

Manhattan Community Board 4

Liquor License/Sidewalk Cafe Stipulations Application

(All Fields Must Be Completed)

CORPORATION NAME		DOING BUSINESS AS (DBA)	
Omakase LLC		Ikebana zen	
STREET ADDRESS		CROSS STREETS	ZIP CODE
401 w 53rd		9 ave	10019
OWNER <small>(Attach a list of all the people that will be associated/listed with the license)</small>	NAME:	Fangjian Yuan	NAME:
	PHONE:	908-705-6108	PHONE:
	EMAIL:	andrewyuan@highkeyny.com	EMAIL:
MANAGER	NAME:	Fangjian Yuan	NAME:
	PHONE:	908-705-6108	PHONE:
	EMAIL:	andrewyuan@highkeyny.com	EMAIL:
		ATTORNEY/ REPRESENTAIVE	801-803 LLC
		LANDLORD	732.301.2833
			srayapudi@srgrouppm.com
APPLICATION TYPE (<input type="checkbox"/> <i>Liquor License</i> <input type="checkbox"/> <i>Unenclosed Sidewalk Cafe</i>)			
<input type="radio"/> New	Has applicant owned or managed a similar business?		<input type="checkbox"/> YES <input 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?		<input type="checkbox"/> YES <input type="checkbox"/> NO
	<i>If alterations or operational changes are being made, please describe/list all changes.</i>		
<input checked="" type="radio"/> Alteration	What is the current license # and expiration date?		#1328765 8/31/2022
	<i>Please list/describe the nature of all the changes and attach the plans:</i> Change to Mon-Sun 11am-11pm		
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="checkbox"/> YES	<input checked="" type="checkbox"/> 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="checkbox"/> YES	<input 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.		<input type="checkbox"/> 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	<input type="checkbox"/> NO

We provide fine dining Janpanese Omakase experience to the neighborhood. They will love our food

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	11am-11pm	11am-11pm	11am-11pm	11am-11pm	11am-11pm	11am-11pm	11am-11pm
	Kitchen	11am-11p m	11am-11pm	11am-11pm	11am-11pm	11am-11pm	11am-11pm	11am-11pm
	Music	11am-11pm	11am-11pm	11am-11pm	11am-11pm	11am-11pm	11am-11pm	11am-11pm

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	75	45	11	20	0	0	0
OUTSIDE <i>(Other than sidewalk café)</i>							
SIDEWALK CAFÉ							

How many floors are there? What is the capacity for each floor? one floor, 75 people for first florr

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

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

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? No delivery bicycles

LOCATION & ZONING			
Is this a Special District? If yes, is it Clinton, West Chelsea or Hudson Yards?	YES	<input 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 type="radio"/> NO	
Are your plans filed with DOB?	YES	<input type="radio"/> 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	Hudson Yards Hell's Kitchen Alliance	
	# 2	West 44th Street (b. 9th/10th)	
	# 3	West 45th Street BA	
	# 4	Westmore 333 W 57	
	# 5	Manhattan Plaza T.A. (400 W. 43rd St.)	
Please provide dates when applicant met with the groups listed above.		I emailed them about the CB4 meeting next month	
Who was your contact person at each group you met with?		Bob Benfatto , Rudi Papiri , Armanda Cerniz,David C Stuart	
When did applicant post the notice that was provided?		9.21.2020	
Where did applicant post the notice that was provided?		storefront,	
Will applicant provide owner cell phone number to neighbors and respond to complaints that arise? Please provide number in space provided.		YES	<input type="radio"/> NO
Will applicant inform the Community Board office of its job openings and/or provide a hyperlink to applicants jobs webpage?		YES	<input type="radio"/> NO

BUILDING DESIGN			
State the name and type of business previously located in the space.	Gloria, Restaurant		
Has a liquor-licensed establishment previously occupied this space at any time? If yes, please provide the name of the business.	<input checked="" type="radio"/> YES	<input type="radio"/> NO	
Do you plan any changes to the existing façade? If yes, please describe.	YES	<input checked="" type="radio"/> NO	
Has the applicant/owner(s) read MCB 4 ADA Guidelines Memo?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	
Is the entrance ADA Compliant?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	
Do you plan any changes to the existing façade? If yes, please describe.	YES	<input checked="" type="radio"/> NO	
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 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?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	
Will applicant comply with the NYC noise code?	<input checked="" type="radio"/> YES	<input type="radio"/> 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?	<input checked="" type="radio"/> YES	<input type="radio"/> 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	<input type="radio"/> NO	
Has applicant obtained an acoustical report from a certified sound engineer to assess potential noise disturbance to the neighboring residents and buildings?	YES	<input checked="" type="radio"/> 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	<input type="radio"/> NO	
Will the kitchen exhaust system extend to the roof?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	
Will the establishment have an illuminated sign?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	
Will the establishment have a canopy extending over the sidewalk?	YES	<input checked="" type="radio"/> NO	
Where will the air conditioner be located? What type is it?	Hang on the wall		
When was the air conditioner installed?	4 years ago		

OUTDOOR ITEMS - OTHER THAN SIDEWALK CAFÉ

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

OUTDOOR ITEMS – SIDEWALK CAFÉ

Has the applicant/owner(s) read MCB4 Sidewalk Café Policy?	YES <input checked="" type="radio"/>	NO	
Will applicant be applying for a sidewalk café now or in the future?	YES	NO <input checked="" type="radio"/>	
Is applicant in this application seeking to include a sidewalk café in its liquor license?	YES	NO <input checked="" type="radio"/>	
If yes, has applicant submitted an application and plans to NYC Dept. of Consumer Affairs? Please attach application and plans.	YES	NO <input checked="" type="radio"/>	
Will applicant close and vacate the sidewalk café by 11 PM on Friday & Saturday and 10 PM on all other days?	YES	NO <input checked="" type="radio"/>	
Will applicant be serving alcohol in the sidewalk café? If so, will you have waiter service?	YES	NO <input checked="" type="radio"/>	
Will the café have a 3 ft. wide serving aisle running the entire length of the sidewalk cafe?	YES	NO <input checked="" type="radio"/>	
Will applicant mark the perimeter of the café on the sidewalk?	YES	NO <input checked="" type="radio"/>	
Will the service and consumption of alcohol in the sidewalk café only be via seated food service?	YES	NO <input checked="" type="radio"/>	
Will the sidewalk café not provide standing space for drinking or smoking?	YES	NO <input checked="" type="radio"/>	
Will applicant use any portable natural gas heaters? If so, do you have the requisite approvals from DOB & the Fire Department?	YES	NO <input checked="" type="radio"/>	
Will applicant have a lighting plan that will allow safe usage of the outdoor space without disrupting neighbors?	YES	NO <input checked="" type="radio"/>	
Will all furniture, plants and barricades be stored inside between the evening closing hours and the morning opening hours?	YES	NO <input checked="" type="radio"/>	
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 <input checked="" type="radio"/>	
Will applicant use umbrellas?	YES	NO <input checked="" type="radio"/>	
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 <input checked="" type="radio"/>	

ADDITIONAL STIPULATIONS: (Office Use Only)




- There will be no music of any kind in any outdoor space

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.

