Manhattan Community Board 4 (All Fields Must Be Completed)

Liquor License/Sidewalk Cafe Stipulations Application

CORPORATION NAME			DOING BUSINESS AS (DBA)						
Gurume Res	taurant (Group LLC	Gurumé						
STREET ADDRESS			CROSS STR	CROSS STREETS ZIP CODE					
313 West 4	6 St. Ne	w York, NY 10036	On 46 St	betwee	en 8th and	l 9th A	ve	10	0036
OWNER	NAME:	Joon Ryu			NAME:				
(Attach a list of all the people that will be associated/listed	PHONE:	347-369-6785	ATTORNEY REPRESEN		PHONE:				
with the license)	EMAIL:	info@gurumerestaurant.com			EMAIL:				
	NAME:	Kevin Chand			NAME:	Kail	lash	Partne	rs 3 LLC
MANAGER	PHONE:		LANDLORE)	PHONE:	(646-	-249-50	007
	EMAIL:				EMAIL:				
APPLICATION	ON TYP	E (X Liquor License	_		Unenclo	sed Si	idewi	alk Cafe	?)
	Has applicant	t owned or managed a similar business?			YES			NO	
New New	What is/was t	he name and address of establishment?		Orbital K	Kitchens - ' Kitchens -	74 5th	et, New York Ave, New Yo udson St, Ne	ork	
	What were th	e dates applicant was involved with this former premi	se?	Barnjoo - 09/2017 to 03/2020 Orbital Kitchens - 03/2020 - 10/2020 Hudson Kitchens - 12/2020 - 12/2021					
○ Corp									
Change/Class Change/Removal	Is applicant n	naking any alterations or operational changes?		YES NO					
Change/Acmovar	If alterations of	or operational changes are being made, please descr	ribe/list all change	9S.					
	What is the co	urrent license # and expiration date?							
Anteration	Please list/de	scribe the nature of all the changes and attach the pl	ans:						
METHOD O	F OPER	ATION							
TYPE OF ALCOH	0	Beer & C	ider		Š	Wine/B	leer & Cider		
ESTABLISHMEN		Night Club (☐ Hotel	I О Ва	ar/Tavem	1	O Ca	tering Establishment	
TYPE	Adult Entertainment Wine B	ar 🔘 Da	nce Club	O Spor	ts Bar (O c	lub (Fratem	al Organization – Members Only)	
Has applicant/owner filed with the SLA? If yes, when? If no, when do you plan to file?			YES	NO	30 (days af	fter n	otice wa	s sent to CB4
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				
		? If yes, please attach a diagram of the that trigger the rule.	YES	NO	yes	s, diagr	ram	attached	1
schools and houses of worship that trigger the rule. Has applicant/owner(s) read MCB4 Policy Regarding Concentration and Location of Alcoholic-Serving Establishments?				NO	yes	S			

OPERATIO	ONAL DE	TAILS (*Cl	osing time wil	l be wh	ien es	stablishme	nt is vac	cated of	all patrons)				
		MONDAY	TUESDAY	Y	WE	DNESDAY	THUE	RSDAY	FRIDAY	SAT	ΓURDAY	SI	JNDAY
HOURS*	Operation	<					5	pm - 12	2 am				>
(Indoor Only)	Kitchen	<					5	pm - 12	2 am				>
	Music	<					5	pm - 1	2 am	-			>
If you plan to ha (Circle all that a		type(s)?	BACKGRO	UND	Ll	IVE MUSIC	1	DJ	JUKE BOX		KA	RAOKE	
	FF 37					OCCUP.	ANCY						
	(Certi	pacity ificate of upancy)	Maximum # of Persons Occupying Premises (Including Employees)	Numl of Tal		Number of Seats		er of Servi dy Bars	ce Numbe Stand-Up		Number of at Stand-U		
INSIDE		50	50	18		36		0	1		4		
OUTSIDE (Other than sidewalk café)													
DCA APPROVED UNENCLOSI SIDEWALK CAFÉ	ED									1			
How many floors	s are there? Wh	nat is the capaci	y for each floor?)			ground floor - 50 and cellar - storage						
How frequently	will the owner(s) be at the estab	lishment?				every working day						
Will there be da	ncing?						YES	NO	no				
Will applicant ha	ave bottle or tab	le service for be	verage alcohol?				YES	NO	no				
Will applicant be	e hosting private	e; promotional o	corporate even	ts?			YES	NO	yes, if the opportunity presents itsel				
Will outside pror	noters be used	on a regular bas	sis? If yes please	e descril	be.		YES	NO			no		
Will applicant ha	ave a security pl	lan? If, yes plea	se attach.				YES	NO	no				
Will security plan	n be implement	ed?					YES	NO	no				
Will State certific	ed security pers	onnel be used?					YES	NO	no				
Will New York N	lightlife Associa	tion and NYPD	Best Practices b	e follow	ed?		YES	NO	if applic	able,	yes		
Does applicant a operation?	agree to notify N	MCB4 prior to m	aking changes to	its met	thod o	of	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?					vill staff	YES	NO	not ap	plicat	ole			
Where will delive	ery bicycles be	stored during the	e day when not i	n use?			r	not app	olicable				

