

Manhattan Community Board 4

(All Fields Must Be Completed)

Liquor License/Sidewalk Cafe Stipulations Application

CORPORATION NAME		DOING BUSINESS AS (DBA)	
9Ave Fever Holding LLC		Nan Xiang Express	
STREET ADDRESS		CROSS STREETS	ZIP CODE
654 9th Avenue		West 46th Street	10036
OWNER <i>(Attach a list of all the people that will be associated/listed with the license)</i>	NAME:	Jinbao Zhong	NAME: Alice C. Zhang
	PHONE:	347-798-6479	PHONE: 718-888-1553
	EMAIL:	kimbaozhong@gmail.com	EMAIL: czhang@zslawpc.com
MANAGER	NAME:	Jia Hua Liang	NAME: Hana Properties LLC
	PHONE:	718-801-1105	PHONE: 646-843-1700
	EMAIL:	nanxlangtsq@gmail.com	EMAIL:
APPLICATION TYPE (<input checked="" type="checkbox"/> <i>Liquor License</i> <input type="checkbox"/> <i>Unenclosed Sidewalk Cafe</i>)			
<input checked="" type="checkbox"/> New	Has applicant owned or managed a similar business?		YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>
	What is/was the name and address of establishment?		Kyuramen at 315 W 46th Street, NYNY 10036
	What were the dates applicant was involved with this former premise?		2021
<input type="checkbox"/> Corp Change/Class Change/Removal	What is the license # and expiration date?		
	Is applicant making any alterations or operational changes?		YES <input type="checkbox"/> NO <input type="checkbox"/>
	<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 <input checked="" type="checkbox"/>
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 <input checked="" type="checkbox"/>
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 <input checked="" type="checkbox"/>
Has applicant/owner(s) read MCB4 Policy Regarding Concentration and Location of Alcoholic-Serving Establishments?		YES <input checked="" type="checkbox"/>	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	11a.m.-11 p.m.	11a.m.-11 p.m.	11a.m.-11 p.m.	11a.m.-11 p.m.	11a.m.-11 p.m.	11a.m.-11 p.m.	11a.m.-11 p.m.	11a.m.-11 p.m.
	Kitchen	11a.m.-11 p.m.	11a.m.-11 p.m.	11a.m.-11 p.m.	11a.m.-11 p.m.	11a.m.-11 p.m.	11a.m.-11 p.m.	11a.m.-11 p.m.	11a.m.-11 p.m.
	Music	12 a.m. -10 p.m.	12 a.m. -10 p.m.	12 a.m. -10 p.m.	12 a.m. -10 p.m.	12 a.m. -10 p.m.	12 a.m. -10 p.m.	12 a.m. -10 p.m.	12 a.m. -10 p.m.
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		
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	23	70	6	23	0	0	0		
OUTSIDE <i>(Other than sidewalk café)</i>	n/a	0	0	0	0	0	0		
DCA APPROVED UNENCLOSED SIDEWALK CAFÉ	n/a	0	0	0	0				
How many floors are there? What is the capacity for each floor?					2 floors, basement is for storage only				
How frequently will the owner(s) be at the establishment?					on a daily basis				
Will there be dancing?					YES	NO <input checked="" type="checkbox"/>			
Will applicant have bottle or table service for beverage alcohol?					YES	NO <input checked="" type="checkbox"/>			
Will applicant be hosting private; promotional or corporate events?					YES	NO <input checked="" type="checkbox"/>			
Will outside promoters be used on a regular basis? If yes please describe.					YES	NO <input checked="" type="checkbox"/>			
Will applicant have a security plan? If, yes please attach.					YES	NO <input checked="" type="checkbox"/>			
Will security plan be implemented?					YES	NO <input checked="" type="checkbox"/>			
Will State certified security personnel be used?					YES	NO <input checked="" type="checkbox"/>			
Will New York Nightlife Association and NYPD Best Practices be followed?					<input checked="" type="checkbox"/> YES	NO			
Does applicant agree to notify MCB4 prior to making changes to its method of operation?					YES <input checked="" type="checkbox"/>	NO			
Will applicant be using delivery bicycles? If yes, how many?					YES	NO <input checked="" type="checkbox"/>			
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?					n/a				