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<p>Manhattan Community Board 4 (MCB4) recommends: <i>(MCB4's recommendation is based on a vote taken at its November 4, 2020 full board meeting, with 44 members voting in favor of the recommendation, 0 members opposed, 0 members abstaining and 0 present but not eligible)</i></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

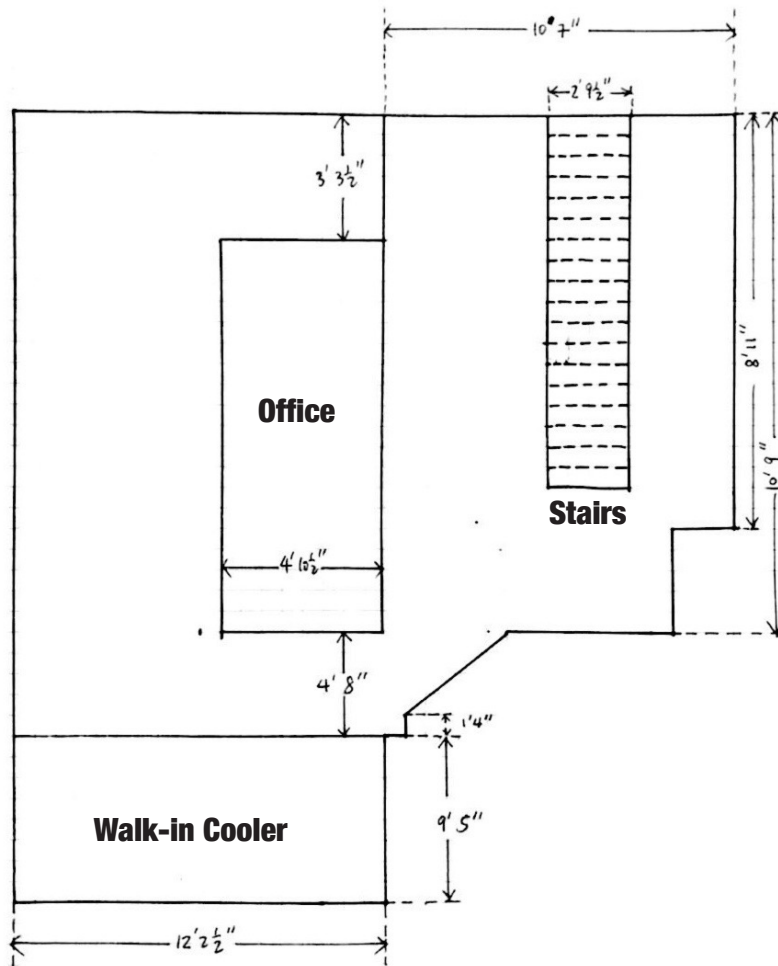
 Nelly Gonzalez <i>CB4 Assistant District Manager</i>	 Frank Holozubiec <i>CB4 BLP Committee Co-Chair</i>	 Burt Lazarin <i>CB4 BLP Committee Co-Chair</i>
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APPLICANT AGREEMENT WITH THE COMMUNITY

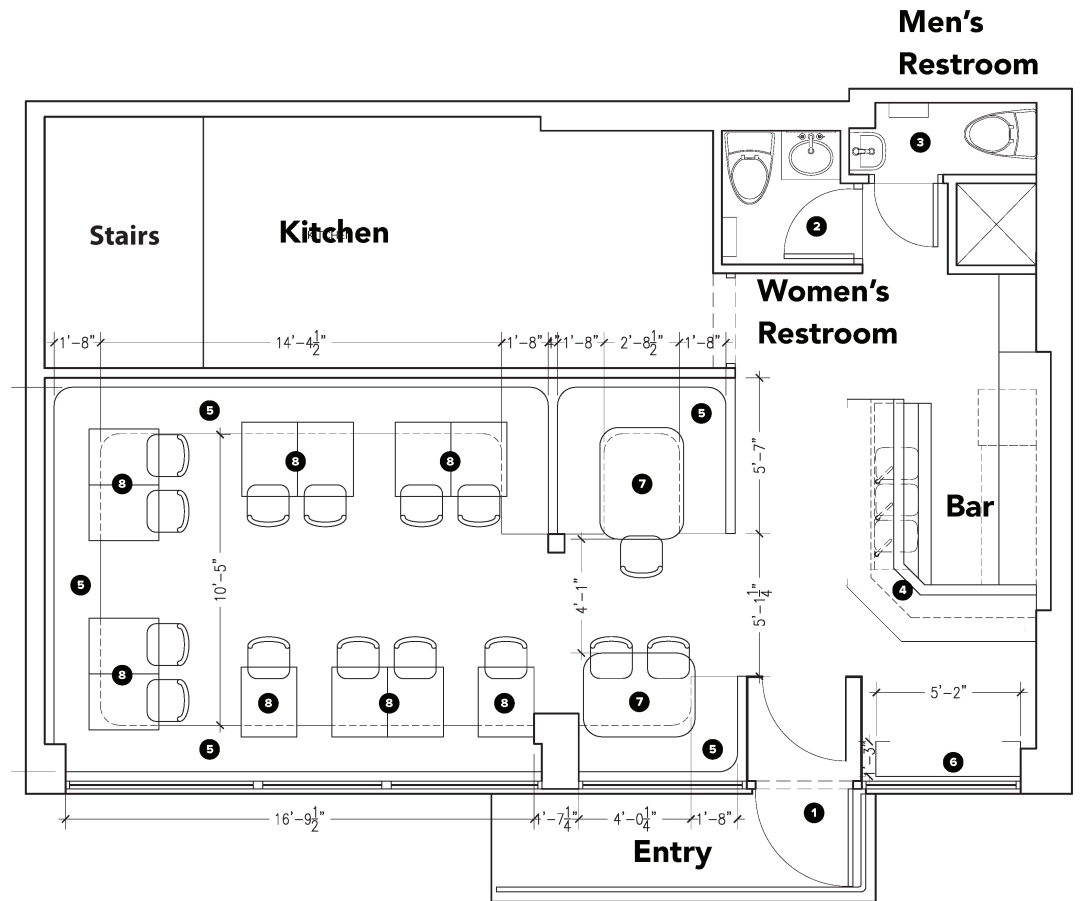
Applicant agrees to these stipulations as the basis for the community support of this application and acknowledges that all of these stipulations are essential prerequisites to the MCB4 recommendation regarding this application. Applicant agrees to have these stipulations incorporated in the method of 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>Fangjian Yuan</p> <p>PRINT NAME OF APPLICANT</p>	<p><i>Fangjian Yuan</i></p> <p>SIGNATURE OF APPLICANT</p>	<p>9.21.2020</p> <p>DATE October 13, 2020</p>
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Basement



