Manhattan Community Board 4 (All Fields Must Be Completed)

Liquor License/Sidewalk Cafe Stipulations Application

CORPORATION NAME		DOING BUSINESS AS (DBA)								
PONCH	E TAC	QUERIA CORP.								
STREET ADDRESS			CROSS STREE	TS		ZIP CODE				
420 W 49 STR	EET		BTWN 9TH	& 10TI	H AVENUES	10019				
OWNER	NAME:	BARAQUIEL SANCHEZ		N	NAME: FRED A. DECICCO, ESQ. POLLACK POLLACK ISAAC & DECICCO LLP					
(Attach a list of all the people that will be associated/listed	PHONE:	(347) 824-7773	ATTORNEY/ REPRESENTA		HONE: (212) 2	33-8100				
with the license)	EMAIL:	BSANZNYC@GMAIL.COM		E	MAIL: FAD@P	PID.COM	AND NHM@PPID.COM			
	NAME:			N		L ESTATE REALTY SE	INC. ERVICES CORPORATION			
MANAGER	PHONE:		LANDLORD	Р	HONE: (212) 721-	-0424				
	EMAIL:			E	MAIL: dmurray	@jmrealty.o	rg & jedelman@jmrealty.org			
APPLICATION	ON TYPI	E (X Liquor License		ι	Inenclosed Side	ewalk Caf	e)			
	Has applicant	owned or managed a similar business?			YES	NO				
O New	What is/was th	ne name and address of establishment?								
	What were the	e dates applicant was involved with this former pren	nise?							
⊗ Corp	What is the lic	ense# and expiration date?			SERIAL NO. 132	27581 (EXPI	RES 08/31/2024)			
Change/Class Change/Removal	Is applicant m	aking any alterations or operational changes?		1 (1 186	YES CHANGE TO AN ON-PE	NO PEMISES LIQUIO	DR LICENSE.			
Change/Kemovai	If alterations o	r operational changes are being made, please desc		IGES TO THE CURREN ED BY BUSINESS.	T METHOD OF	OPERATIONS CURRENTLY				
A14	What is the cu	rrent license # and expiration date?								
Alteration	Please list/des	scribe the nature of all the changes and attach the p	plans:							
METHOD O	F OPER	ATION								
TYPE OF ALCOR	HOL	X Liquor/Wine/Beer & Cider	Ов	eer & Cid	ler	O Wine/	Beer & Cider			
Restaurant Cabaret C			Night Club C) Hotel	O Bar/Tavern	O c	atering Establishment			
ТҮРЕ		Adult Entertainment O Wine	Bar O Dano	e Club	O Sports Bar O Club (Fratemal Organization – Members Only)					
Has applicant/owner filed with the SLA? If yes, when? If no, when do you plan to file?			YES	NO	UNTIL AFTER	MEETING	WITH CB4			
Is the 500 Foot Rul On-Premise liquor establishment and	VES	NO	PLEASE SEE A	ТТАСНМЕ	NT.					
		? If yes, please attach a diagram of the that trigger the rule.	YES	NO						
Has applicant/own	er(s) read Mo lic-Serving E	CB4 Policy Regarding Concentration an stablishments?	d (VES)	NO						

		MONDAY	TUESDAY		WEDNESDAY	THUE	RSDAY	FRIDAY	SATURDAY	SUNI)AY
HOURS*	Operation	11:00 AM - 12:00 AM	11:00 AM 12:00 AM	11:00 AM - 11:00 AM - 12:00 AM		11:00 AM - 12:00 AM		11:00 AM - 1:00 AM	11:00 AM - 12:0 1:00 AM 10:0		
(Indoor Only)	Kitchen	11:00 AM 11:30 PM	- 11:00 AM - 11:30 PM	-	11:00 AM - 11:30 PM	11:00 11:30	AM - PM	11:00 AM - 12:30 AM	11:00 AM - 12:30 AM	12:00 I 9:30 P	
	Music		BACKG	ROUND		Y DURIN	IG HOU	RS OF OPER	ATION		
If you plan to have music, what type(s)? (Circle all that apply) BACKGROUND LIVE MUSIC					DJ JUKE DOX KARAOKI				RAOKE		
N. ST. IN		By a ;			occui	PANCY	4		Will -	32.1	4
	(Cer	apacity rtificate of cupancy)	Maximum # of Persons Occupying Premises (Including Employees)	Number of Table			r of Servi	ce Number Stand-Up			
INSIDE	LESS	THAN 75	LESS THAN 75	12	24		_				
OUTSIDE (Other than sidewalk café)			15	4-5	9-12						
DCA APPROVEI UNENCLOS SIDEWALK CAFÉ	SED									\	\
How many floo	ors are there? V	/hat is the capa	city for each floor?			GR	OUND I	FLOOR			
How frequently	will the owner	s) be at the est	ablishment?			DU	RING H	OURS OF BU	SINESS OPER	ATIONS	
Will there be d	ancing?					YES	NO				
Will applicant I	nave bottle or ta	ble service for t	peverage alcohol?			YES	100				
Will applicant l	oe hosting priva	te; promotional	or corporate event	ts?		YES	NO				
Will outside pr	omoters be use	d on a regular b	asis? If yes please	describe).	YES	NO				
Will applicant l	nave a security	plan? If, yes ple	ase attach.			YES	(NO)				
Will security pl	an be impleme	nted?				YES	NO				
Will State certi	fied security pe	rsonnel be used	1?			YES	6				
Will New York Nightlife Association and NYPD Best Practices be followed?					1?	VES	NO				
Does applicant agree to notify MCB4 prior to making changes to its method of operation?					VES	NO					
Will applicant be using delivery bicycles? If yes, how many?					YES	NO	ONE.				
		y marked with t e as described l	he name of the res by NYC Law?	taurant a	nd will staff	VES	NO				
Where will del	very bicycles b	e stored during	the day when not i	n use?		DURING	3 BUSII		IN FRONT OF AND STORED ED.		ES

pace Floor	Description/Use of Space	Capacity	Hours	# of Tables	# of Seats	# of Service Only Bars	# of Stand-Up Bars/Seats at Bar	Music
GROUND	DINING AREA	LESS THAN 75	M-THURS. 11:00 AM - 12:00 AM FRI-SAT.	12	24			BACKGROUND MUSIC ONLY
FLOOR			11:00 AM - 1:00 AM SUN. 12:00 PM -					
OUTDOOR	OUTDOOR DINING SHED	12 - 15	SAME AS ABOVE	4-5	9 - 12			
					1			

LOCATION & ZONING						
Is this a Special District? If yes, is it Clinton, West Chelsea or Hudson Yards?	YES	NO	CL - CLINTON			
Does the building have a Certificate of Occupancy ("C of O") or a letter of no objection?	VES	NO	SEE ATTACHMENT.			
Is a Public Assembly permit required?	YES	NO				
Are your plans filed with DOB?	YES	NO	N/A ==			

Community Notification/Relations							
NOTIFICATION:	# 1	SEE ATTACHMI	ENT.				
List all block associations; tenant associations, co-op boards or condo boards of residential buildings; and	# 2						
community groups that applicant has notified regarding its application. For	# 3						
each please list both the organization and individual you contacted	# 4						
	# 5						
Please provide dates when applicant met v	vith the gro	oups listed above.					
Who was your contact person at each grou	p you met	with?					
When did applicant post the notice that wa	s provided	?	06/05/2023				
Where did applicant post the notice that was provided?		FROM	T OF B	USINES	SS IN PUBLIC VIEW.		
Will applicant provide owner cell phone number to neighbors and respond to complaints that arise? Please provide number in space provided.				YES	NO		
Will applicant inform the Community Board office of its job openings and/or provide a hyperlink to applicants jobs webpage?				YES	NO		

