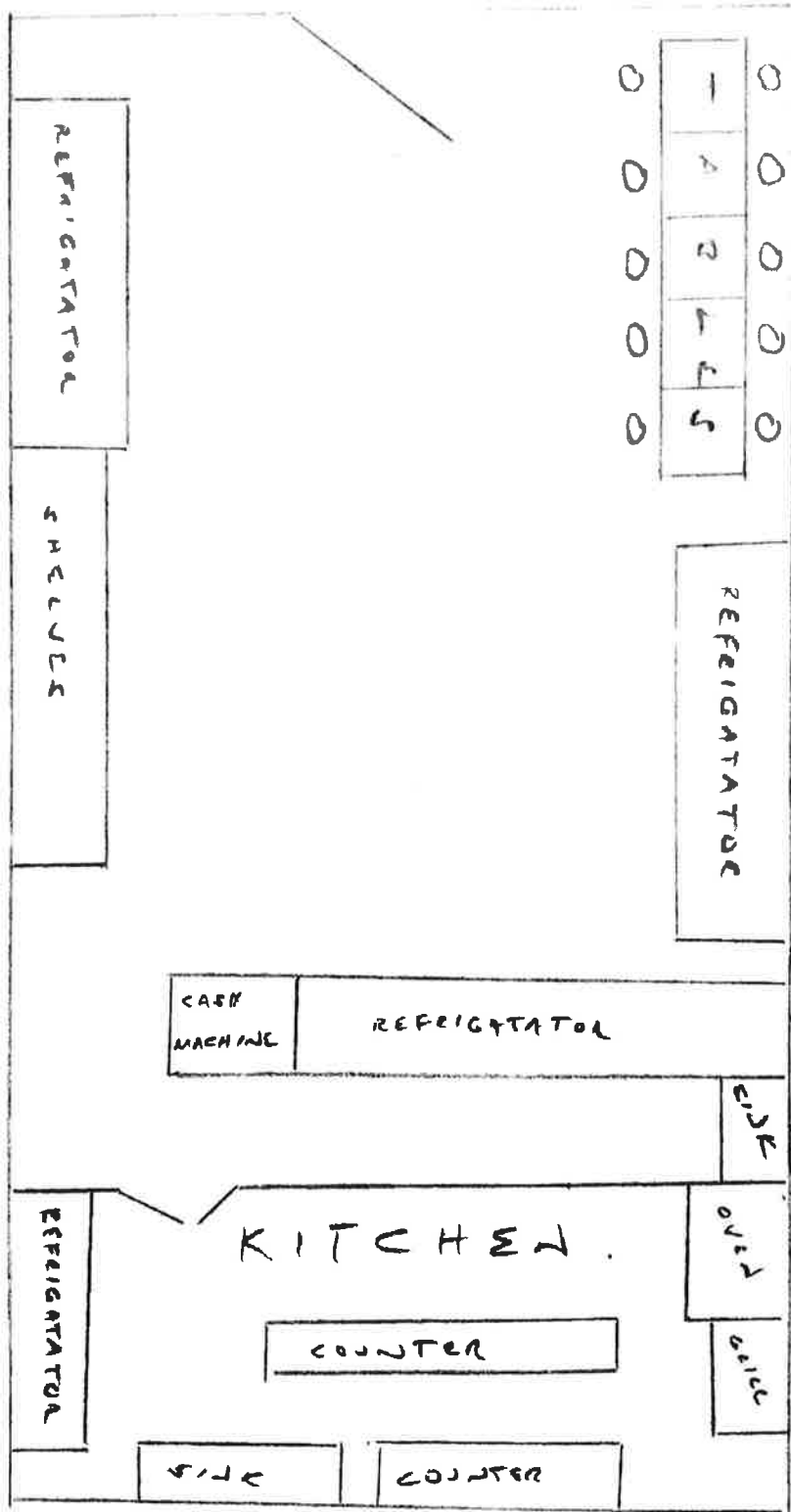
 Nelly Gonzalez CB4 Assistant District Manager	Frank Holozubiec CB4 BLP Committee Co-Chair	 Yoni Bussner CB4 BLP Committee Co-Chair
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APPLICANT AGREEMENT WITH THE COMMUNITY

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.

<p>SIGN HERE →</p>	<p>EL MIL SABORE INC</p> <p>PRINT NAME OF APPLICANT</p>	 <p>SIGNATURE OF APPLICANT</p>	<p>12/22/19</p> <p>DATE</p>
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9th AVE



EL MIL SABORES

Mexican Restaurant

FREE DELIVERY, TAX NOT INCLUDED

212.489-6677 / 212,956-0720

APPS & SALADS

GUACAMOLE & CHIPS \$9.95

QUESADILLAS.\$10.50

Mexican grilled cheese includes flour tortillas w/melted cheese

Lettuce crema+pico de gallo.