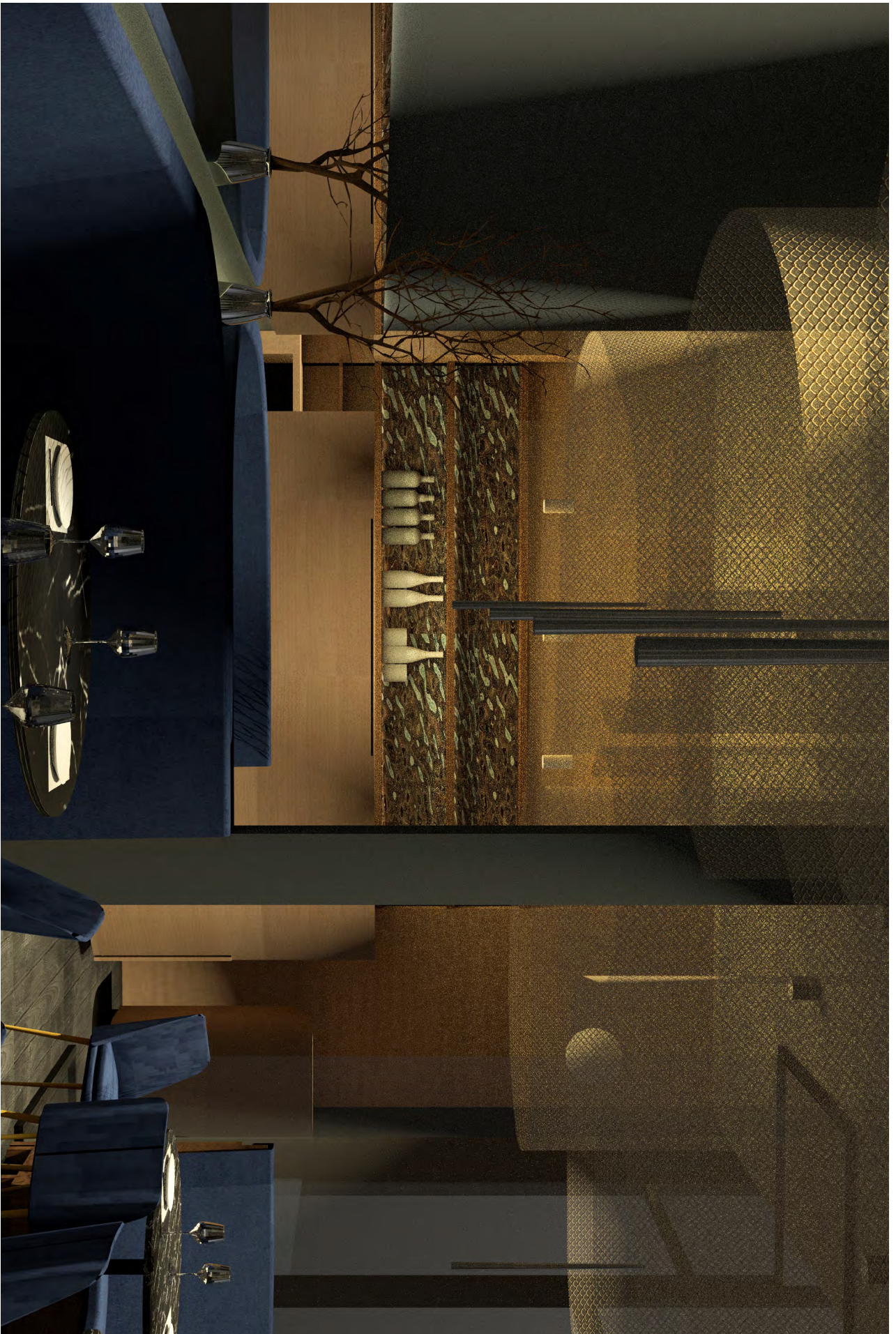
Restaurant

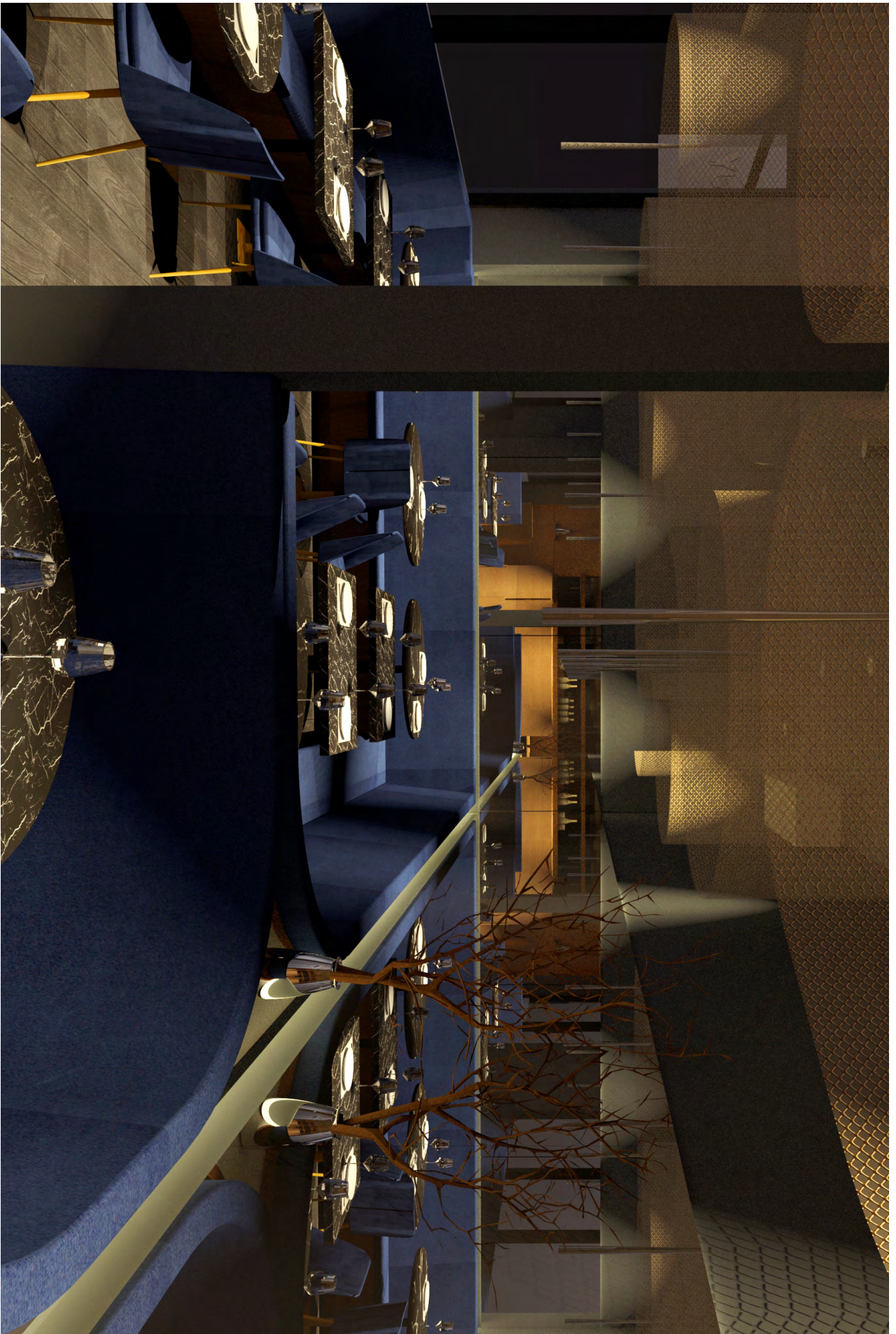


