

Manhattan Community Board 4

Liquor License/Sidewalk Cafe Stipulations Application

(All Fields Must Be Completed)

CORPORATION NAME		DOING BUSINESS AS (DBA)			
MOJO SUSHI CHEF INC					
STREET ADDRESS		CROSS STREETS	ZIP CODE		
177 9TH AVE, NEW YORK, NY 10011					
OWNER <small>(Attach a list of all the people that will be associated/listed with the license)</small>	NAME:	XIN CHEN	ATTORNEY/ REPRESENTAIVE	NAME:	
	PHONE:	646-704-8507		PHONE:	
	EMAIL:	chenx0108@gmail.com		EMAIL:	
MANAGER	NAME:		LANDLORD	NAME:	CHELSEA WEST 21ST STREET RETAIL, LLC
	PHONE:			PHONE:	917-453-6729
	EMAIL:			EMAIL:	
APPLICATION TYPE (<input checked="" type="checkbox"/> <i>Liquor License</i> _____ <i>Unenclosed Sidewalk Cafe</i>)					
<input type="radio"/> New	Has applicant owned or managed a similar business?		YES	NO	
	What is/was the name and address of establishment?				
	What were the dates applicant was involved with this former premise?				
<input checked="" type="radio"/> Corp Change/Class Change/Removal	What is the license # and expiration date?		04/30/2024		
	Is applicant making any alterations or operational changes?		YES	NO	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	NO	YES
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	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	NO	NO
Has applicant/owner(s) read MCB4 Policy Regarding Concentration and Location of Alcoholic-Serving Establishments?			YES	NO	YES

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	5PM-11PM	5PM-11PM	5PM-11PM	5PM-11PM	5PM-11PM	5PM-11PM	5PM-11PM
	Kitchen	5PM-11PM	5PM-11PM	5PM-11PM	5PM-11PM	5PM-11PM	5PM-11PM	5PM-11PM
	Music	5PM-11PM	5PM-11PM	5PM-11PM	5PM-11PM	5PM-11PM	5PM-11PM	5PM-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 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	13	23	4	10	1	0	0	
OUTSIDE <i>(Other than sidewalk café)</i>	8		3	8				
DCA APPROVED UNENCLOSED SIDEWALK CAFÉ								

How many floors are there? What is the capacity for each floor?	1 FLOOR		
How frequently will the owner(s) be at the establishment?	ALWAYS		
Will there be dancing?	YES	NO	NO
Will applicant have bottle or table service for beverage alcohol?	YES	NO	YES
Will applicant be hosting private; promotional or corporate events?	YES	NO	NO
Will outside promoters be used on a regular basis? If yes please describe.	YES	NO	NO
Will applicant have a security plan? If, yes please attach.	YES	NO	NO
Will security plan be implemented?	YES	NO	NO
Will State certified security personnel be used?	YES	NO	NO
Will New York Nightlife Association and NYPD Best Practices be followed?	YES	NO	YES
Does applicant agree to notify MCB4 prior to making changes to its method of operation?	YES	NO	YES
Will applicant be using delivery bicycles? If yes, how many?	YES	NO	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?			

MULTIPLE SPACES/FLOORS CAPACITY BREAKDOWN

Space/Floor	Description/Use of Space	Capacity	Hours	# of Tables	# of Seats	# of Service Only Bars	# of Stand-Up Bars/Seats at Bar	Music
FLOOR 1	FOR OPERATING	21(Include Outside)	5PM-11PM	7	18	1	0	Recorded Music

LOCATION & ZONING

Is this a Special District? If yes, is it Clinton, West Chelsea or Hudson Yards?	YES	NO	NO
Does the building have a Certificate of Occupancy ("C of O") or a letter of no objection?	YES	NO	YES
Is a Public Assembly permit required?	YES	NO	NO
Are your plans filed with DOB?	YES	NO	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	Antonella Cipollone 100 West 17th/18th Street Block Association
	# 2	David Sloss 300 West 18/19 Streets Block Association
	# 3	
	# 4	
	# 5	
Please provide dates when applicant met with the groups listed above.		09/31/2022
Who was your contact person at each group you met with?		
When did applicant post the notice that was provided?		08/17/2022
Where did applicant post the notice that was provided?		FRONT WINDOW
Will applicant provide owner cell phone number to neighbors and respond to complaints that arise? Please provide number in space provided.		YES NO YES, 646-704-8507
Will applicant inform the Community Board office of its job openings and/or provide a hyperlink to applicants jobs webpage?		YES NO NO

BUILDING DESIGN			
State the name and type of business previously located in the space.	DON NOT KNOW		
Has a liquor-licensed establishment previously occupied this space at any time? If yes, please provide the name of the business.	YES	NO	NO
Do you plan any changes to the existing façade? If yes, please describe.	YES	NO	NO
Has the applicant/owner(s) read MCB 4 ADA Guidelines Memo?	YES	NO	YES
Is the entrance ADA Compliant?	YES	NO	YES
Do you plan any changes to the existing façade? If yes, please describe.	YES	NO	NO
Will applicant have a vestibule within the establishment?	YES	NO	NO
Will applicant use a storm enclosure?	YES	NO	NO
Does applicant agree to keep the sidewalk clear of all items or obstructions, such as sandwich boards, sidewalk signs, freestanding menus and plants, as per the law?	YES	NO	YES
Will applicant comply with the NYC noise code?	YES	NO	YES
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	YES
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	YES
Has applicant obtained an acoustical report from a certified sound engineer to assess potential noise disturbance to the neighboring residents and buildings?	YES	NO	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	YES
Will the establishment have an illuminated sign?	YES	NO	YES
Will the establishment have a canopy extending over the sidewalk?	YES	NO	NO
Where will the air conditioner be located? What type is it?	AIR CONDITIONER WILL BE LOCATED IN ESTABLISHMENT ON THE WALL		
When was the air conditioner installed?			