State the name and type of business previously located in the space.	RESTAURANT (MEXICAN CUISINE).						
Has a liquor-licensed establishment previously occupied this space at any time? If yes, please provide the name of the business.	(YES)	NO	PONCHE TAQUERIACORP. (CURRENT BUSINESS) CURRENTLY OPERATES UNDER RESTAURANT WINE LICENSE (SINCE 2020).				
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?	(VES)	NO					
s the entrance ADA Compliant?	YES	(NO)					
Do you plan any changes to the existing façade? If yes, please describe.	YES	NO					
Nill applicant have a vestibule within the establishment?	(YES)	NO					
Nill applicant use a storm enclosure?	YES	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?	VES	NO					
Nill applicant comply with the NYC noise code?	VES	NO					
Will the establishment have any of the following: (circle all that apply)	FREN	CH DOOR	S GARAGE DOORS WINDOWS THAT CAN BE				
Will applicant close all windows, French doors, garage doors when any music or amplified sound (including televisions) is played inside the establishment?	YES	NO					
Nill 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					
las applicant obtained an acoustical report from a certified sound engineer to assess potential noise disturbance to the neighboring residents and buildings?	YES	NO	N/A				
Will applicant follow the recommendations of a certified sound engineer to nitigate potential noise disturbance to the neighboring residents and buildings, including placing speakers on the floor of the establishment?	YES	NO	N/A				
Vill the kitchen exhaust system extend to the roof?	VES	NO					
Vill the establishment have an illuminated sign?	YES	NO					
Vill the establishment have a canopy extending over the sidewalk?	YES	NO					
Where will the air conditioner be located? What type is it?		NIT INSI YARD.	DE RESTAURANT & MOTOR OUTSIDE AT				
Vhen was the air conditioner installed?	2016.						

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

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	
s applicant in this application seeking to include a sidewalk café in its liquor icense?	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 caré? 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 21st and March 21st, 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 closest obstruction including construction barricades?	YES	NO	
If open dining is in the 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 c pages 1 – 6 of this application, the stipulations on pages 7 and 8 control.	onflicts with a	ny response on

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) re (MCB4's recommendation is based on a vote July 26, 2023 full board meeting, with 36 of the recommendation, 0 members opposite abstaining and 0 present but not eligible)	taken at its members voting in favor	Denial unless all stipulations agreed to by applicant/owner are part of the method of operation Denial O Approval					
CB4 REPRESENTATIVES							
Nelly Gonzalez CB4 Assistant District Manager	Frank Holozubiec CB4 BLP Committee Co-Chair	lyki	Burt Lazarin CB4 BLP Committee Co-Cho	air			
APPLICANT AGREEMENT WIT	H THE COMMUNIT	Y					
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.							
SIGNITERE	BARAQUIEL SANCHEZ	T SIGNATURE O	APPLICANT	6/5/2023 DATE			
			1	-			

POLLACK, POLLACK, ISAAC & DE CICCO, LLP

ATTORNEYS AT LAW

ARTHUR POLLACK (1950-1985)
CONRAD E. POLLACK*
BRIAN J. ISAAC*
FRED A. DE CICCO*ADAM S. HANDLER*-+
JILLIAN ROSEN*
H. SUSAN OH*
NELSON A. MADRID*

ALEXANDRA D. BONDIKOV+
JOSHUA B. BLOCK*
KELLY A. BRESLAUER*
MICHAEL J. FICHERA, JR.*~
GREGORY I. FREEDMAN*'
MATTHEW D. GOODSTEIN*~
KENNETH D. LAW*
JEROME P. LIAMZON*~
KARN SHARMA*
YI Z. ZHAO*~

WESTCHESTER OFFICE
1045 PARK STREET, SUITE 104
PEEKSKILL, NY 10566
225 BROADWAY, 3RD FLOOR
T: 914-328-2400

NEW YORK, NY 10007 T: (212) 233-8100 F: (212) 566-7199 www.ppid.com

QF.COUNSEL ALLEN E. KAYE* ROBERT J. SHANNON* JACOB ARONAUER*~ GREGG A. PINTO*

May 25, 2023

<u>VIA CERTIFIED MAIL</u> #7022 2410 0001 3943 8932

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

RE:

Ponche Taqueria Corp.

420 West 49th Street, New York, NY 10019

To Whom It May Concern:

Please be advised that our firm represents the above referenced entity. As per SLA requirements ABC Law Section 110(b) you are hereby notified as to our client's intention to submit an application for Change in Class for an SLA On-Premises Liquor at the above address. Enclosed please find a Notice Form (fully executed) required by the New York State Liquor Authority providing a 30-day advance notice to the Community Board.

If you have any questions or comments in connection with the enclosed, please do not hesitate to contact our office at 212-233-8100.

Thank you,

Pollack, Pollack, Isaac & DeCicco, LLP

Fred A. DeCicco

Fred A. DeCicco FAD/nhm

Enclosure

OFFICE USE ONLY				
\bigcirc	Original	○ Amended	Date	

49

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

1. Date Notice Sent: 05/25/2023 1a. Delivered by: CERTIFIED MAIL
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
HEORIVED
For premises in the City of New York: Date: 5/30/23
O New Application O New Application and Temporary Retail Permit O Temporary Retail Permit O Removal
Class 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: COMMUNITY BOARD 4 ~ MANHATTAN
Applicant/Licensee Information:
4. Licensee Serial Number (if applicable): 1327581 Expiration Date (if applicable): 08/31/2024
5. Applicant or Licensee Name: PONCHE TAQUERIA CORP.
6. Trade Name (if any):
7. Street Address of Establishment: 420 WEST 49TH STREET
8. City, Town or Village: NEW YORK , NY Zip Code: 10019
9. Business Telephone Number of applicant/ Licensee: (212) 581-1235/1237
10. Business E-mail of Applicant/Licensee: bsanznyc@gmail.com
11. Type(s) of alcohol sold or to be sold: O Beer & cider O Wine, Beer & Cider O 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: Restaurant (full kitchen and full menu required)
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):