IKIBANA-ZEN RESTAURANT INTERIOR DESIGN REVIEW

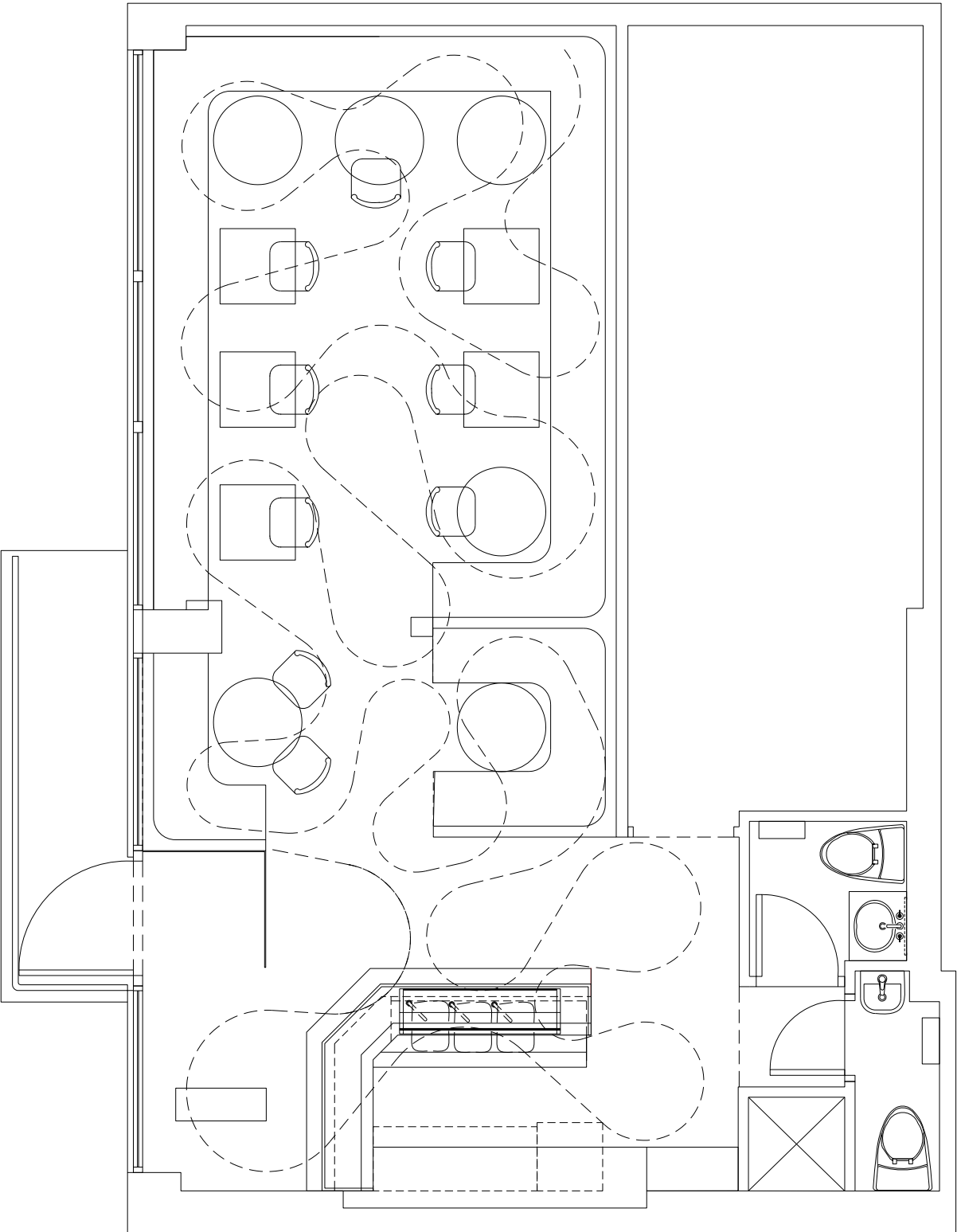