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
ground floor	Restaurant	70	11 am. -11 p.m.	6	23	0	0	recorded music
basement	storage	0		0	0	0	0	no

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	I have emailed all the Block/Tenant Association & Community Groups attached	
	# 2		
	# 3		
	# 4		
	# 5		
Please provide dates when applicant met with the groups listed above.		via emails only	
Who was your contact person at each group you met with?		see attached list	
When did applicant post the notice that was provided?		5/31/2023	
Where did applicant post the notice that was provided?		Front entrance 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 347-798-6479
Will applicant inform the Community Board office of its job openings and/or provide a hyperlink to applicants jobs webpage?		<input checked="" type="checkbox"/> YES	NO

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	NO	I do not know.
Do you plan any changes to the existing façade? If yes, please describe.	YES	NO <input checked="" type="checkbox"/>	
Has the applicant/owner(s) read MCB 4 ADA Guidelines Memo?	YES <input checked="" type="checkbox"/>	NO	
Is the entrance ADA Compliant?	YES <input checked="" type="checkbox"/>	NO	
Do you plan any changes to the existing façade? If yes, please describe.	YES	NO <input checked="" type="checkbox"/>	
Will applicant have a vestibule within the establishment?	YES	NO <input checked="" type="checkbox"/>	
Will applicant use a storm enclosure?	YES	NO <input checked="" type="checkbox"/>	
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 <input checked="" type="checkbox"/>	NO	
Will applicant comply with the NYC noise code?	YES <input checked="" type="checkbox"/>	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 <input checked="" type="checkbox"/>	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?	YES <input checked="" type="checkbox"/>	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 <input checked="" type="checkbox"/>	
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 <input checked="" type="checkbox"/>	NO	
Will the kitchen exhaust system extend to the roof?	YES <input checked="" type="checkbox"/>	NO	
Will the establishment have an illuminated sign?	YES <input checked="" type="checkbox"/>	NO	
Will the establishment have a canopy extending over the sidewalk?	YES	NO <input checked="" type="checkbox"/>	
Where will the air conditioner be located? What type is it?	Roof HVAC		
When was the air conditioner installed?	installed by the previous tenants		

OUTDOOR ITEMS - OTHER THAN 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, gazebo or open dining in the parking lane? 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) or on the sidewalk?	YES	NO	n/a
Will there be no amplified music, as per the law?	YES	NO	n/a
If amplified sound is played inside the establishment, will windows and doors be closed?	YES ✓	NO	
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	
Will there be a lighting plan that allows safe usage of the outdoor space without disrupting neighbors?	YES	NO	n.a
If open dining in the parking lane, will applicant agree to leave the sidewalk free of any furniture?	YES	NO	n/a
If open dining, will you comply with all NYC DOT guidelines?	YES	NO	n/a
If open dining, will the installation be year-round?	YES	NO	n/a

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 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	n/a
Will applicant close and vacate the sidewalk café by 11 PM on Friday & Saturday and 10 PM on all other days?	YES	NO	n/a
Will applicant be serving alcohol in the sidewalk café? If so, will you have waiter service?	YES	NO	n/a
Will the café have a 3 ft. wide serving aisle running the entire length of the sidewalk café?	YES	NO	n/a
Will applicant mark the perimeter of the café on the sidewalk?	YES	NO	n/a
Will the service and consumption of alcohol in the sidewalk café only be via seated food service?	YES	NO	n/a
Will the sidewalk café not provide standing space for drinking or smoking?	YES	NO	n/a
Will applicant use any portable natural gas heaters? If so, do you have the requisite approvals from DOB & the Fire Department?	YES	NO	n/a
Will applicant have a lighting plan that will allow safe usage of the outdoor space without disrupting neighbors?	YES	NO	n/a
Will all furniture, plants and barricades be stored inside between the evening closing hours and the morning opening hours?	YES	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?	YES	NO	n/a
Will applicant use umbrellas?	YES	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 closest obstruction including construction barricades?	YES	NO	n/a
If open dining is in the parking lane, will applicant agree to remove its sidewalk café?	YES	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: <input checked="" type="checkbox"/> <i>(MCB4's recommendation is based on a vote taken at its July 26, 2023 full board meeting, with 35 members voting in favor of the recommendation, 1 members opposed, 1 members abstaining and 0 present but not eligible)</i></p>	<p><input checked="" type="checkbox"/> Denial unless all stipulations agreed to by applicant/owner are part of the method of operation <input type="checkbox"/> Denial <input type="checkbox"/> Approval</p>
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CB4 REPRESENTATIVES