16. List the floor(s) of the building that the establishment is located on: BASEMENT AND GROUND FLOOR 17. List the room number(s) the establishment is located in within the building, if appropriate: 2	opia-rev12312021			
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? 19. Will the license holder or a manager be physically present within the establishment during all hours of operation? 19. Will the license holder or a manager be physically present within the establishment during all hours of operation? 19. Will the license holder or a manager be physically present within the establishment during all hours of operation? 19. 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		OFFICE USE ONLY		
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? 19. Will the floorse holder or a manager be physically present within the establishment during all hours of operation? 19. Will the floorse holder or a manager be physically present within the establishment during all hours of operation? 19. Will the floorse holder or a manager be physically present within the establishment during all hours of operation? 19. Will the floorse holder or a manager be physically present within the establishment during all hours of operation? 19. Will the floorse holder or a manager be physically present within the establishment during all hours of operation? 19. Will the floorse holder or a being purchased) provide the name and serial number of the floorse establishment is number of the floorse establishment is located? 10. Will the floorse and serial number of the floorse establishment is located? 11. Does the applicant or licensee own the building in which the establishment is located? 12. Building Owner's Full Name: 12. Building Owner's Full Name: 13. Building Owner's Street Address: 14. City, Town or Village: 15. Business Telephone Number of Building Owner: 16. Representative/Attorney's Street Address: 17. DECICCO, ESQ. / POLLACK POLLACK ISAAC & DECICCO LLP 18. Representative/Attorney's Street Address: 18. DECICCO, ESQ. / POLLACK POLLACK ISAAC & DECICCO LLP 19. Business Telephone Number of Representative/Attorney: 19. Business Temail Address of Representative/Attorney: 10. FAD@PPID.COM and NHM@PPID.COM 10. Business Temail Address of Representative/Attorney: 10. FAD@PPID.COM and NHM@PPID.COM		Original Amended Date		
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? 19. Will the license holder or a manager be physically present within the establishment during all hours of operation? 19. Will the license holder or a manager be physically present within the establishment during all hours of operation? 19. Will the license holder or a manager be physically present within the establishment during all hours of operation? 19. Yes (if Yes, SkiP 23-26) 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? 22. Building Owner's Full Name: BRA REAL ESTATE INC. 23. Building Owner's Street Address: C/O J&M REALTY SERVICES CORP., 343 ST. NICHOLAS AVE., STE 1 24. City, Town or Village: NEW YORK State: NEW YORK Zip Code: 10027 25. Business Telephone Number of Building Owner: [212) 721-0424 Representative/Attorney's Full Name: FRED A. DECICCO, ESQ. / POLLACK POLLACK ISAAC & DECICCO LLP 27. Representative/Attorney's Street Address: 225 BROADWAY, THIRD FLOOR 28. City, Town or Village: NEW YORK Zip Code: 10007 29. Business Telephone Number of Representative/Attorney: [212) 233-8100 30. Business E-mail Address of Representative/Attorney: FAD@PPID.COM and NHM@PPID.COM			4	
18. Is the premises located within 500 feet of three or more on-premises liquor establishments?	16. List the floor(s) of the building that the	ne establishment is located on: BASEMENT AND GROUND FLOOR		
19. Will the license holder or a manager be physically present within the establishment during all hours of operation? 19. Will the license holder or a manager be physically present within the establishment during all hours of operation? 19. Will the licensee over the building licensed business is being purchased) provide the name and serial number of the licensee: Name	17. List the room number(s) the establishm	nment is located in within the building, if appropriate: 2		
20. If this is a transfer application (an existing licensed business is being purchased) provide the name and serial number of the licensee: Name	18. Is the premises located within 500 feet	et of three or more on-premises liquor establishments?		
Name 21. Does the applicant or licensee own the building in which the establishment is located? Owner of the Building in Which the Licensed Establishment is Located 22. Building Owner's Full Name: BRA REAL ESTATE INC. 23. Building Owner's Street Address: C/O J&M REALTY SERVICES CORP., 343 ST. NICHOLAS AVE., STE 1 24. City, Town or Village: NEW YORK State: NEW YORK State: NEW YORK Zip Code: 10027 25. Business Telephone Number of Building Owner: (212) 721-0424 Representative/Attorney's Full Name: FRED A. DECICCO, ESQ. / POLLACK POLLACK ISAAC & DECICCO LLP 27. Representative/Attorney's Street Address: 225 BROADWAY, THIRD FLOOR 28. City, Town or Village: NEW YORK State: NEW YORK Zip Code: 10007 29. Business Telephone Number of Representative/Attorney: (212) 233-8100 1 am the applicant or licensee holder or a principal of the legal entity that holds or is applying for the license.	19. Will the license holder or a manager be	be physically present within the establishment during all hours of operation? Y2s	O No	
Owner of the Building in Which the Licensed Establishment is Located Owner's Full Name: BRA REAL ESTATE INC. 23. Building Owner's Street Address: C/O J&M REALTY SERVICES CORP., 349 ST. NICHOLAS AVE., STE 1 24. City, Town or Village: NEW YORK State: NEW YORK Zip Code: 10027 25. Business Telephone Number of Building Owner: (212) 721-0424 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: FRED A. DECICCO, ESQ. / POLLACK POLLACK ISAAC & DECICCO LLP 27. Representative/Attorney's Street Address: 225 BROADWAY, THIRD FLOOR 28. City, Town or Village: NEW YORK State: NEW YORK Zip Code: 10007 29. Business Telephone Number of Representative/Attorney: (212) 233-8100 30. Business E-mail Address of Representative/Attorney: FAD@PPID.COM and NHM@PPID.COM	20. If this is a transfer application (an exist	sting licensed business is being purchased) provide the name and serial number of the lice	nsee:	
Owner of the Building in Which the Licensed Establishment is Located Owner's Full Name: BRA REAL ESTATE INC. 23. Building Owner's Street Address: C/O J&M REALTY SERVICES CORP., 349 ST. NICHOLAS AVE., STE 1 24. City, Town or Village: NEW YORK State: NEW YORK Zip Code: 10027 25. Business Telephone Number of Building Owner: (212) 721-0424 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: FRED A. DECICCO, ESQ. / POLLACK POLLACK ISAAC & DECICCO LLP 27. Representative/Attorney's Street Address: 225 BROADWAY, THIRD FLOOR 28. City, Town or Village: NEW YORK State: NEW YORK Zip Code: 10007 29. Business Telephone Number of Representative/Attorney: (212) 233-8100 30. Business E-mail Address of Representative/Attorney: FAD@PPID.COM and NHM@PPID.COM		Name		
Owner of the Building in Which the Licensed Establishment is Located 22. Building Owner's Full Name: BRA REAL ESTATE INC. 23. Building Owner's Street Address: C/O J&M REALTY SERVICES CORP., 343 ST. NICHOLAS AVE., STE 1 24. City, Town or Village: NEW YORK State: NEW YORK Zip Code: 10027 25. Business Telephone Number of Building Owner: (212) 721-0424 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: FRED A. DECICCO, ESQ. / POLLACK POLLACK ISAAC & DECICCO LLP 27. Representative/Attorney's Street Address: 225 BROADWAY, THIRD FLOOR 28. City, Town or Village: NEW YORK State: NEW YORK Zip Code: 10007 29. Business Telephone Number of Representative/Attorney: (212) 233-8100 30. Business E-mail Address of Representative/Attorney: FAD@PPID.COM and NHM@PPID.COM		10,2,3,5,5,5		
22. Building Owner's Full Name: BRA REAL ESTATE INC. 23. Building Owner's Street Address: C/O J&M REALTY SERVICES CORP., 343 ST. NICHOLAS AVE., STE 1 24. City, Town or Village: NEW YORK State: NEW YORK Zip Code: 10027 25. Business Telephone Number of Building Owner: (212) 721-0424 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: FRED A. DECICCO, ESQ. / POLLACK POLLACK ISAAC & DECICCO LLP 27. Representative/Attorney's Street Address: 225 BROADWAY, THIRD FLOOR 28. City, Town or Village: NEW YORK State: NEW YORK Zip Code: 10007 29. Business Telephone Number of Representative/Attorney: (212) 233-8100 30. Business E-mail Address of Representative/Attorney: FAD@PPID.COM and NHM@PPID.COM	21. Does the applicant of licensee own the	The building in which the establishment is located? (If YES, SKIP 23-26)		
