

Manhattan Community Board 4

Liquor License/Sidewalk Cafe Stipulations Application

(All Fields Must Be Completed)

CORPORATION NAME		DOING BUSINESS AS (DBA)	
THE JIN RESTAURANT CORP.		The Jin Restaurant	
STREET ADDRESS		CROSS STREETS	ZIP CODE
856 10TH AVE,		W 57TH ST & W 56TH ST.	10019
OWNER <i>(Attach a list of all the people that will be associated/listed with the license)</i>	NAME:	BEOM JIN OH	NAME: JENNY HONG
	PHONE:	917-751-3191	PHONE: 718-886-0818
	EMAIL:	KEVINOH93@GMAIL.COM	EMAIL: CKCONSULTINGCORP@GMAIL.COM
MANAGER	NAME:	JUNHYUK SHIN	NAME: SAM SUN NOH
	PHONE:	917-515-3691	PHONE: 917-751-3122
	EMAIL:	OCONERRU@YAHOO.COM	EMAIL: N/A
APPLICATION TYPE (<input checked="" type="checkbox"/> <i>Liquor License</i> <input type="checkbox"/> <i>Unenclosed Sidewalk Cafe</i>)			
<input checked="" type="checkbox"/> New Corp. CHANGE	Has applicant owned or managed a similar business?	YES XXX	NO
	What is/was the name and address of establishment?	856 10th ave.	
	What were the dates applicant was involved with this former premise?	09/2018	
<input checked="" type="checkbox"/> Corp Change/Class Change/Removal	What is the license # and expiration date?	#1314346 (set up new corporation, same owner)	
	Is applicant making any alterations or operational changes?	YES	NO XXX
	<i>If alterations or operational changes are being made, please describe/list all changes.</i>		
<input type="checkbox"/> 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="checkbox"/> Liquor/Wine/Beer & Cider <input type="checkbox"/> Beer & Cider <input checked="" 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?	YES	NO XX	7/23/2020
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	NO XX	N/A, This is RW license application.
Is the 200 Foot Rule applicable? If yes, please attach a diagram of the schools and houses of worship that trigger the rule.	YES	NO XX	There are no schools & churches within 200ft.
Has applicant/owner(s) read MCB4 Policy Regarding Concentration and Location of Alcoholic-Serving Establishments?	YES XX	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	12-10PM	12-10PM	12-10PM	12-10PM	12-10PM	12-10PM	12-10PM	12-10PM
	Kitchen	11AM-9:30PM	11AM-9:30PM	11AM-9:30PM	11AM-9:30PM	11AM-9:30PM	11AM-9:30PM	11AM-9:30PM	11AM-9:30PM
	Music	RECORDED	RECORDED	RECORDED	RECORDED	RECORDED	RECORDED	RECORDED	RECORDED

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	50	50	16	40	1	N/A	N/A
OUTSIDE <i>(Other than sidewalk café)</i>							
SIDEWALK CAFÉ							

How many floors are there? What is the capacity for each floor? 4TH FLOOR
(2.3.4th floors are residential)

How frequently will the owner(s) be at the establishment? everyday

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 n/a

Will you have a security plan? If, yes please attach. YES ~~NO~~

Will security plan be implemented? YES NO n/a

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~~

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?

LOCATION & ZONING			
Is this a Special District? If yes, is it Clinton, West Chelsea or Hudson Yards?	YES	NO XX	
Does the building have a Certificate of Occupancy ("C of O") or a letter of no objection?	YES XX	NO	
Is a Public Assembly permit required?	YES	NO XX	
Are your plans filed with DOB?	YES XX	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		
	# 2		
	# 3		
	# 4		
	# 5		
Please provide dates when applicant met with the groups listed above.	Due to covid 19, no meeting can held.		
Who was your contact person at each group you met with?			
When did applicant post the notice that was provided?	06/26/2020		
Where did applicant post the notice that was provided?	Store front		
Will applicant provide owner cell phone number to neighbors and respond to complaints that arise? Please provide number in space provided.	YES XX	NO	917-751-3191
Will applicant inform the Community Board office of its job openings and/or provide a hyperlink to applicants jobs webpage?	YES	NO	currently operating