 <p>Nelly Gonzalez CB4 Assistant District Manager</p>	 <p>Frank Holozubiec CB4 BLP Committee Co-Chair</p>	 <p>Burt Lazarin CB4 BLP Committee Co-Chair</p>
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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>Jinbao Zhong PRINT NAME OF APPLICANT</p>	 <p>SIGNATURE OF APPLICANT</p>	<p>6/7/2023 DATE</p>
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ZHANG & SUN, P.C.

Alice C. Zhang, Esq.
Wei Sun, Esq.
Jing Hang, Esq.

ATTORNEYS AT LAW
136-20 38th Avenue, Suite 3C
Flushing, NY 11354
(718) 888-1553
Facsimile: (631) 862-5092

Writer's E-Mail:
czhang@zslawpc.com

May 24, 2023

Via FedEx Overnight Mail

Manhattan Community Board 4
424 W. 33rd Street, Suite 580
New York, NY 10001

Re: 30-Day Advance Notice
Applicant: 9Ave Fever Holding LLC

Dear Sir or Madam,

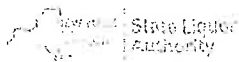
Please be advised that this office represents the Applicant, 9Ave Fever Holding LLC, in connection with the subject liquor license application. Enclosed please find 30-Day Advance Notice.

Should you have any question, please feel free to contact the undersigned.

Very truly yours,



Alice C. Zhang



OFFICE USE ONLY

Original Amended Date _____

Standardized NOTICE FORM for Providing 30-Day Advance Notice to a Local Municipality or Community Board

1. Date Notice Sent:

1a. Delivered by:

2. Select the type of Application that will be filed with the Authority for an On-Premises Alcoholic Beverage License:

For premises outside the City of New York:

New Application Removal Class Change

For premises in the City of New York:

New Application New Application and Temporary Retail Permit Renewal Alteration Removal

Class Change Method of Operation Corporate Change

For New and Temporary Retail Permit applicants, answer each question below using all information known to date

For Renewal applicants, answer all questions

For Alteration applicants, attach a complete written description and diagrams depicting the proposed alteration(s)

For Corporate Change applicants, attach a list of the current and proposed corporate principals

For Removal applicants, attach a statement of your current and proposed addresses with the reason(s) for the relocation

For Class Change applicants, attach a statement detailing your current license type and your proposed license type

For Method of Operation Change applicants, although not required, if you choose to submit, attach an explanation detailing those changes

Please include all documents as noted above. Failure to do so may result in disapproval of the application.

This 30-Day Advance Notice is Being Provided to the Clerk of the Following Local Municipality or Community Board:

3. Name of Municipality or Community Board:

Applicant/Licensee Information:

4. Licensee Serial Number (if applicable): Expiration Date (if applicable):

5. Applicant or Licensee Name:

6. Trade Name (if any):

7. Street Address of Establishment:

8. City, Town or Village: , NY Zip Code:

9. Business Telephone Number of applicant/ Licensee:

10. Business E-mail of Applicant/Licensee:

11. Type(s) of alcohol sold or to be sold: Beer & cider Wine, Beer & Cider Liquor, Wine, Beer & Cider

12. Extent of Food Service: Full Food menu; full kitchen run by a chef/cook Menu meets legal minimum food requirements; food prep area required