MULTPI	LE SPACES/FLOO	RS CAPACITY	BREAKD	OWN				
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	50	M - S 5 pm -12 am	18	36	0	1 bar 4 seat	background
cellar	storage							
first floor	storage							

LOCATION & ZONING			
Is this a Special District? If yes, is it Clinton, West Chelsea or Hudson Yards?	YES	NO	yes clinton
Does the building have a Certificate of Occupancy ("C of O") or a letter of no objection?	YES	NO	building has a CO
Is a Public Assembly permit required?	YES	NO	no
Are your plans filed with DOB?	YES	NO	yes

Community Notification/Relations								
NOTIFICATION:	We reached	d out to all the block associations and tenant						
List all block associations; tenant associations, co-op boards or condo boards of residential buildings; and	# 2	associations	associations on the list provided by Nelly Gonzalez.					
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 with the groups listed above.			We are waiting to hear back from the groups.					
Who was your contact person at each grou	p you me	t with?	not applicable					
When did applicant post the notice that was	s provided	1?	8/5/23					
Where did applicant post the notice that was provided?			french (doors,	front	gate, and brick wall facing 8th ave		
Will applicant provide owner cell phone number to neighbors and respond to complaints that arise? Please provide number in space provided.			0	YES	NO	yes, 347-369-6785		
Will applicant inform the Community Board office of its job openings and/or provide a hyperlink to applicants jobs webpage?				YES	NO	yes		

BUILDING DESIGN			
State the name and type of business previously located in the space.	La	Rivista	ta Ristorante/Broadway Joe's - restaurant
Has a liquor-licensed establishment previously occupied this space at any time? If yes, please provide the name of the business.	YES	NO	yes, Annlisa Italia LTD or La Rivista Ristoral
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	no
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	yes
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)	FÆN	CH DOOR	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	yes
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	existing canopy extends slightly over side
Where will the air conditioner be located? What type is it?	existi	ng con	mpressor on the roof
When was the air conditioner installed?	ex	isting a	air conditioner, unsure of date, but has been ser

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	no
Are the floorplans for the outdoor space(s) included?	YES	NO	not applicable
Will applicant close and vacate the outdoor space(s) by 11PM on Friday & Saturday and 10 PM on all other days?	YES	NO	not applicable
Will the service and consumption of alcohol in any outdoor space only be via seated food service?	YES	NO	not applicable
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	not applicable
If open dining, will you comply with all NYC DOT guidelines?	YES	NO	not applicable
If open dining, will the installation be year-round?	YES	NO	not applicable

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's recommendation is bases October 4, 2023full board meetin of the recommendation. O men abstaining and O present but n	(MCB4) recommends: d on a vote taken at its lig. with 40 members voting in favor abers opposed. 0 members:	Demail unloss will stipulations agreed to by app operators Demail Approval	Scantivener are part of the method of
CB4 REPRESENTATIVE	S		
Manager Nelly Generales	Frank Hotozublec CB4 BLD Committee Co. Chart	Hydia Buri Lanaria (3)	HS INCHES
APPLICANT AGREEME	NT WITH THE COMMUNIT	Y	
stipulations are essential prere- stipulations incorporated in the agreement between MCB4 and	quisites to the MCB4 recommendate method of operation of its liquor lice	ty support of this application and acknown regarding this application. Applicanuse. The atipulations in this application writing signed by MCB4 and application this application.	n constitute the entire
SIGN HERE ->	Joon Ayo PRINT NAME OF APPLICANT	Jan Ry SIGNATURE OF APPLICANT	8/6/22 DATE