22. Building Owner's Full Name: BRA REAL ESTATE INC. 23. Building Owner's Street Address: C/O J&M REALTY SERVICES CORP., 343 ST. NICHOLAS AVE., STE 1 24. City, Town or Village: NEW YORK State: NEW YORK Zip Code: 10027 25. Business Telephone Number of Building Owner: (212) 721-0424 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: FRED A. DECICCO, ESQ. / POLLACK POLLACK ISAAC & DECICCO LLP 27. Representative/Attorney's Street Address: 225 BROADWAY, THIRD FLOOR 28. City, Town or Village: NEW YORK State: NEW YORK Zip Code: 10007 29. Business Telephone Number of Representative/Attorney: (212) 233-8100 30. Business E-mail Address of Representative/Attorney: FAD@PPID.COM and NHM@PPID.COM	4			
23. Building Owner's Street Address: C/O J&M REALTY SERVICES CORP., 343 ST. NICHOLAS AVE., STE 1 24. City, Town or Village: NEW YORK 25. Business Telephone Number of Building Owner: (212) 721-0424 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: FRED A. DECICCO, ESQ. / POLLACK POLLACK ISAAC & DECICCO LLP 27. Representative/Attorney's Street Address: 225 BROADWAY, THIRD FLOOR 28. City, Town or Village: NEW YORK State: NEW YORK 29. Business Telephone Number of Representative/Attorney: (212) 233-8100 30. Business E-mail Address of Representative/Attorney: FAD@PPID.COM and NHM@PPID.COM	Ow	wner of the Building in Which the Licensed Establishment is Located		
24. City, Town or Village: NEW YORK 25. Business Telephone Number of Building Owner: (212) 721-0424 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: FRED A. DECICCO, ESQ. / POLLACK POLLACK ISAAC & DECICCO LLP 27. Representative/Attorney's Street Address: 225 BROADWAY, THIRD FLOOR 28. City, Town or Village: NEW YORK State: NEW YORK Tip Code: 10007 29. Business Telephone Number of Representative/Attorney: (212) 233-8100 30. Business E-mail Address of Representative/Attorney: FAD@PPID.COM and NHM@PPID.COM	22. Building Owner's Full Name: BRA F	REAL ESTATE INC.		
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: FRED A. DECICCO, ESQ. / POLLACK POLLACK ISAAC & DECICCO LLP 27. Representative/Attorney's Street Address: 225 BROADWAY, THIRD FLOOR 28. City, Town or Village: NEW YORK State: NEW YORK Zip Code: 10007 29. Business Telephone Number of Representative/Attorney: (212) 233-8100 30. Business E-mail Address of Representative/Attorney: FAD@PPID.COM and NHM@PPID.COM	23. Building Owner's Street Address: C/	c/o J&M REALTY SERVICES CORP., 343 ST. NICHOLAS AVE., STE 1		
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: FRED A. DECICCO, ESQ. / POLLACK POLLACK ISAAC & DECICCO LLP 27. Representative/Attorney's Street Address: 225 BROADWAY, THIRD FLOOR 28. City, Town or Village: NEW YORK State: NEW YORK Zip Code: 10007 29. Business Telephone Number of Representative/Attorney: (212) 233-8100 30. Business E-mail Address of Representative/Attorney: FAD@PPID.COM and NHM@PPID.COM	24. City, Town or Village: NEW YORK	K State: NEW YORK Zip Coo	de: 10027	
Application for a License to Traffic in Alcohol at the Establishment Identified in this Notice 26. Representative/Attorney's Full Name: FRED A. DECICCO, ESQ. / POLLACK POLLACK ISAAC & DECICCO LLP 27. Representative/Attorney's Street Address: 225 BROADWAY, THIRD FLOOR 28. City, Town or Village: NEW YORK State: NEW YORK Zip Code: 10007 29. Business Telephone Number of Representative/Attorney: (212) 233-8100 30. Business E-mail Address of Representative/Attorney: FAD@PPID.COM and NHM@PPID.COM	25. Business Telephone Number of Building Owner: (212) 721-0424			
Application for a License to Traffic in Alcohol at the Establishment Identified in this Notice 26. Representative/Attorney's Full Name: FRED A. DECICCO, ESQ. / POLLACK POLLACK ISAAC & DECICCO LLP 27. Representative/Attorney's Street Address: 225 BROADWAY, THIRD FLOOR 28. City, Town or Village: NEW YORK State: NEW YORK Zip Code: 10007 29. Business Telephone Number of Representative/Attorney: (212) 233-8100 30. Business E-mail Address of Representative/Attorney: FAD@PPID.COM and NHM@PPID.COM				
Application for a License to Traffic in Alcohol at the Establishment Identified in this Notice 26. Representative/Attorney's Full Name: FRED A. DECICCO, ESQ. / POLLACK POLLACK ISAAC & DECICCO LLP 27. Representative/Attorney's Street Address: 225 BROADWAY, THIRD FLOOR 28. City, Town or Village: NEW YORK State: NEW YORK Zip Code: 10007 29. Business Telephone Number of Representative/Attorney: (212) 233-8100 30. Business E-mail Address of Representative/Attorney: FAD@PPID.COM and NHM@PPID.COM				
26. Representative/Attorney's Full Name: FRED A. DECICCO, ESQ. / POLLACK POLLACK ISAAC & DECICCO LLP 27. Representative/Attorney's Street Address: 225 BROADWAY, THIRD FLOOR 28. City, Town or Village: NEW YORK State: NEW YORK Zip Code: 10007 29. Business Telephone Number of Representative/Attorney: (212) 233-8100 30. Business E-mail Address of Representative/Attorney: FAD@PPID.COM and NHM@PPID.COM	Represe Application fo	entative or Attorney Representing the Applicant in Connection with the		
27. Representative/Attorney's Street Address: 225 BROADWAY, THIRD FLOOR 28. City, Town or Village: NEW YORK State: NEW YORK Zip Code: 10007 29. Business Telephone Number of Representative/Attorney: (212) 233-8100 30. Business E-mail Address of Representative/Attorney: FAD@PPID.COM and NHM@PPID.COM	Application is	a receise to transc in Account at the Establishment Identified in this Notice		
28. City, Town or Village: NEW YORK 29. Business Telephone Number of Representative/Attorney: (212) 233-8100 30. Business E-mail Address of Representative/Attorney: FAD@PPID.COM and NHM@PPID.COM I am the applicant or licensee holder or a principal of the legal entity that holds or is applying for the license.	26. Representative/Attorney's Full Name:	FRED A. DECICCO, ESQ. / POLLACK POLLACK ISAAC & DECICCO	LLP	
29. Business Telephone Number of Representative/Attorney: (212) 233-8100 30. Business E-mail Address of Representative/Attorney: FAD@PPID.COM and NHM@PPID.COM I am the applicant or licensee holder or a principal of the legal entity that holds or is applying for the license.	27. Representative/Attorney's Street Address	Iress: 225 BROADWAY, THIRD FLOOR		
30. Business E-mail Address of Representative/Attorney: FAD@PPID.COM and NHM@PPID.COM I am the applicant or licensee holder or a principal of the legal entity that holds or is applying for the license.	28. City, Town or Village: NEW YORK	State: NEW YORK Zip Coc	de: 10007	
I am the applicant or licensee holder or a principal of the legal entity that holds or is applying for the license.	29. Business Telephone Number of Represe	sentative/Attorney: (212) 233-8100		
I am the applicant or licensee holder or a principal of the legal entity that holds or is applying for the license.	20.0.1.0.11.11.0.00	ative/Attorney: FAD@PPID.COM and NHM@PPID.COM		
I am the applicant or licensee holder or a principal of the legal entity that holds or is applying for the license.	30. Business E-mail Address of Representat			
	30. Business E-mail Address of Representat			
the Authority when granting the license. I understand that representations made in this form will also be relied	l am the applicant or li	licensee holder or a principal of the legal entity that holds or is applying for the li	cense.	
upon, and that false representations may result in disapproval of the application or revocation of the license.	l am the applicant or li Representations In this fo	form are in conformity with representations made in submitted documents relied	d upon by	
By my signature, I affirm - under Penalty of Perjury - that the representations made in this form are true.	I am the applicant or li Representations In this fo the Authority when gran	form are in conformity with representations made in submitted documents relied anting the license. I understand that representations made in this form will also I	d upon by be relied	
	I am the applicant or li Representations In this fo the Authority when grar upon, and that false re	form are in conformity with representations made in submitted documents relied anting the license. I understand that representations made in this form will also learning the license may result in disapproval of the application or revocation of the l	d upon by be relied icense.	
31. Printed Principal Name: BARAQUIEL SANCHEZ Title: PRESIDENT	I am the applicant or li Representations In this fo the Authority when grar upon, and that false re	form are in conformity with representations made in submitted documents relied anting the license. I understand that representations made in this form will also learning the license may result in disapproval of the application or revocation of the l	d upon by be relied icense.	
Cash	I am the applicant or li Representations In this fo the Authority when grar upon, and that false re By my signature, I aff	form are in conformity with representations made in submitted documents relied anting the license. I understand that representations made in this form will also be representations made in this form will also be representations may result in disapproval of the application or revocation of the lifting - under Penalty of Perjury - that the representations made in this form are the submitted of the submitted in this form are the submitted in this form are the submitted in this form are submitted.	d upon by be relied icense.	