13. Type of Establishment:

Seasonal Establishment Juke Box Disc Jockey Recorded Music Karaoke

14. Method of Operation: (check all that apply) Live Music (give details i.e., rock bands, acoustic, jazz, etc.):

Patron Dancing Employee Dancing Exotic Dancing Topless Entertainment

Video/Arcade Games Third Party Promoters Security Personnel

Other (specify):

15. Licensed Outdoor Area: None Patio or Deck Rooftop Garden/Grounds Freestanding Covered Structure
(check all that apply) Sidewalk Cafe Other (specify): _____



OFFICE USE ONLY		
<input type="radio"/> Original	<input type="radio"/> Amended	Date _____

16. List the floor(s) of the building that the establishment is located on:
17. List the room number(s) the establishment is located in within the building, if appropriate:
18. Is the premises located within 500 feet of three or more on-premises liquor establishments? Yes No
19. Will the license holder or a manager be physically present within the establishment during all hours of operation? Yes No
20. If this is a transfer application (an existing licensed business is being purchased) provide the name and serial number of the licensee:
 Name Serial Number
21. Does the applicant or licensee own the building in which the establishment is located? Yes (if YES, SKIP 23-26) No

Owner of the Building in Which the Licensed Establishment is Located

22. Building Owner's Full Name:
23. Building Owner's Street Address:
24. City, Town or Village: State: Zip Code:
25. Business Telephone Number of Building Owner:

Representative or Attorney Representing the Applicant in Connection with the Application for a License to Traffic in Alcohol at the Establishment Identified in this Notice