	OFFICE	USE ONLY	
Original	Amended	Date	

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

1. Date Notice was Sent: 08/07/2023 1a. Delivered by: Certified Mail Return Receipt Requested
2. Select the type of Application that will be filed with the Authority for an On-Premises Alcoholic Beverage License:
New Application
For New 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 charges
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: Manhattan Community Board 4
Applicant/Licensee Information:
4. Licensee Serial Number (if applicable): Expiration Date (if applicable):
5. Applicant or Licensee Name: Gurume Restaurant Group LLC
6. Trade Name (if any):
7. Street Address of Establishment: 313 West 46 Street
8. City, Town or Village: New York , NY Zip Code: 10036
9. Business Telephone Number of Applicant/Licensee: (646) 821-6111
10. Business E-mail of Applicant/Licensee: gurumegroup@gmail.com
11. Type(s) of alcohol sold or to be sold:
12. Extent of Food Service:
Full food menu; full kitchen run by a chef or cook Menu meets legal minimum food availability requirements; food prep area at minimum
13. Type of Establishment: Restaurant (full kitchen and full menu required)
14. Method of Operation: (check all that apply) Seasonal Establishment
Patron Dancing Employee Dancing Exotic Dancing Topless Entertainment
☐ Video/Arcade Games ☐ Third Party Promoters ☐ Security Personnel
☑ Other (specify): standard restaurant and bar; consumers come to eat and drink
15 Licensed Outdoor Area: Glavery Glavia and all Glavery Glave
15. Licensed Outdoor Area: None Patio or Deck Gooftop Garden/Grounds Freestanding Covered Structure (check all that apply)
Sidewalk Cafe Other (specify):

OFFICE USE ONLY Original Amended Date
16. List the floor(s) of the building that the establishment is located on: basement floor (as per CO)
17. List the room number(s) the establishment is located in within the building, if appropriate: n/a
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? O Yes O 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) ONO
Owner of the Building in Which the Licensed Establishment is Located
22. Building Owner's Full Name: Kailash Partners 3 LLC
23. Building Owner's Street Address: 1414 Hillside Ave
24. City, Town or Village: New Hyde Park State: NY Zip Code: 11040
25. Business Telephone Number of Building Owner: (646) 249-5007
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: 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: Joon Ryu Title: CEO

Principal Signature:

gurumé

BRUSSELS SPROUTS

balsamic yuzu glaze, chicken chiccaron, sumac

TRUFFLE RICE CAKE

five cheese sauce, crunchy quinoa, crostini

GOCHUJANG GNOCCHI

sweet potato noodle, gochujang sauce, crispy rice

SOFT SHELL CRAB

deep fried soft shell crab, horseradish remoulade, crispy sweet potato

TRUFFLE FRIES

hand-cut potato, dehydrated allium, white truffle essence

OYSTER MUSHROOM

burnt miso hummus

CRISPY TOFU

gochujang glaze, brown butter kimchi

OCTOPUS

gochujang butter, fingerling potato, chayote

SPICY CHICKEN AND CHEESE

spicy gochujang charred chicken, melted mozzarella (+\$2 with rice cake or ramen noodle)