Principal Signature: 👠



Letter of Completion

RALPH P ALBANESE 76 COURT STREET, SUITE 24 BROOKLYN, NY 11201

Re: 420 WEST 49 STREET, MANHATTAN

Job #: 110151772 Block: 1058 Lot: 43

Dear RALPH P ALBANESE:

Please be advised that the work related to the above application is completed and was signed off in the Building Information System (BIS) on 09/08/2010.

Because this job was filed as Directive 14 of 1975, the owner retained a registered professional engineer or registered architect, who certified that he/she inspected the work approved on this application and that it complies with the applicable laws, rules and regulations of the Department of Buildings.

Based on the nature of the work filed on this application a new certificate of occupancy is not required.

Very truly yours,

Borough Commissioner MANHATTAN

This permit copy created on 03/05/2020 reflects the Commissioner(s) as of such date.

Letter Generated on: 03/05/2020



Community Outreach Notice: Ponche Taqueria Corp., 420 West 49th Street, New York, NY 10019

Nancy Molina <nhm@ppid.com>

Tue, Jun 6, 2023 at 9:35 AM

Cc: Fred DeCicco <fad@ppid.com>

Bcc: rjbenfatto@hyhkalliance.org, pgouris@hyhkalliance.org, kathleentreat123@gmail.com, mcgee79@aol.com, cberthet@me.com, jrestuccia2@clintonhousing.org, info@clintonhousing.org, rmarcano@clintonhousing.org, "west43rdstreetnyc@gmail.com" <west43rdstreetnyc@gmail.com" <mptenants@gmail.com" <mptenants@gmail.com" <mptenants@gmail.com", ashleyll@aol.com, twocatsltd@worldnet.att.net, "hk4546ba@gmail.com" <hk4546ba@gmail.com>, aefearshk@earthlink.net, larrymichaelroberts@gmail.com, jamesbogues@gmail.com, mariagnys@aol.com, rpimentel@commonground.org, dsage@commonground.org, nkyriacou@yahoo.com, gdclay@att.net, "delores.rubin@att.net" <delores.rubin@att.net>, "BrianScottVeber@gmail.com" <Bri>BrianScottVeber@gmail.com" <Bri>BrianScottVeber@gmail.com, west55ba@gmail.com>, john.mudd@usa.net, "info@hcc-nyc.org" <info@hcc-nyc.org" <info@hcc-nyc.org" <info@hcc-nyc.org" <info@hcc-nyc.org" <info@hcc-nyc.org, john.waldman@redcross.org, "hellskba@gmail.com, awm3333@me.com, jessbondy@aol.com, john.waldman@redcross.org, "hellskba@gmail.com" <hellskba@gmail.com>, "cressidac@gmail.com" <cressidac@gmail.com", jflechas@hcc-nyc.org, ljames@hcc-nyc.org, "Gonzalez, Nelly (CB)" <negonzalez@cb.nyc.gov>

To Whom It May Concern:

Please be advised that our office represents Ponche Taqueria Corp. My client is a tenant who has been leasing space used for the purpose of a restaurant establishment located at 420 West 49th Street, New York, NY 10019.

My client currently operates a sit-down Mexican restaurant with the supplemental sale of wine and beer pursuant to a Restaurant Wine license issued from the Alcoholic Beverage Control ("ABC"). We have delivered notice to Community Board 4 of our intention to apply for a Class Change Application to an On-Premises Restaurant Liquor License.

This email will serve as formal notice to you that the application of Ponche Taqueria Corp. will be on the agenda at the next Community Board meeting on Tuesday, June 13, 2023 at 6:30 pm.

Your support of this application is greatly appreciated.

If you have any questions or comments in connection with the application or any other aspects of our client's operation at the Premises, please do not hesitate to contact me.

Regards, Nancy Molina Paralegal

Pollack Pollack Isaac & DeCicco, LLP

225 Broadway, Third Floor New York, NY 10007 Tel: (212) 233-8100 x306 Fax: (212) 566-7199

Email: nhm@ppid.com

WIRE TRANSFER FRAUD NOTICE: Never trust wiring instructions sent via email. Cyber criminals are hacking email accounts and sending emails with fake wiring instructions. These emails are convincing and sophisticated. Always independently confirm wiring instructions in person or via a telephone call to a trusted and verified phone number. Never wire money without double-checking that the wiring instructions are correct. If you have a closing transaction with us and you receive an email containing Wire Transfer Instructions, DO NOT RESPOND TO SUCH EMAIL, instead, call this office by telephone using previously known contact information and NOT information provided in the email, to verify the information prior to sending any wired funds.

This electronic message and any attachments thereto contain information from the law firm of Pollack Pollack Isaac & DeCicco, LLP which may be confidential and/or privileged. The information is intended to be for the use of the individual or entity named above. If you are not the intended recipient, be aware that any disclosure, copying, distribution, or use of the contents of this information is prohibited. If you have received this electronic transmission in error, please notify me immediately by telephone at (212) 233-8100 and delete this email in its entirety and any copies thereof.

PONCHE TAQUERIA CORP. Kitchen 420 W. 498+. NYM 10019. 0 RESTROOM COUMER ONING ARCA MINDOW EMTRANCE

7947 NS 71011017	_
INJM78AE	
STA, RS TO BASEMON	

PONUTE TRAUERLY CURP. 420 W 49 STried.
New York, NY 10019.

PONCHE TAQUERIA 420 w. 49 st. P10019 - OUTDOUR DINIAM SHED-9TH AVE DUTDOOR DINING SHED PONCHE TAQUERIA CORP 420 W. 49 St. W.49 ST. P1001 M KN

10th Ave.