2020. 03. 08



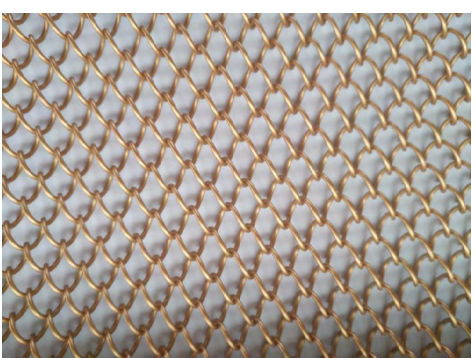
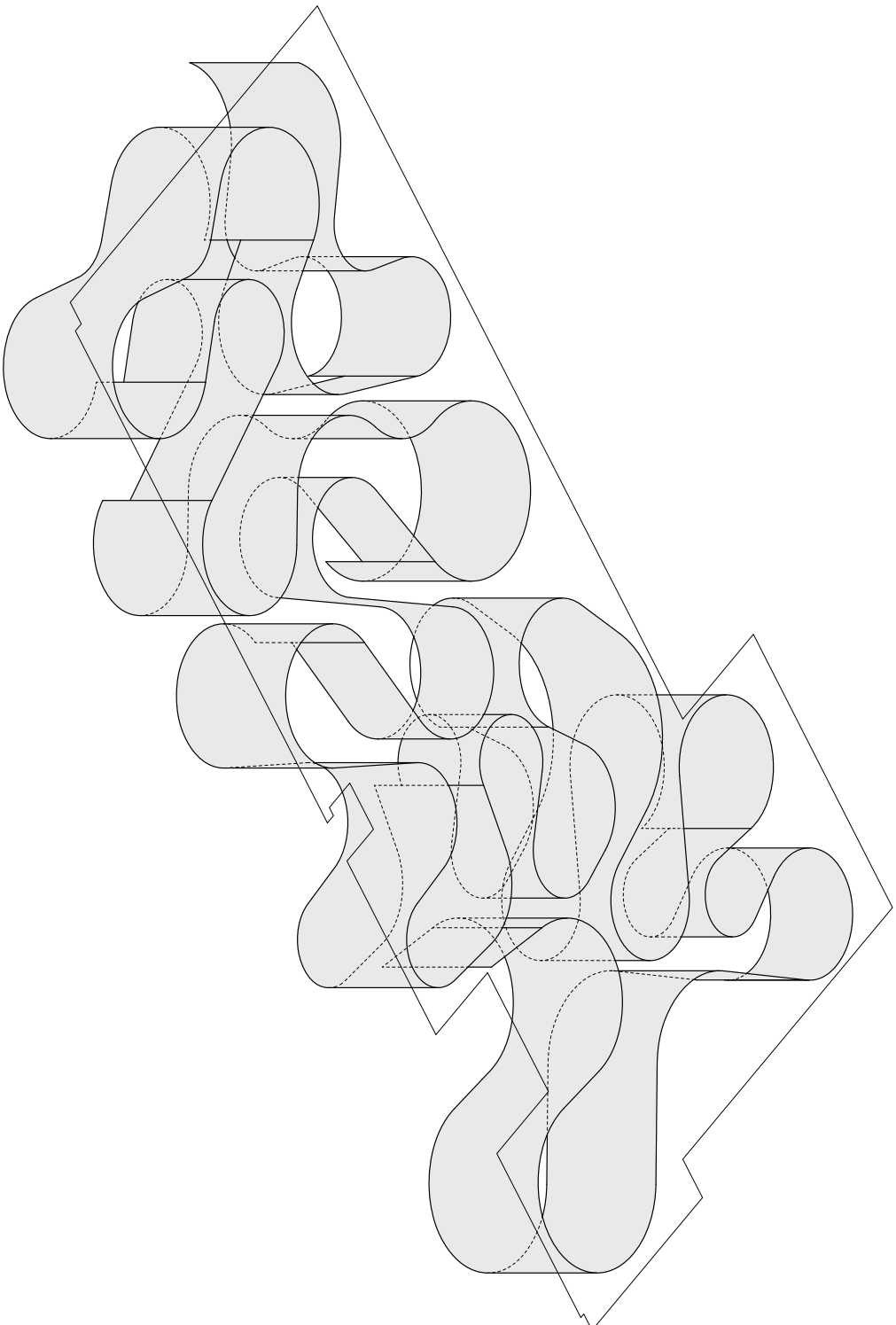