BOSSAM

braised pork belly, chive kimchi, ssam jang sauce, chicarron

TUNA TARTAR

konbu cured blue fin tuna, crispy sunchoke chips, wasabi creme fraiche

HAND CUT NOODLES

knife-cut noodles, spicy beef, pistachio crumble, tingly chili oil, cilantro

STEAK AND POTATOES

dry aged steak, duck fat potato, fermented chimichurri

SEAFOOD OKONOMIYAKI

savory seafood pancake, katsuobushi, onion crisp

BIRRIA SPRING ROLL

beef shank, bone marrow, creme fraiche, cilantro

SHRIMP CEVICHE

shoyu marinated langostino, caviar rice

UNI SSAM BAP

sea urchin, fatty tuna, caviar rice, cured quail egg, roasted nori

FLUKE CEVICHE

chilled chili broth, montauk fluke, somen noodles

COCKTAILS

YUZU FASHION

Won soju, palm sugar, yuzu, orange bitters

BEE'S DREAM

Soju, makgeolli, lemon, fresh honeycomb

RAINY NIGHTS

makgeolli, soju, probiotic, lemon, soda

OI SMOKE

Chamisul soju, fresh cucumber, lime, agave, smoked salt

SEOUL SKY

Jinro soju, Korean plum, egg white, yuzu, orange bitter

FIRE AND ICE

Korean hot pepper infused soju, lime, agave, smoked miso

BERRY NICE

Jinro soju, pomegranate. lime

BLOODY MULE

Chamisul soju, ginger beer, lime, blood orange

I SHOULD CALL HER

Jinro soju, yuzu, gomme, soda

KOREAN CRAFT

JINRO ILPOOM

JEJU GOSORISUL

MYUNGIN ANDONG

HANA MAKGEOLLI

DAMUN MAKGEOLLI

NAROO MAKGEOLLI

SOOLA HANDMADE MAKGEOLLI

SOMAK PITCHER

CREAMY AND DREAMY

makgeolli, soju, probiotic, lemon, soda

SWEET MELON

makgeolli, soju, honeydew puree, honeydew ice cream

HWACHÉ

makgeolli, soju, watermelon juice, agave, lemon, soda

SAKE

KIKUSUI FUNAGUCHI "GOLD CAN"

DASSAI "45"

RIHAKU "DREAMY CLOUDS"

WINE

SAUVIGNON BLANC

RIESLING

PINOT NOIR

CABERNET SAUVIGNON

MERLOT

BEER

TERRA DRAFT (KOREA, 5.0% ABV)

crisp, malty, easy drinking

ASAHI DRAFT (JAPAN, 5.2% ABV) super dry, crisp, clear tasting

KLOUD DRAFT (KOREA, 5.0% ABV)
pale straw appearance and subtle malt flavors

HAHN DRAFT (AUSTRALIA, 4.2% ABV) full flavored, crisp, refreshing

GRAPEFRUIT SCULPIN IPA (CALI, 7.0% ABV) deliciously fruity and hoppy

KIZAKURA "LUCKY CAT" (JAPAN, 5.0% ABV)
delicate flavor, easy drinking with a hint of yuzu