TORTAS PLANCHADAS

MEXICAN SANDWICHES

ALL TORIAS have a layer of mayo, cheese, beans, quac, lettuce, tomato. Served on a white crunch sandwich roll.11.95 POLLO (Shredded Chicken)... .13.25 CAMARONES (Shrimp). 12.95 ALAMBRE (Steak)... ... 12.50 PONCHE STYLE (Pulled Pork)... 12.50 BORRACHAS (Shredded Pork)... 12.00 VEGGIE (Mushroom, Onion, Pepper & Zucchini).... **AL PASTOR** 12.50 Shredded pork marinated w. quajillo peppers and pineapple

APPETIZERS
GUACAMOLE WITH CHIPS
Avocado, tomato, onions, cilantro and lime

9.95

..7.50

ELOTE PONCHE STYLE

1 corn on the cob, mayonnaise, cotija cheese & chilly powder

SOUPS

QUESADILLAS

ALL QUESADILLAS are made with a flour tortilla, Comes with sour cream and pico de gallo

comes will soon cream and pice at gain	
QUESO (Cheese)	11.25
POLLO (Shredded Chicken)	12.95
CAMARONES (Shrimp) includes beans	13.95
ALAMBRE (Steak)	13.50
PONCHE STYLE (Pulled Pork)	12.95
AL PASTOR (Pork & Pineapple)	12.95
VEGEUARIANA (Mushrooms, zurchinf, geopers, & onfons)	
(Mushrooms, zurchlinf, neppers & onfons)	10000000000000000000000000000000000000

DESSERTS

POSTRES

PLATANOS AL PONCHE	7.00
Sweet fried plantains topped with sweet condensed milk	
FLAN CASERO Home Made Flan	7.00
TIRAMISU	7.00
TRES LECHES	

BEVERAGES

JARRITOS	3.95
Grapefruit, Pineapple, Tamarind, Mandarin & Lime	
UNSWEETENED ICE TEA	3.50
MEXICAN COKE	3.95
SIDRAL MUNDET	3.75
SANGRIA SENORIAL	
TROPICANA JUICE	3.50
CRANBERRY JUICE	
CAN COKE / DIET COKE	3.00
GINGER ALE	
CLUB SODA	3.00
POLAND SPRING WATER	2.50
S. PELLEGRINO 750ml 25oz	5.75
ACQUA PANNA WATER 500ml 6.9oz	
BEER	6.00
Modelo Especial, Corona, Pacifico, Negra Modelo, Coors light, XX Large special, XX Amber Special, Heinken	
REFRESCAS CORONA(Guava-lime, Coconut-lime, Passion fruit-lime)	5.00
WHITE-CLAWS (Black-cherry, Mango)	5.00
WINE BOTTLE	
Red: (Merlot, Malbec, Rioja, Cabernet) White: (Moscato, Chardonnay, Pinot Grigio, Riesling)	

You can find us on: www.ponchetaquerianyc.com







DELIVERY MENU



PONCHE TAQUERIA

MEXICAN CUISINE
FREE DELIVERY

420 WEST 49 STREET
NEW YORK, NY 10019
(BETWEEN 9TH AND 10TH AVE)

TEL: 212.581.1235

TEL: 212.581.1237

WE ACCEPT VISA / AMEX / MASTERCARD



ENTREES

ALL ENTREES are served with rice and beans or salad

The fajitas, pollo and carnitas plates are

BURRITOS

ALL BURRITOS come with rice, beans, lettuce,

9.95

served with a side of warm tortillas	
CHILAQUILES DE POLLO Chota de grantom de la companya del companya de la companya de la companya del companya de la companya del companya de la companya de la companya de la companya de la companya del companya de la companya del companya de la companya del companya de la comp	15.95 sad
ENCHILADAS DE POLLO 3 Soft corn tortillas stuffed with sauteed chicken, topped homemade mole poblano, crema, lettuce and Mexican cheese	16.95
ENCHILADA SUIZAS DE POLLO	17.95 oped with
ENCHILADAS VEGETARIANAS	15.95 s. Your
POLLO PONCHE Diced chicken breast, peppers, onions, tomato and cilantro in a white win	ie sauce
FAJITAS AL PONCHE Hanger steak sauteed with green peppers, red peppers, and onions	19.25
CARNITAS BORRACHASRoasted pork sauteed with herbs, red poblano peppers, onions.	
LENGUADO AL PONCHE Filet of sole, sauteed with tomatoes, scallions, cilantro and garlic in a wh sauce	19.50 ite wine
CHILAQUILES DE STEAK Choice of green tomatillo or red adobo sauce. Sauteed tortillas with onio epazote, topped with crema and Mexican fresh cheese	17.00 ns and
CHILAQUILES DE SHRIMP Choice of green tomatillo or red adobo sauce. Sauteed tortillas with onio epazote, topped with crema and Mexican fresh cheese	19.00 ins and
ENCHILADAS DE STEAK	ice or red
ENCHILADAS DE SHRIMP 3 Soft corn tortillas stuffed with shrimp. Served with a green tomatillo so sauce. Topped with crema, lettuce, and Mexican fresh cheese	auce or red
SUIZAS ENCHILADAS DE STEAK	18.25 uce or red
SUIZAS ENCHILADAS DE SHRIMP 3 Soft corn tortillas stuffed with shrimp. Served with a green tomatillo s sauce. Topped with crema, melted & fresh Mexican cheese	
FAJITA POLLOChicken sauteed with green peppers, red peppers, and onions	
FAJITA SHRIMPShrimp sauteed with green peppers, red peppers, and onions	20.50

sour cream, cheese, pico de gallo, tomatillo sauce inside.		
BURRITO DE POLLO Shredded chicken, marinated with puree of tomato and chipotle sauce		
BURRITO DE CAMARONES	14:95	
Shrimp marinated with a mexican style pepper sauce, includes guacam	910	
BURRITO ALAMBREGrilled steak sauteed with peppers, and onions		
BURRITO DE PESCADO Tempura mahi-mahi includes remoulade sauce	14.95	
BURRITO PONCHE STYLE	13.95	
OAXACA* pulled pork marinated with pasilla peppers		
BURRITO BORRACHOPUEBLA* style shredded pork marinated with tecate beer, includes gua	13.95 camole	
BURRITO ALA PARRILA		
Grilled chicken breast, includes guacamole		
BURRITO AL PASTORShredded pork marinated with guajillo pepper and pineapple	13.95	
BURRITO LOCO	15.50	
Sauteed shrimp, steak and pork		
BURRITO DEL MAR	15.50	
Shrimp marinated in guajillo peppers, tempura mahi-mahi with picklet and remoulade sauce	d cabbage	
BURRITO MAR Y TIERRA	15.50	
Grilled steak and tempura mahi-mahi, pickled cabbage and remoulad		
BURRITO VEGETARIANO	12.95	
Sauteed zucchini, onions, peppers and mushrooms		
Add Sauce for a Ranchero Style Burrito - \$3.2	25	
Add a sauce on top of any burrito (Mole, Green, o	r Red)	
SALAD		
ENSALADA DEL MONTE Romaine lettuce, spinach, corn, fried tortilla chips, queso fresco, mixed with made lemon vinaigrette	10.95 h a home-	
ENSALADA DEL PONCHE	10.95	