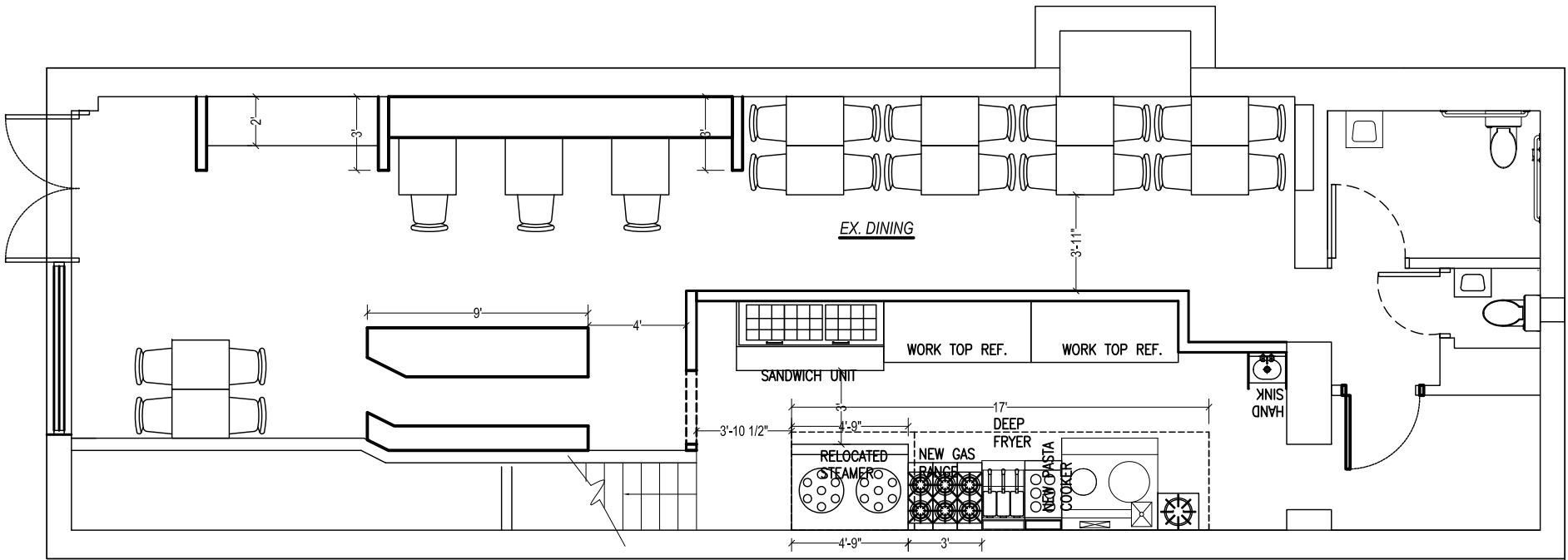
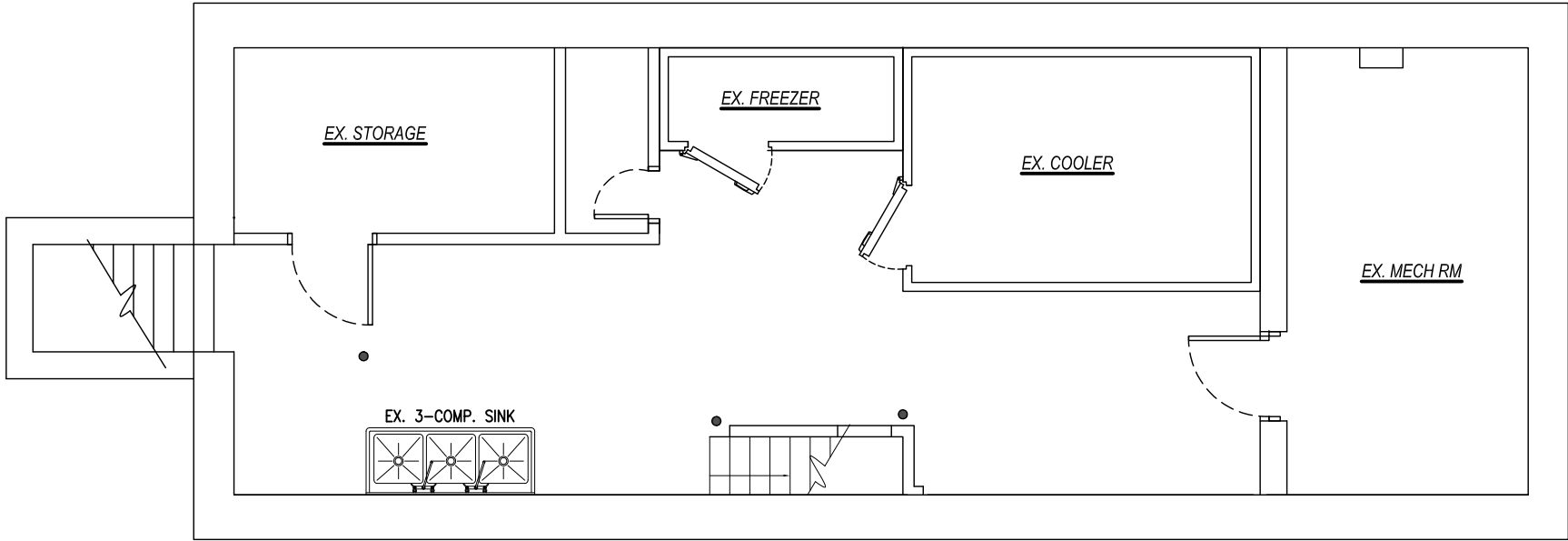
26. Representative/Attorney's Full Name:
27. Representative/Attorney's Street Address:
28. City, Town or Village: State: Zip Code:
29. Business Telephone Number of Representative/Attorney:
30. Business E-mail Address of Representative/Attorney:

I am the applicant or licensee holder or a principal of the legal entity that holds or is applying for the license. Representations in this form are in conformity with representations made in submitted documents relied upon by the Authority when granting the license. I understand that representations made in this form will also be relied upon, and that false representations may result in disapproval of the application or revocation of the license.

By my signature, I affirm - under Penalty of Perjury - that the representations made in this form are true.