BUILDING DESIGN			
State the name and type of business previously located in the space.	restaurant		
Has a liquor-licensed establishment previously occupied this space at any time? If yes, please provide the name of the business.	YES xx	NO	Beakon capital corp.DBA The Jim
Do you plan any changes to the existing façade? If yes, please describe.	YES	NO xx	
Has the applicant/owner(s) read MCB 4 ADA Guidelines Memo?	YES xx	NO	
Is the entrance ADA Compliant?	YES xx	NO	
Do you plan any changes to the existing façade? If yes, please describe.	YES	NO xx	
Will applicant have a vestibule within the establishment?	YES	NO xx	
Will applicant use a storm enclosure?	YES	NO xx	
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	They put the outside dining table during covid 19 and got a permit from DOT.
Will applicant comply with the NYC noise code?	YES xx	NO	
Will the establishment have any of the following: (circle all that apply)	FRENCH DOORS xx	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	They are opening the doors during the period of covid -19.
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 xx	NO	because indoor dining room can't available for customers.
Has applicant obtained an acoustical report from a certified sound engineer to assess potential noise disturbance to the neighboring residents and buildings?	xx 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 xx	NO	
Will the kitchen exhaust system extend to the roof?	YES xx	NO	
Will the establishment have an illuminated sign?	YES	NO xx	
Will the establishment have a canopy extending over the sidewalk?	YES	NO	
Where will the air conditioner be located? What type is it?	On the ceiling		
When was the air conditioner installed?	2years ago		

OUTDOOR ITEMS - OTHER THEN SIDEWALK CAFÉ

Has the applicant/owner(s) read MCB 4 Rear Yard Rooftop Policy?	YES xx	NO	
Will applicant use any outdoor spaces: rooftop, rear yard, patio, porch, balcony, pavilion, tents, deck or gazebo? If yes, which one(s)?	YES xx	NO	Space of sidewalk in front of restaurant during the period of covid-19
Are the floorplans for the outdoor space(s) included?	YES	NO xx	
Will applicant close and vacate the outdoor space(s) by 11PM on Friday & Saturday and 10 PM on all other days?	YES xx	NO	
Will the service and consumption of alcohol in any outdoor space only be via seated food service?	YES xx	NO	
Will applicant not allow standing space for patrons to drink or smoke in any outdoor space(s)?	YES xx	NO	
Will there be no amplified music, as per the law?	YES xx	NO	
If amplified sound is played inside the establishment, will windows and doors be closed?	YES xx	NO	
Will applicant agree to post signs outside asking customers to respect the neighbors'?	YES xx	NO	
Will applicant agree to train staff to encourage a peaceful environment?	YES xx	NO	
Will applicant provide effective sound control (landscaping enclosure, soundproofing tenants apartments)	YES xx	NO	
Will there be a lighting plan that allows safe usage of the outdoor space without disrupting neighbors?	YES xx	NO	

OUTDOOR ITEMS – SIDEWALK CAFÉ

Has the applicant/owner(s) read MCB4 Sidewalk Café Policy?	YES xxx	NO	
Will applicant be applying for a sidewalk café now or in the future?	YES	xxx 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 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)

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
 July 22, 2020 full board meeting, with 47 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 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 →