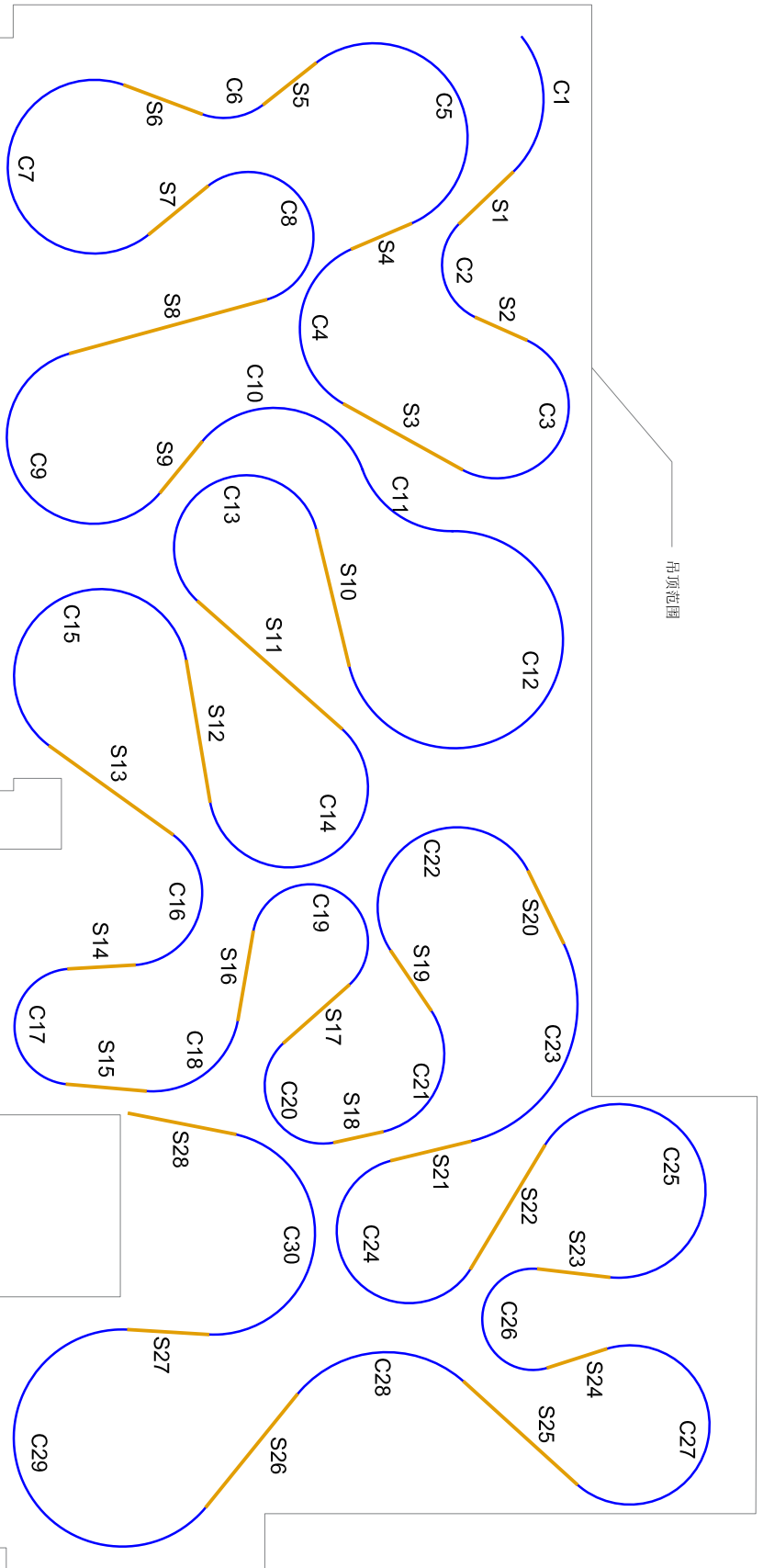
GROUND FLOOR PLAN



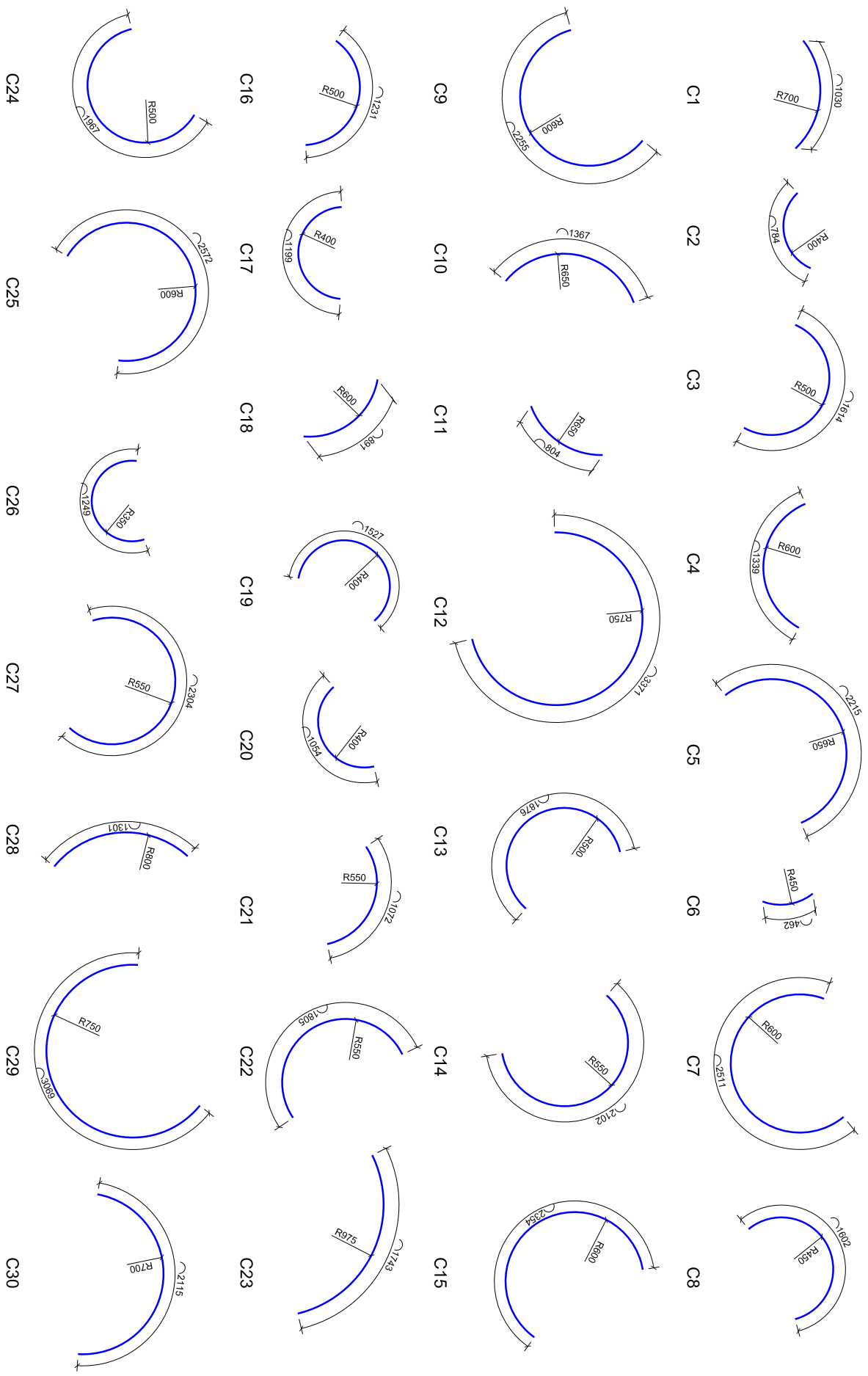
CEILING CASCADE COIL FEATURE DESIGN



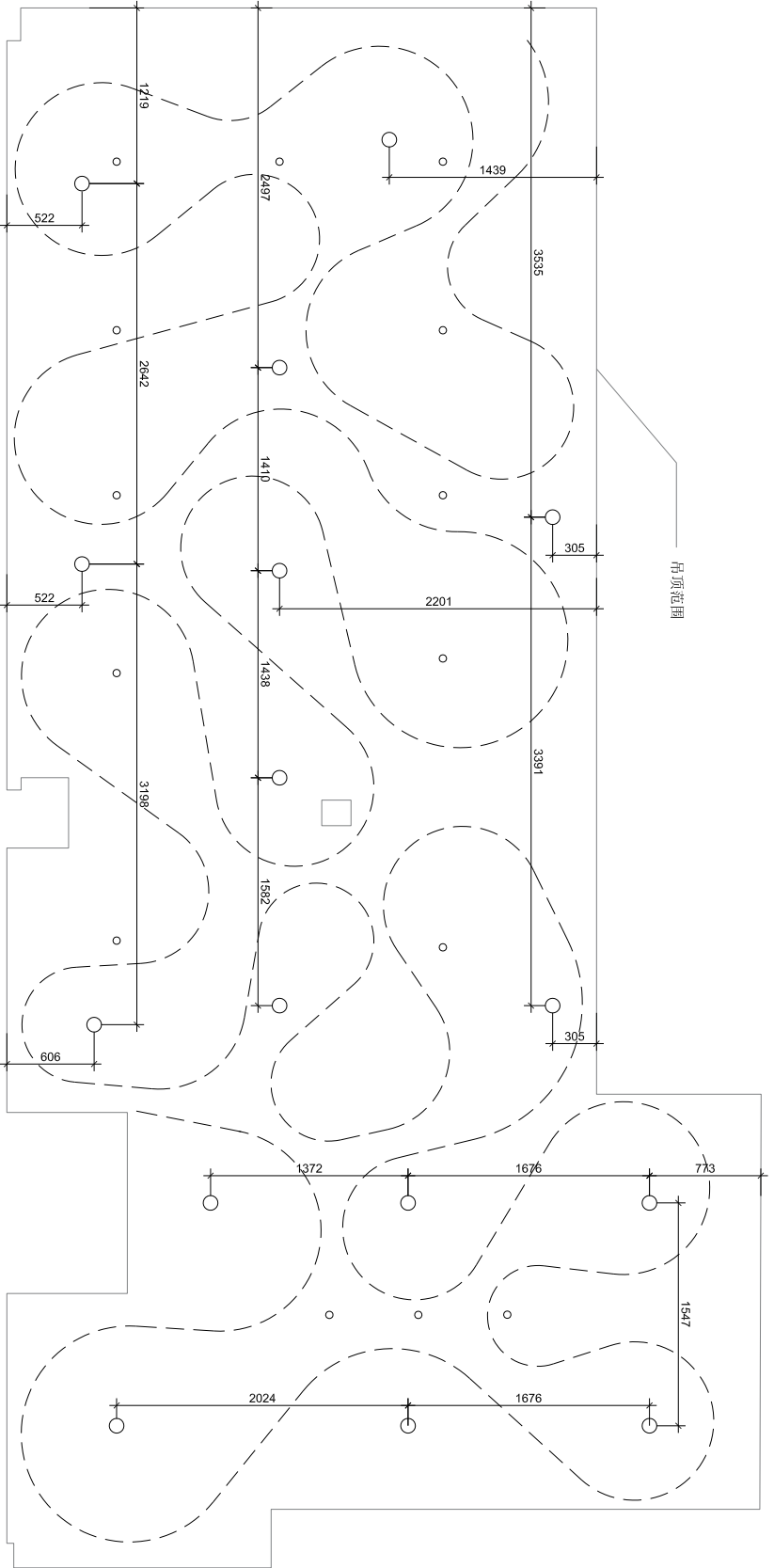
CEILING CASCADE COIL FEATURE DESIGN



CEILING CASCADE COIL FEATURE DESIGN



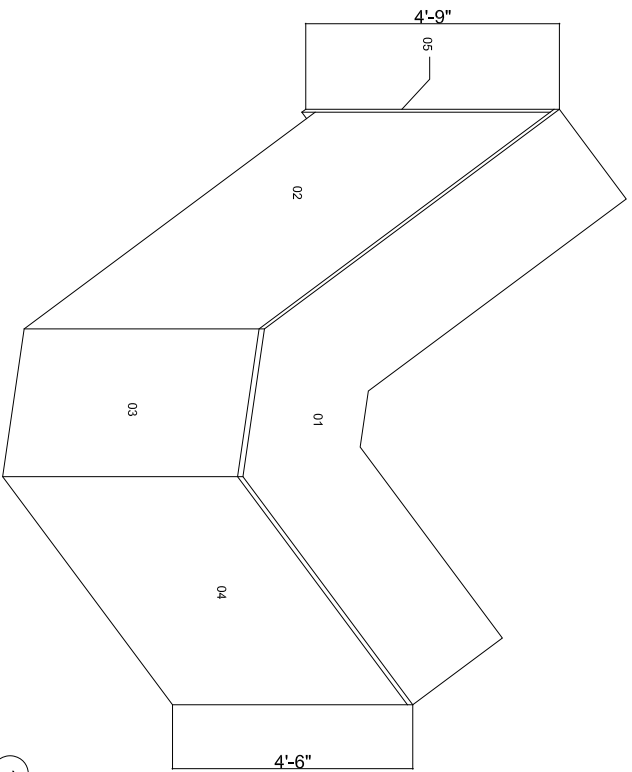
REFLECTED CEILING PLAN - DOWNLIGHT