31. Printed Principal Name: Title:

Principal Signature: 



1 PROPOSED FLOOR PLAN
1ST FLOOR

SCALE: 1/4" = 1'-0"

SIDES 小吃



Spring Roll
炸春卷

- A1 Vegetable 素菜 \$5.95
- A2 Shrimp 蝦仁 \$6.95



Pan-fried Buns
生煎包

- C1 Pork 豬肉 \$8.95
- C2 Crabmeat & Pork 蟹粉 \$9.95



- B1 Cucumber Salad w. Garlic 脆口黃瓜 \$7.55



- S1 Hot & Sour Soup 酸辣湯 \$5.95



Scallion Pancake
蔥油餅

- A3 Plain 原味 \$5.95
- A4 W. Beef 牛肉 \$8.95



Siu Mai
燒賣

- C3 Pork & Sticky Rice 糯米肉 \$5.95
- C4 Chicken & Shrimp 雞肉蝦仁 \$7.95

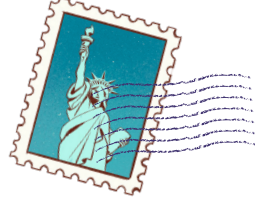


- B2 Four Happiness Sponge Tofu 四喜烤麸 \$9.75



Wontons Soup
餛飩湯

- S2 Pork & Vegetable 齊菜豬肉 \$7.95
- S3 Shrimp, Pork & Vegetable 蝦仁菜肉 \$8.95



Pan-fried Dumplings
鍋貼

- A5 Pork 豬肉 \$8.25
- A6 Beef 牛肉 \$8.95



Wontons in Spicy Peanut Sauce
紅油抄手

- C5 Pork & Vegetable 齊菜豬肉 \$7.95
- C6 Shrimp, Pork & Vegetable 蝦仁菜肉 \$8.95



- B3 Beef Tendon & Tripe in Spicy Sauce 夫妻肺片 \$14.75



BEVERAGE 飲品



Ice Soy Milk
冰豆漿 \$3.50



Hot Soy Milk
熱豆漿 \$3.50



Lime Green Tea
香水檸檬 \$5.95



Pineapple Green Tea
金鑽鳳梨 \$5.95



Grapefruit & Peach Green Tea
西柚蜜桃 \$5.95



Passionfruit & Lime Green Tea
百香果綠茶 \$5.95

Ginger Ale / Coca-Cola / Diet Coke / Sprite
薑汁汽水/可樂/低卡可樂/雪碧 \$2.50
S.Pellegrino Sparkling Natural Mineral Water
氣泡水 (16 FL oz) \$4.99

SHANGHAI FRIED UDON NOODLES 上海粗炒麵

- F1 Pork 猪肉 \$11.95
- F2 Chicken 雞肉 \$11.95

- F3 Beef 牛肉 \$13.95
- F4 Shrimp 蝦仁 \$13.95



NOODLE SOUP 湯麵

- H1 Noodle with Scallion Sauce (No Soup)
蔥油乾拌麵 \$8.45
- H2 Noodle w. Beef & Shredded Pepper
(without or with soup)
小辣椒牛肉絲乾拌麵 / 湯麵
\$12.95 / \$14.95



- H3 Braised Beef Noodle Soup
招牌紅燒牛肉麵 \$14.95
- H4 Vegetable Noodle Soup
素菜湯麵 \$10.95

FIRED RICE 炒飯

- K1 Nan Xiang Fried Rice
南翔炒飯 \$13.95

FRIED RICE CAKE 炒年糕

- J1 Vegetable 素菜 \$10.95
- J2 Chicken 雞絲 \$12.95
- J3 Beef 牛肉 \$13.95
- J4 Shrimp 蝦仁 \$13.95
- J5 Pork 肉絲 \$12.95



PAN-FRIED CRISPY NOODLE 兩麵黃

- G1 Vegetable 素菜 \$10.95
- G2 Chicken 雞絲 \$12.95
- G3 Beef 牛肉 \$13.95
- G4 Shrimp 蝦仁 \$13.95
- G5 Pork 肉絲 \$12.95