Beom Jin Oh

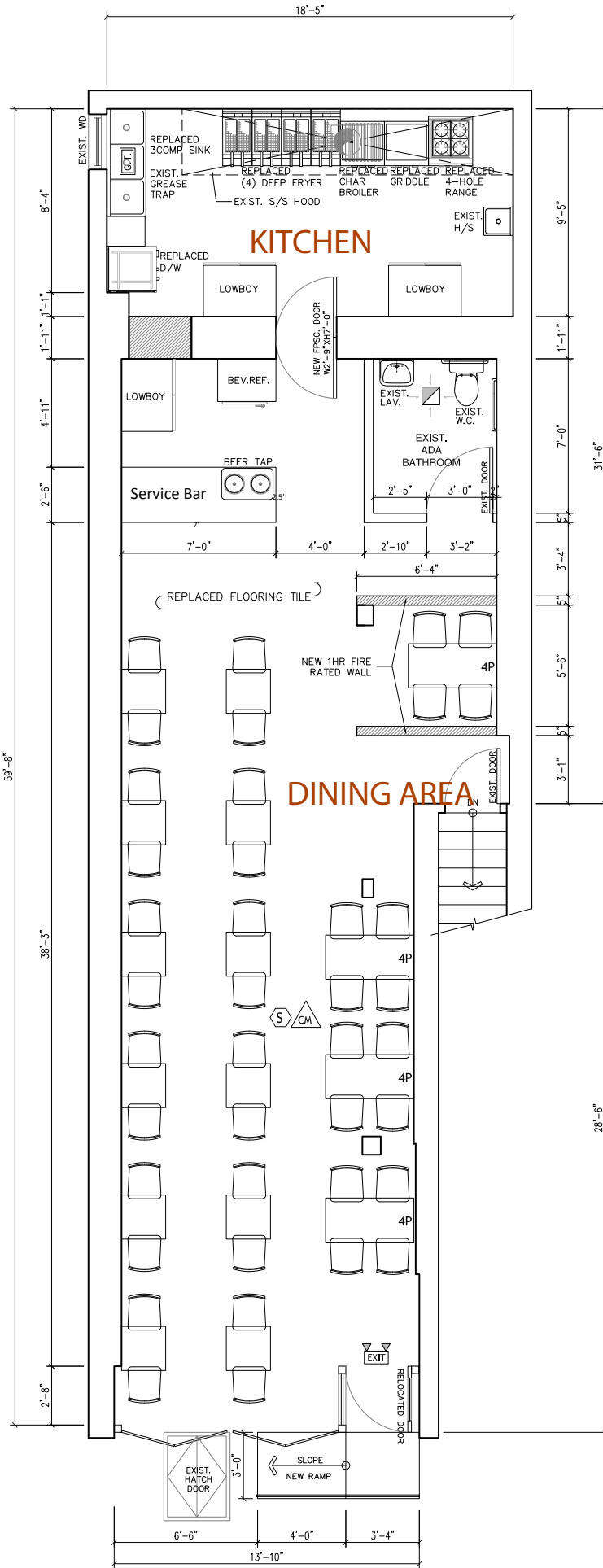
PRINT NAME OF APPLICANT



SIGNATURE OF APPLICANT

06/29/20

DATE



2 PROPOSED FIRST FLOOR PLAN
 A-2 SCALE 1/4" = 1'-0"

JIN ORIGIN – KOREAN FRIED CHICKEN

Small		Large	
Wing (7pcs)	13	Wing (11pcs)	19
Boneless (8pcs)	13	Boneless (14pcs)	19
Drumstick (4pcs)	12	Drumstick (7pcs)	18
Choose	ORIGINAL	SOYGARLIC	SPICY
		HALF&HALF	sauce

BEGIN with

Shrimp Scallion Pancake	11
Kimchi Pancake	10
BBQ Katsu Meatballs (6pcs)	11
Fried Beef Dumplings (4pcs)	8
Mozzarella Sticks (6pcs)	8
Kimchi Mozzarella Quesadilla	10
Steamed Tofu n' Sautéed Kimchi	12
Cheese Tteokbokki (Spicy Rice Cake) w/ Chicken Katsu	13
Grilled Chicken Taco (3pcs)	13
Bulgogi Beef Taco (3pcs)	13

with RICE (side salad follows)

JIN Fried Rice w/ Egg	14
Kimchi Fried Rice w/ Egg	14
Chicken Katsu w/ Korean White Rice	14
Bulgogi Beef over Korean White Rice	14

off FARM

Grilled Chicken Salad	12
Steamed Tofu Salad	11

off GRILL (korean rice follows)

Marinated Short Ribs w/ Corn Cheese	21
Thick Cut Pork Belly w/ Sautéed Kimchi	19
Bulgogi Beef w/ Caramelized Onions	17
Grilled Chicken w/ Sautéed Vegetables	17

with BRIOCHE BREAD (fries follow)

Beef Burger	14
Crispy Chicken Sandwich	13
Grilled Chicken Sandwich	13
Bulgogi, Kimchi, Mozzarella Cheese Sandwich	15

with NOODLE (kimchi follows)

Spicy Ramen w/ Braised Pork and Poached Egg	12
Spicy Ramen w/ Grilled Chicken and Poached Egg	12
Bulgogi Beef "Japchae" Stir-Fried Glass Noodles	13

HAVE FUN with

My Name is The Jin	34
9 Wings + 4 Drumsticks w/ 2 Beer on Tap	

Sentimental Rain

Jumbo Shrimp or Kimchi Pancake + 5 Wings with Makgeolli (korean rice wine)	32
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Gangnam Style

Braised Pork Belly, Steamed Tofu, Sautéed Kimchi w/ Pitcher and Charm Soju	42
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SIDES

Fries	5
Kimchi	4
Side Salad	3
Korean White Rice	2
Onion Rings	5
Sautéed Vegetables	6
Sizzling Corn Cheese	7

The Jin Restaurant Corp.

856 10th Ave, New York, NY 10019