OUTDOOR ITEMS - OTHER THAN SIDEWALK CAFÉ

Has the applicant/owner(s) read MCB 4 Rear Yard Rooftop Policy?	YES	NO	YES
Will applicant use any outdoor spaces: rooftop, rear yard, patio, porch, balcony, pavilion, tents, deck, gazebo or open dining in the parking lane? If yes, which one(s)?	YES	NO	YES, IN THE PARKING LANE
Are the floorplans for the outdoor space(s) included?	YES	NO	NO
Will applicant close and vacate the outdoor space(s) by 11PM on Friday & Saturday and 10 PM on all other days?	YES	NO	YES All Outdoor seating will be closed & vacated by 10 p.m. nightly
Will the service and consumption of alcohol in any outdoor space only be via seated food service?	YES	NO	YES
Will applicant not allow standing space for patrons to drink or smoke in any outdoor space(s) or on the sidewalk?	YES	NO	YES
Will there be no amplified music, as per the law?	YES	NO	YES
If amplified sound is played inside the establishment, will windows and doors be closed?	YES	NO	YES
Will applicant agree to post signs outside asking customers to respect the neighbors'?	YES	NO	YES
Will applicant agree to train staff to encourage a peaceful environment?	YES	NO	YES
Will applicant provide effective sound control (landscaping enclosure, soundproofing tenants apartments)	YES	NO	YES
Will there be a lighting plan that allows safe usage of the outdoor space without disrupting neighbors?	YES	NO	YES
If open dining in the parking lane, will applicant agree to leave the sidewalk free of any furniture?	YES	NO	NO
If open dining, will you comply with all NYC DOT guidelines?	YES	NO	YES
If open dining, will the installation be year-round?	YES	NO	YES

DCA APPROVED UNENCLOSED SIDEWALK CAFÉ

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/owner seeking to include a sidewalk café in its liquor license?	YES	NO
If yes, has applicant/owner submitted application and plans to NYC Dept. of Consumer Affairs for review and plans.	YES	NO
Will applicant close and remove sidewalk café by 11 PM on Friday & Saturday and 10 PM on all other days?	YES	NO
Will applicant be serving alcohol on the sidewalk? If so, will you have waiter service?	YES	NO
Will the café have a 3 ft. wide serving aisle for the full length of the sidewalk café?	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 be accompanied by 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 use of sidewalk space without disrupting neighbors?	YES	NO
Will all furniture, plants and barricades be removed from the sidewalk during the evening closing hours and the morning opening hours?	YES	NO
Will all furniture be stored inside the building by March 21 st and March 21 st , and any other day when it rains or snows?	YES	NO
Will applicant use umbrellas on the sidewalk?	YES	NO
If construction or other activity has reduced the sidewalk width, will applicant always maintain a clear path of sidewalk between the perimeter of the café and the curb including construction barricades?	YES	NO
If open dining area is in a parking lane, will applicant agree to remove its sidewalk café?	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
 October 6, 2022 full board meeting, with 37 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 <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>XIN CHEN</p> <p>PRINT NAME OF APPLICANT</p>	<p>XIN CHEN</p> <p>SIGNATURE OF APPLICANT</p>	<p>09/02/2022</p> <p>DATE</p>
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TEL: 646-255-9050

Please Text for Pickup and Reservation

OMAKASE

- 85** | **Omakase**
• 2 Appetizers
• 12 pcs Nigiri
• 1 Sushi Taco

DESSERT

- 8** | **Japanese Mochi (Choose 3 Flavors)**
*Matcha / Vanilla Chip / Chocolate /
Salted Caramel / Strawberry / Passion Fruit*

WINE (BOTTLE / GLASS)

- 60 / 12** | **The Great Oregon Wine Company,
Willamette Valley, 2017**
Pinot Noir
ALCOHOL: 13% | APPELLATION: Oregon, US
- 50 / 10** | **Lifevine Chardonnay, California, 2018**
Chardonnay
ALCOHOL: 13.5% | APPELLATION: California, US

*Our selection of fish is seasonal, to ensure high quality and freshness.
Please notify chef in advance regarding any food allergies.

*Consuming raw or uncooked seafood may increase your risk of
food-borne illness.

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STAY SAFE

- Social Distancing
- Face Masks
- Check In
- Cleaning Measures

CHAMPAGNE
RESERVATION
BY RESY



Please Re-Use

THURSDAY 10/12