DUMPLINGS 餃子

- D1 Steamed Vegetable (6 pcs)
花素蒸餃 \$9.95
- D2 Pork, Shrimp & Cabbage (8 pcs)
白菜豬肉蝦仁水餃 \$8.95
- D3 Chive, Pork & Shrimp (8 pcs)
韭菜豬肉蝦仁水餃 \$8.95
- D4 Chicken Dumplings (8 pcs)
雞肉水餃 \$8.95
- D5 Beef Dumplings (8 pcs)
牛肉水餃 \$9.95



ADD-ONS

2pc Spring Rolls+Lime Green Tea
兩條春卷+檸檬綠茶 \$7.99

SOUP DUMPLINGS 小籠包



- X1. Nan Xiang Signature Pork Soup Dumplings
南翔小籠包 [原味]

\$8.95



- X3. Chicken Soup Dumplings
雞肉小籠包

\$9.95



- X2. Crab Meat & Pork Soup Dumplings
蟹粉小籠包

\$9.95



- X4. Spicy Beef Soup Dumplings
麻辣牛肉小籠包

\$9.95

HOW TO EAT SOUP DUMPLINGS?



- 1 Prepare your dipping sauce

Pour soy sauce and vinegar into the sauce dish. *We recommend a 1:3 ratio of soy sauce to vinegar but we also encourage you to find your own perfect ratio



- 2 Transfer to spoon

Gently pick up a dumpling and place it into spoon using chopsticks or tong



- 3 Bite a small opening

Take a small bite on the side of dumpling to release the soup and steam



- 4 Taste the delicious soup

Sip the meaty soup from spoon *CAUTION! It's very HOT



- 5 Eat the dumpling

Dip the dumpling in the sauce you made and enjoy! *Try it without the sauce and ginger if this is your first time

Vegetarian | Spicy | Chef Recommendation

OPEN HOURS: MONDAY-SUNDAY: 11AM-11PM



Nan Xiang Express
Soup Dumplings



Warmth From Within.

HILLS KITCHEN
654 9Ave. Manhattan, NY 10036
NANXIANGEXPRESS.COM



BUILDING FOR SALE

TONY PARK

tony@pdpropertiesnyc.com

917.843.6622

ELAD DROR

elad@pdpropertiesnyc.com

646.843.1700

FRANCE

francesco@

917

COMING SOON

EAT THATH
 Warmth From Within.

The Skin
 Bunsicles with Flavor

Nan Xiang Express
 Soup Dumplings

@nanxiangexpress

Nan Xiang Express
 Soup Dumplings

COMING SOON

Delicious rewards - only in the app!

Petition to Support Proposed Liquor License

Date: June 3, 2023

The following undersigned residents of the area support the issuance of the following liquor license (indicate the type of licenses): Beer, Wine and Cider, to the following applicant/establishment: 9Ave Fever Holding LLC d/b/a Nan Xiang Express

Address of Premises: 654 9th Avenue, New York NY 10036

This business will be a Restaurant.

The Hours of operation will be: 11:00 a.m. to 11:00 p.m. Mondays through Sundays

PLEASE NOTE: Signatures should be from residents of the building, adjoining building and the building behind the premises.

Name	Address	Signature
Joshua Lee	343 W 46th St NY NY	
Tom Orr	640 9th Ave	
Kan Wli	313 W 47th St	
Jackson Lipski	313 W 47th St	
Ethan Galowitz	361 W 46th St	
Tian Tang & Feng	305 W 47th St	
Paul Kim	690 9th Ave	
SARAH LIM	344 W 47th St	
JOE SMITH	365 W 46th St	
Tran Qi	313 W 47th St	
Kenn	344 W 47th St	
John	856 9 Ave NY, N.Y	
Tim	553 W 47th St	
Johel	672 9th	
Emoy	682 W 47th St	
Lim Kim	353 W 47th St	
TOM WONG	718 W 46th St	
Grady	344 W 47th St	
Mimi Lam	578 W 55th St	
Keive To	579 W 55th St	
Juan Chen	789 10th Ave	
Simon Li	3914 Prince St.	
JACKIE CHEN	138 W 47th St	
Kan Tom	336 W 47th St	
Sarrah Smith	361 W 46th St	