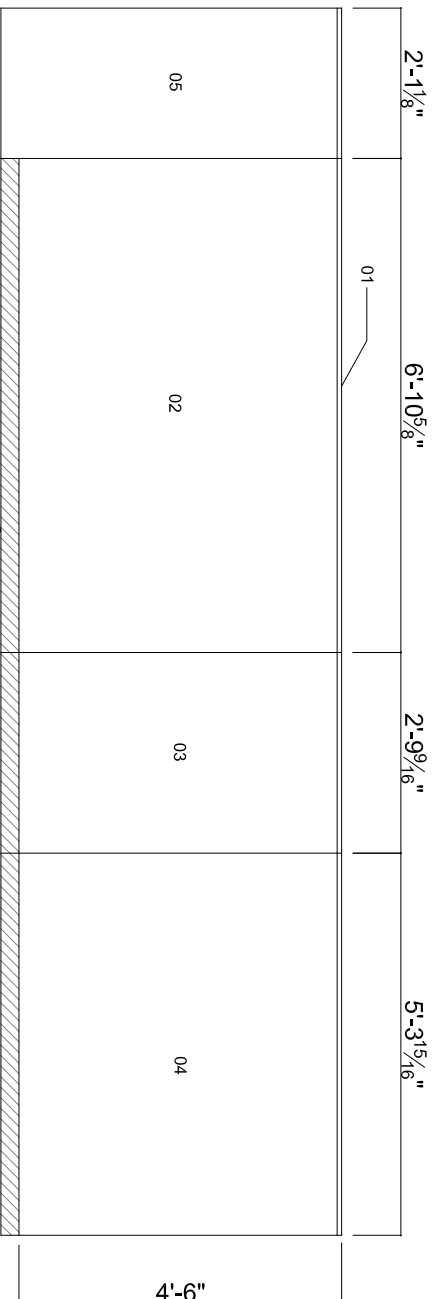
BAR RENOVATION DRAWING

NOTE:
 ALL DIMENSIONS ARE ONLY FOR REFERENCES. PLEASE COMPARE THE DRAWINGS WITH CURRENT SITE CONDITIONS IN ADVANCE.
 ALL EXTRA STRUCTURES AND MATERIALS SHOULD BE ADDED IN ADVANCE. LET DESIGNER TO BE AWARE OF THIS.
 THERE ARE 11 PIECES OF WOOD SURFACES IN TOTAL, EACH ONE IS LABELED ON DRAWINGS.