Mixed greens, cabbage, tomatoes, onions, queso fresco, mixed with a homemade

Romaine lettuce, tortilla chips, & cotija cheese mixed with a homemade caesar

Add Chicken \$4 / Add Shrimp \$6 / Add Steak \$5

ENSALADA CAESAR

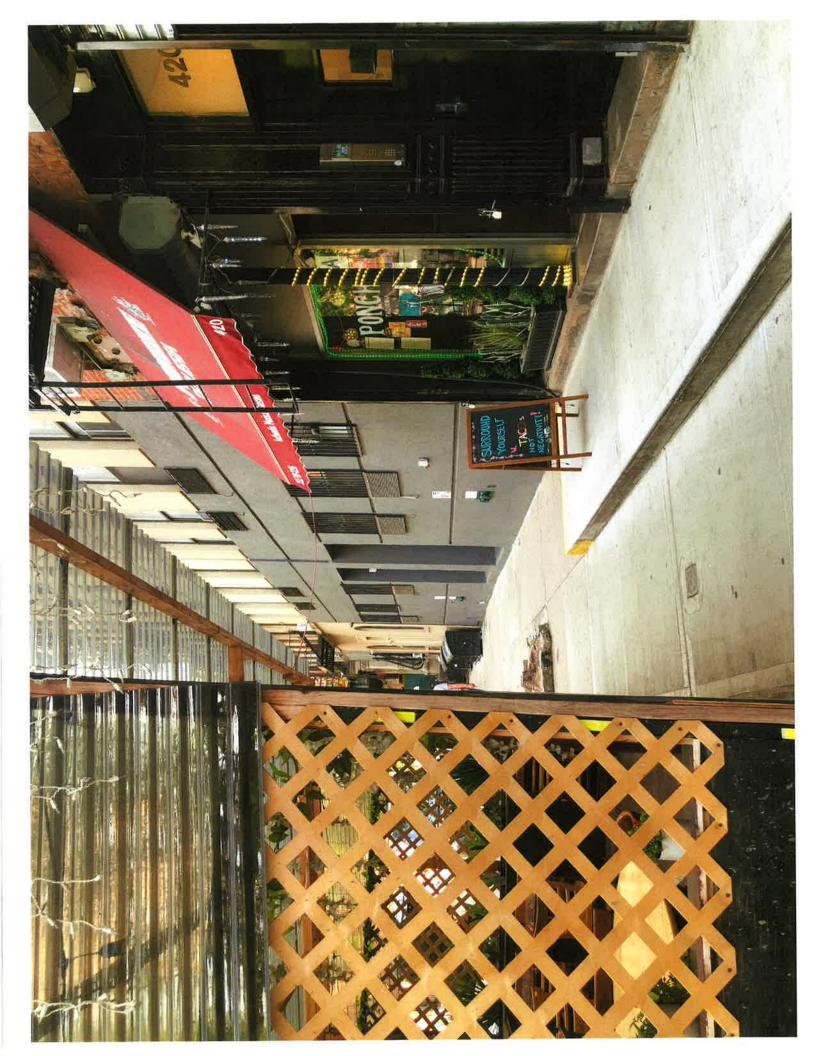
balsamic vinaigrette

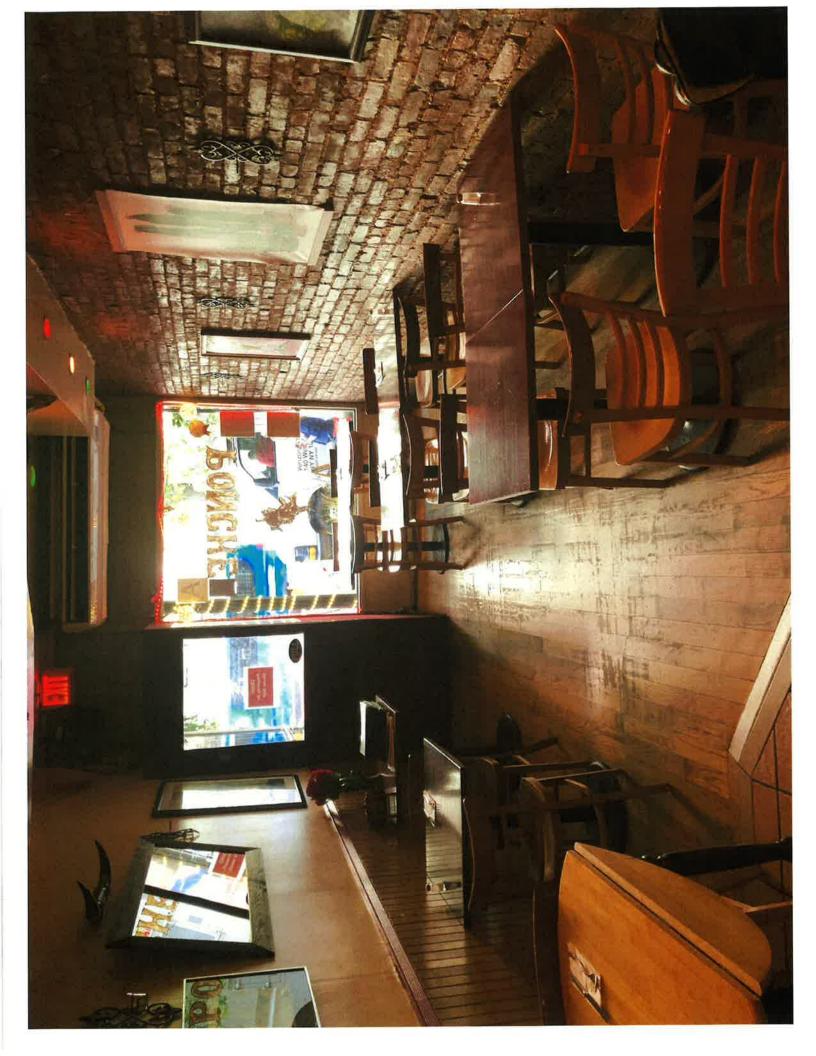
dressing

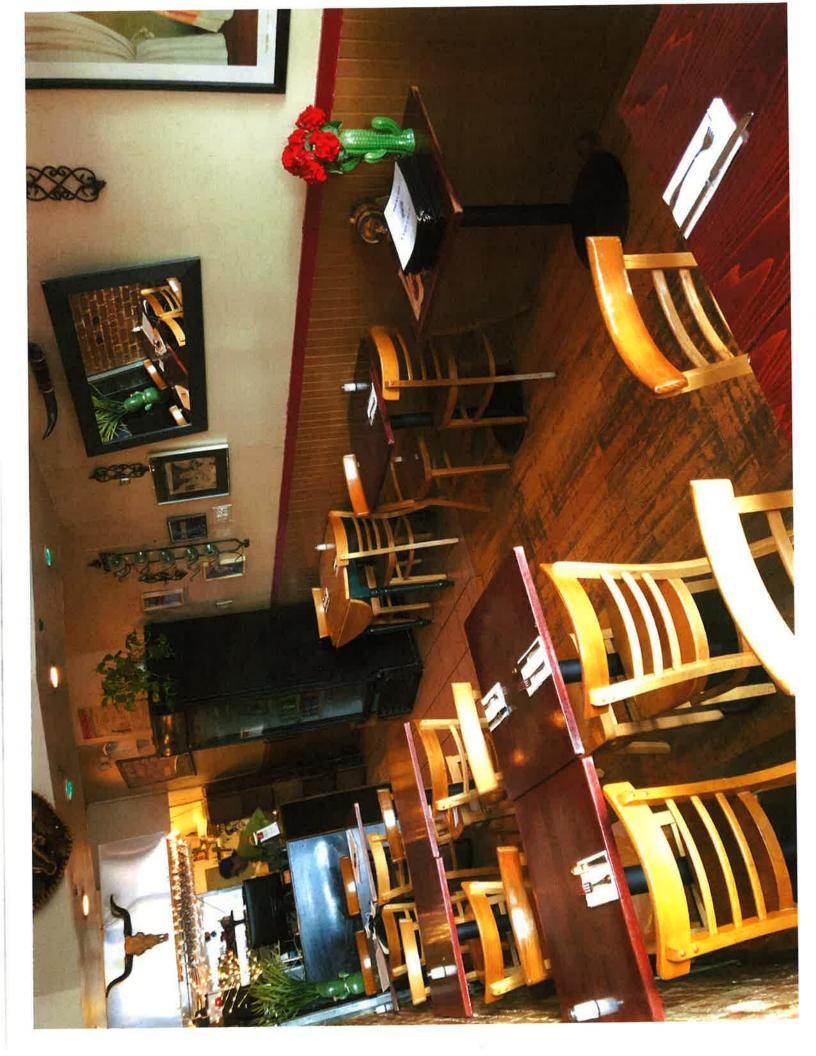
Tempura mahi-mahi, topped with homemade pickled cabbage, chipotle sauce on a flour tortilla	remoulade
EL PONCHE Pulled pork marinated with citrus flavors, topped with cilantro, fresh or tomatillo sauce on a flour tortilla	5.25 nions &
AL DASTOR	5.25
Pork marinated with guajillo peppers & pineapple topped with cilantro onions, on a flour tortilla	, tresh
CARNITAS BORRACHAS Shredded pork marinated with tecate beer, topped with cilantro, fresh tomatillo sauce on a corn tortilla	ONIONS &
VEGETARIANO Sauteed mushrooms, onion, pepper & zucchini topped with cilantro on tomatillo sauce on a flour tortilla	ions &
TACO COMBO (choose any 3)	18.50
Add Cheese on taco 2.00	
SIDES	
ADD CHEESE ON TACO	2.00
SIDE OF JALAPENOS	2.75
SIDE OF FRIED SWEET PLANTAINS	6.50
SIDE OF PICO DE GALLO	4.50
SIDE OF VEGETABLE OF THE DAY	5.95
SIDE OF RICE	6.25
SIDE OF BEANS	6.25
SIDE OF RICE & BEANS	
SIDE OF EXTRA CHEESE	3.25
SIDE OF SOUR CREAM	3.00
SIDE OF HOT SAUCE (Brava or Mild)	3.35
SIDE OF CHIP	

POLLO	5
onions and tomatillo on a corn tortilla CAMARONES 5.5	0
Shrimp sauteed in a guajillo pepper sauce, topped with black beans, guacamole on flour tortilla	
ALAMBRE 5.5	O
Grilled steak sauteed with onions, peppers, topped with melted cheese, cliantro, onions, and tomatillo sauce on a flour tortilla	,
CARNE ASADA	mic
PESCADO	ad
EL PONCHE Pulled pork marinated with citrus flavors, topped with cilantro, fresh onions & tomatillo sauce on a flour tortilla	
AL PASTOR Pork marinated with guajillo peppers & pineapple topped with cilantro, fresh onions, on a flour tortilla	
CARNITAS BORRACHAS Shredded pork marinated with tecate beer, topped with cilantro, fresh onions 8 tomatillo sauce on a corn tortilla	2! }
VEGETARIANO Sauteed mushrooms, onion, pepper & zucchini topped with cilantro onions & tomatillo sauce on a flour tortilla)(