Add grilled chicken- or steak, or shrimp - vegs-\$4 extra

BORRACHO NACHOS.\$12

Tortilla chips, choice of pinto,charro,beans or black cheddar&monterrey

Jack cheese-jalapenos guacamole pico de gallo.

Add chorizo/ chicken / steak/carnitas/shrimps,\$4 extra

TOSTADAS CHARRAS.\$11.50

Black beans crema tomatoes corn red onion lettuces queso fresco .

Add grilled chicken /steak / shrimp /carnitas/al pastor,3extra

FLAUTAS.\$11.50

3rolld corn tortillas w/shredded chicken,fried+topped w/crema lettuce

Pico de gallo queso fresco

GORDITAS DE CHICHARRON . \$11

Lettuce/pico de gallo./cotija cheese

SPINACH,TACO SALAD.\$11

Flour tortilla,shell, dice peppers,tomatoes red onion, avocado ,corn, queso fresco,

Chipotle ranch dressing,

Add shrimp,/ grilled chicken,/ steak,/ portobello,4extra

GARDEN SALAD.\$11

Lettuce tomatoes red onion corn black beans cheddar+monterrey jack cheese

Jalapeno cilantro mustard vinaigrette.

QUINOA SALAD12.50

Quinoa/ corn /peppers/spinach/cilantro./chipotle ranch.

Add/ chicken /steak/shrimp/Portobello mushroom.\$4 extra

TORTAS & CEMITAS. \$10.50

Steak milanesa,

Chicken milanesa,

Chorizo,

Grilled chicken,

Grilled steak ,

Portobello mushroom,

Home made bread,roll ,Refried beans/ lettuce tomatoes/ jalapenos,or chipotle,/ avocado/ queso.

SOUP OF THE DAY + DELI SPECIALS

ENTREES

CARNE ASADA ,12.95

Served w/rice /beans/corn tortillas

STEAK RANCHERO, . \$14.95

Slice peppers, garlic, tomatoes, onios,served w/Spanish,rice/choice/of beans,charro pinto/ black beans

SPICY SHRIMPS.\$14.95

mex,seasoned, shrimp w/vegetables, rice, grilled pineapple+tomatillo salsa,

FAJITAS 14.95

Platter,w/peppers,onions,served,w/flour tortillas,rice/beans,guac,pico,crema
Steak,18,chicken16,shrimp,18,seasonal veggies,15

BURRITOS 12.50

Flour tortilla rolled w/ rice/beans/ your choice of meat
,salad, crema, pico,
al pastor,12, Chicken,11steak,12 shrimp,12 chorizo,11,carnitas12

BURRITO BOWL.12.50

Rice /beans,lettuce,queso fresco,,salsa ranchera or verde,guac/pico de gallo,13
Add,chicken, steak shrimp, al pastor, portobello mushroom

STREET TACOS.\$ 11.50

3,tacos, soft corn, tortillas/your choice of meat
Al pastor, Carnitas, steak, chorizo, fish, chicken, Portobello .

ENCHILADAS.\$15

3 corn tortillas rolled w/ verde,or guajillo, salsa, lettuce crema queso fresco,your choice of meat,
Chicken /carnitas /steak /chorizo/al pastor/vegetales

THE NY BURGER.\$14

Brisket,Short rib blend,w/cheddar/jack cheese served w/ lettuce tomato, onion, bacon egg/,w/spicy fries,

PAN SEARED SALMON.\$17

rice, sautéed cabbage,mushrooms poblano peppers onions, pineapple tomatillo salsa ,

SIDE ORDERS

Peppers,onions,4/ rice,3/ beans,3/ fries,4/ tortillas,4.

Consuming raw or undercooked meats, poultry, seafood, shellfish, or eggs may increase your risk of food borne illness, especially if you have medical conditions. Any allergies you may have, please notify your server.

EL MIL SABORES DESAYUNOS

BREAKFAST

(7AM-11AM)

CHICKEN CHILAQUILES \$9.95

Chicken + tortilla chips cooked in salsa verde or roja/ topped w/ crema, queso fresco, pico de gallo, and/extra 2 fried eggs & chicken 12.95

HUEVOS RANCHEROS \$10.50

Peppers, onions, tomatoes, organic scramble eggs/ charro beans, 2 corn tortillas,

BUTTERMILK PANCAKES \$12

Served w/ Banana, berries, whipped cream, maple syrup

Waffles \$12

Served/ w/banana, berries, whipped cream maple syrup

Mil Sabores 10.50

2 tamales of your choice (red, green, mole, 2 eggs / cheese)

Brekfast burritos \$10

Flour tortilla rolled w/organic scramble eggs /choice of/,ham / bacon / chorizo./cheese

VARIETY OF HOME MADE MEXICAN BREAD

HOT DRINKS

Coffee, hot chocolate, tea, arroz con leche

mil sabores

INC

Mexican Restaurant & Bakery



DUMPLING

ATM

ATM

NO PETS

ATM

NO PETS

Menu board with various food items and prices.

Menu board with various food items and prices.