注意：
 所有标注尺寸仅供参考，请谨慎核对图纸与现场实际情况的出入。
 所有额外增加的支持结构和其他材料厚度/型号必须提前与设计师知晓。
 共有11块木板需要制作，每个木板已经在图纸上做好编号。



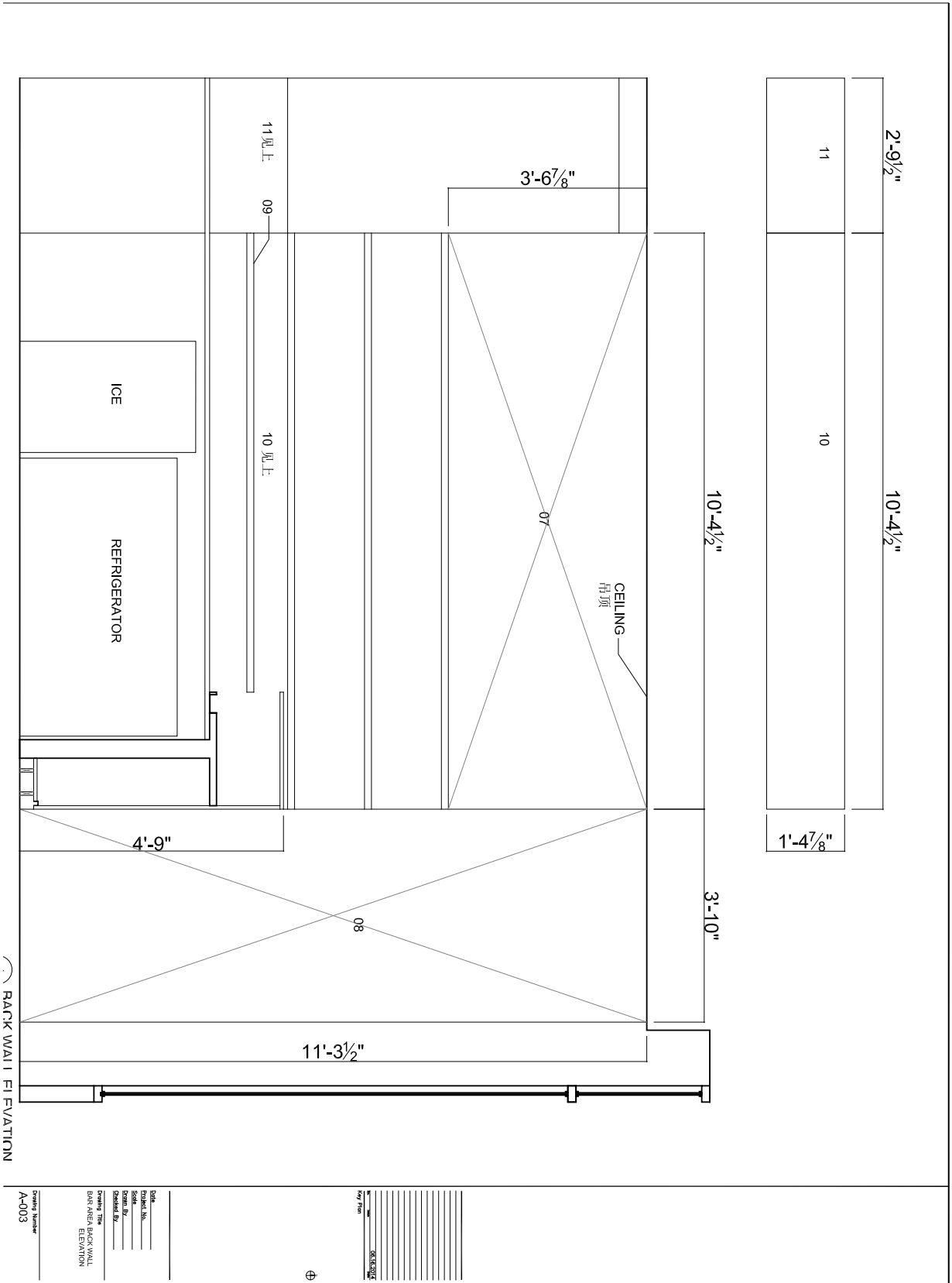
1 BAR TABLE CLADDING AXON
 SCALE: 1"=1'-0"



2 BAR TABLE UNFOLDED ELEVATION (吧台外包展开立面)
 SCALE: 1"=4'-0"

Project Name	
Client Name	
Design Date	
Design By	
Check By	
Project No.	
Drawing Title	BAR TABLE OVERVIEW
Drawing Number	A-001

BAR RENOVATION DRAWING



BARCK WAI | ELEVATION

Date: _____
 Project No.: _____
 Scale: _____
 Drawn by: _____
 Checked by: _____
 Creating This DRAWING FOR ARCHITECTURAL ELEVATION

Drawing Number
 A-003



IKEBANA-ZEN

646-885-7566

401 WEST 53RD STREET, NEW YORK, NY 10019

10AM TO MIDNIGHT

Sushi & Sashimi Omakase

Salad

sashimi / Toast tataki

Soup

Nikiri Sushi(9)

Gunkan Sushi(5)

Dessert

88

Kappo omakase

Salad

Sashimi

Chawanmushi

Agemono Tempura

Smoked fish

Soup

Nikiri sushi(12)

Dessert

108

A La-carte

Fluke	5	Aji	7
Madai	7	Sayori	9
Kinmedai	9	Shrimp	6
Ocean trout	6	Squid	7
King salmon	7	Sea Scallops	6
Smoked salmon	8	Oyster	7
Shimaaji	7	Salmon Roe	7
kanpachi	7	Eel	8
Buri	8	Uni (ca)	9
Lean tuna	6	Uni (me)	11
Chu-toro	10	Uni (jp)	13
O-toro	12	Wagyu	15
Spanish mackerel	6		

Salmon flight 18

Ocean trout 6 king salmon 7 smoked salmon 8

Jack flight 18

Shimaaji 7 kanpachi 7 buri 8

Tuna flight 25

Lean tuna 6 chu-toro 10 O-toro 12

Golden flight 58

Toro uni caviar golden flake 23

Wagyu uni caviar golden flake 25

Chop toro uni caviar golden flake 18