TACO COMBO (choose any 3)	5(







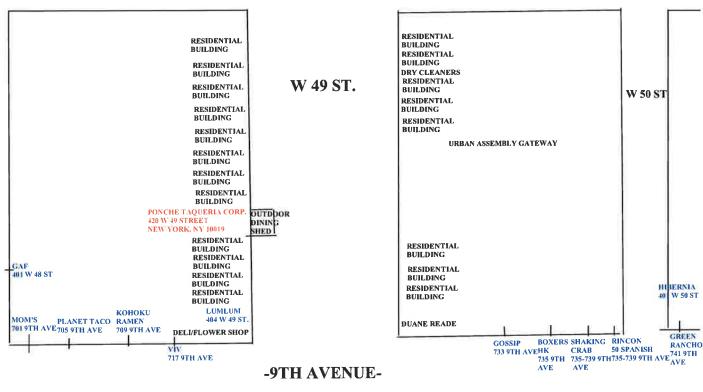


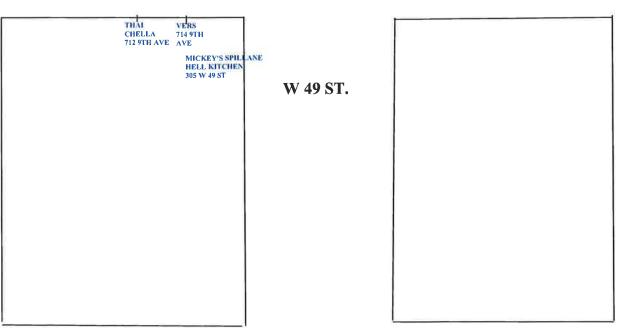






-10TH AVENUE-





POLLACK, POLLACK, ISAAC & DE CICCO, LLP

ATTORNEYS AT LAW

ARTHUR POLLACK (1950-1985)
CONRAD E. POLLACK*
BRIAN J. ISAAC*
FRED A. DE CICCO*ADAM S. HANDLER*-+
JILLIAN ROSEN*
H. SUSAN OH*
NELSON A. MADRID*

ALEXANDRA D. BONDIKOV+
JOSHUA B, BLOCK*
KELLY A, BRESLAUER*
MICHAEL J. FICHERA, JR.*~
GREGORY I. FREEDMAN*'
MATTHEW D. GOODSTEIN*~
KENNETH D. LAW*
JEROME P. LIAMZON*~
KARN SHARMA*
YI Z. ZHAO*~

225 BROADWAY, 3RD FLOOR NEW YORK, NY 10007

> T: (212) 233-8100 F: (212) 566-7199 www.ppid.com

WESTCHESTER OFFICE 1045 PARK STREET, SUITE 104 PEEKSKILL, NY 10566 T: 914-328-2400

QF COUNSEL
ALLEN E. KAYE*
ROBERT J. SHANNON*
JACOB ARONAUER*~
GREGG A. PINTO*
ADMITTED IN NY! | N| - | MA+ | FL'

June 5, 2023

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

Re:

Class Change Application to an On-Premises Liquor License

Class Change License Type:

On-Premises Restaurant Liquor License

Applicant:

Ponche Taqueria Corp.

Premises:

420 West 49 Street, New York, NY 10019

To Whom It May Concern:

We are the attorneys for Ponche Taqueria Corp., currently operating under an On-Premises Restaurant Wine License, and the applicant for a Class Change Application to an On-Premises Restaurant Liquor license at the referenced Premises.

The sale of alcohol has been an integral part of a sit-down Mexican restaurant currently operated by the Applicant since its business operations began in 2020. This establishment is clearly and completely in the public interest. It has provided and desires to continue to provide the neighborhood with an exciting dining experience. The service of alcohol pursuant to the proposed On-Premises Restaurant Liquor License will be a vital accessory to this operation.

In all respects, the current establishment at 420 West 49 Street, New York, NY 10019 has been and will continue to be an asset to the community and in the public interest.

If you have any questions or comments with regard to the foregoing, please do not hesitate to contact the undersigned.

Pollack Pollack Isaac & DeCicco, LLP

Fred A. DeCicco

Fred A. DeCicco, Partner