KOREAN SPIRIT

CHAMISUL FRESH

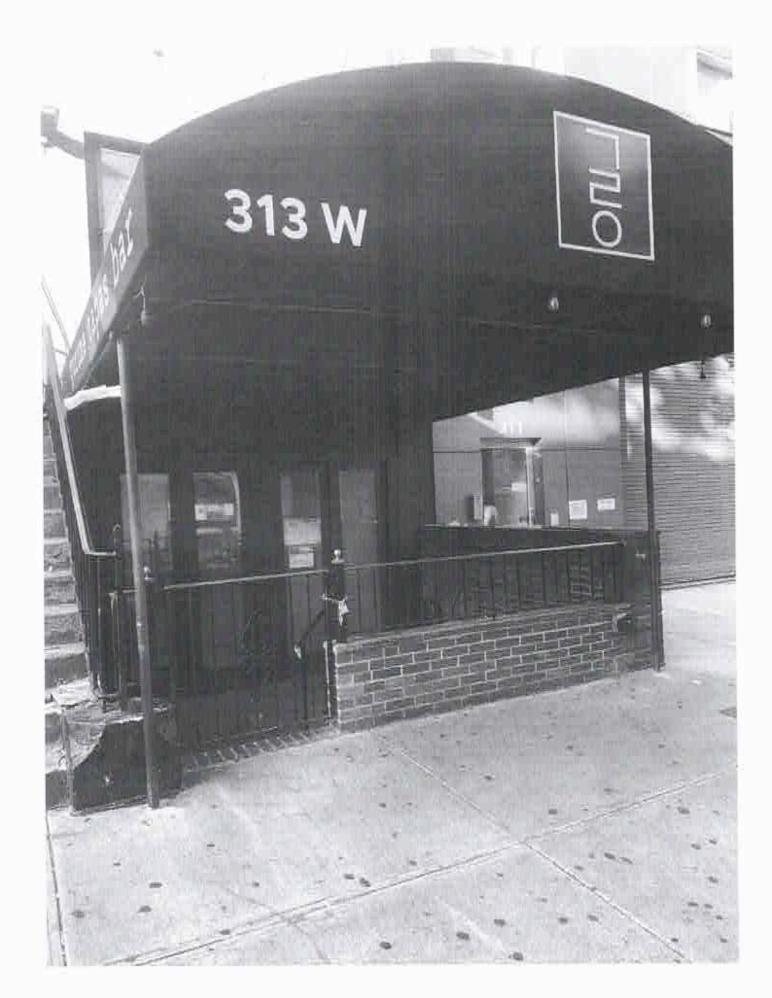
JINRO IS BACK

CHAMISUL GREEN GRAPE

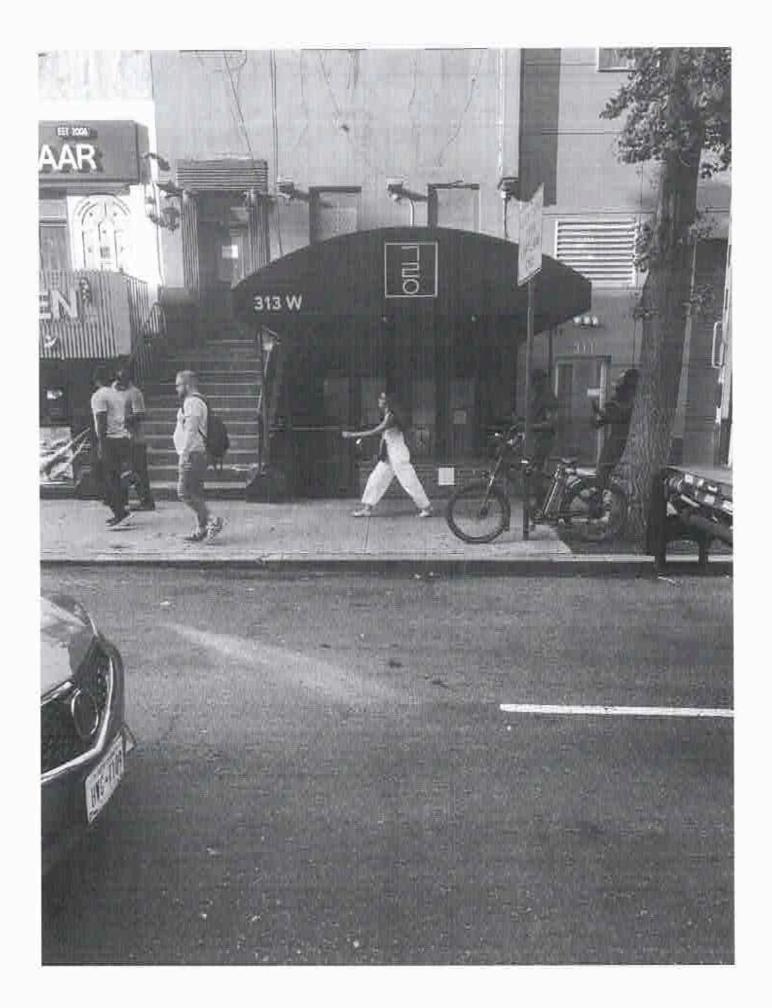
CHAMISUL PEACH

CHAMISUL GRAPEFRUIT

SAENG MAKGEOLLI



gurumé tapas bar



BLOCK PLOT DILGANN (Manhattan)

DAME: GUTUME REHOUVENT Group LLC DBA: Curumé AZE: 313 W. Hb St., Wen YN, NY

10034

Restaurant / Residence

Restaurant / Residence

	9th Avenue
Restaurant	Restaurant / Residence
Restaurant	Restaurant / Residence
Real Estate / Residence	Restaurant / Residence
Restaurant / Residence	Restaurant / Residence
Restaurant / Residence	Restaurant / Residence
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Resturant / Residence	Restaurant / Residence
Spa / Residence	Parking Lot
Restaurant / Residence	Residence
Church	Restaurant / Residence
Residence	Restaurant / Residence
Residence	**PROPOSED PREMISES**
Residence	Residence
Restaurant / Residence	Hotel
	8th Avenue
Parking Lot	Restaurant

