Manhattan Community Board 4 (All Fields Must Be Completed)

Liquor License/Sidewalk Cafe Stipulations Application

CORPORATION NA	ME		DOING BUSINESS A	S (DBA)				
SB Tavern LL	С		Steak Frites					
STREET ADDRESS			CROSS STREETS			ZIP CODE		
496 9th Avenue			b/n West 37th and \	b/n West 37th and West 38th Streets 10018				
OWNER	NAME:	Adam Schop		NAME:	Frank W. Pa	alillo		
(Attach a list of all the people that will be associated/listed	PHONE:	(602) 690-0983	ATTORNEY/ REPRESENTAIVE	PHONE:	PHONE: (212) 227-1640			
with the license)	EMAIL:	Adamschop@gmail.com		EMAIL:	Fwpalillo@g	gmail.com		
	NAME:	Adam Schop		NAME:	Esp # sito Rea	alty LLC		
MANAGER	PHONE:	(602) 690-0983	LANDLORD	PHONE:	(917) 214-4	111		
	EMAIL:	Adamschop@gmail.com		EMAIL:	405fastpark	@gmail.com		
APPLICATION)N TYPI	E (<u>× Liquor License</u>		Unenci	losed Side	walk Cafe)		
	Has applicant	owned or managed a similar business?		Y	ES	NO		
O New	What is/was th	ne name and address of establishment?						
	dates applicant was involved with this former prem	nise?						
Corp	What is the lice	ense # and expiration date?						
Change/Class Change/Removal	Is applicant m	aking any alterations or operational changes?		Y	ES	NO		
	If alterations o	r operational changes are being made, please desc	cribe/list all changes.	1				
Alteration		rrent license # and expiration date?				ril 30, 2025		
	scribe the nature of all the changes and attach the p	^{olans:} License adj	acent s	torefront				
METHOD O		A Committee of the Comm						
TYPE OF ALCOH	IOL	Liquor/Wine/Beer & Cider	O Beer &	Cider		Wine/Beer & Cider		
		Restaurant C Cabaret C	Night Club O Hot	el O	Bar/Tavem	Catering Establishment		
ESTABLISHMEN TYPE		O Adult Entertainment O Wine B	Bar O Dance Club	o O sp	oorts Bar O	Club (Fraternal Organization – Members Only)		
you plan to file?		ne SLA? If yes, when? If no, when do	YES NO					
Is the 500 Foot Rule On-Premise liquor I establishment and t	YES NO	ו						
	e applicable	If yes, please attach a diagram of the	YES NO)				
Has applicant/owne	d YES NO			Sec.				

		MONDAY	TUESDAY	7	WE	DNESDAY	THUR	RSDAY	F	RIDAY	SAT	TURDAY	SI	JNDAY
HOURS*	Operation	11am -2am	11am -2ar	n	112	m -2am	11am -2am		11am -2am		11am -2am		11ar	n -2am
(Indoor	Kitchen		11am -2ar					1 -2am	-	m -2am		m -2am	110	m -2am
Only)		11am -2am	11am -2ar			m -2am m -2am		n -2am	-	m -2am	110	m -2am		m -2am
If you plan to ha	Music ve music, what	11am -2am									Па			
(Circle all that a	pply)		BACKGRO	UNE	Li	IVE MUSIC	Bale Control	DJ	JI	UKE BOX		KA	RAOKI	1
						OCCUP	ANCY		1					
	(Cert	pacity ificate of upancy)	Maximum # of Persons Occupying Premises (Including Employees)	Num of Ta		Number of Seats		er of Servio ily Bars	ce	Number Stand-Up		Number of at Stand-U		
INSIDE	11	15	115	3-	1	90	- () -		-1-	•	12		
OUTSIDE (Other than sidewalk café)			-											
DCA APPROVED UNENCLOS SIDEWALK CAFÉ	ED		2 -	4	•	8 2 6								
How many floor	s are there? W	hat is the capaci	ty for each floor?	?			2 - G	round	floo	r and b	aseı	ment		
How frequently	will the owner(s	s) be at the estab	olishment?				Daily							
Will there be da	incing?		11			1 1/20 000 4/4/10	YES NO							
Will applicant h	ave bottle or tal	ble service for be	everage alcohol?)			YES NO							
Will applicant b	e hosting privat	te; promotional o	r corporate ever	nts?			YES	NO	5-6	times	per	year		
Will outside pro	moters be used	d on a regular ba	sis? If yes pleas	e descr	ibe.		YES	NO			*************			
Will applicant h	ave a security p	olan? If, yes plea	se attach.	1/10/1			YES	NO		,				
Will security pla	an be implemen	ted?					YES	NO						
Will State certif	ied security per	sonnel be used?	•				YES	NO						
Will New York Nightlife Association and NYPD Best Practices be followed?				-wv-	YES	NO								
Does applicant agree to notify MCB4 prior to making changes to its method of operation?				of	YES	NO						10.50		
Will applicant be using delivery bicycles? If yes, how many?						YES	NO							
Will delivery bid wear attire clea	cycles be clearly orly noting name	y marked with the e as described by	e name of the re y NYC Law?	estaurar	nt and	will staff	YES	NO						
Where will deliv	very bicycles be	stored during th	ne day when not	in use?)				-					

MULTPL	E SPACES/FLOOR	S 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
1st floor	Dining	115	11 AM 2 AM	34	90	-0-		Recorded Backgrand
Base- nont	storage	7 employees	11 AM- 2 AM	*0 -	-0-	-0-	-0-	
		-						
						·		

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

Community Notification/Relat	ions		
NOTIFICATION: #1 All groups lis			ted on Nelly Gonzalez email
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 each please list both the organization	# 3		
and individual you contacted	# 4		
#5			
Please provide dates when applicant met with the groups listed above.			
Who was your contact person at each group you met with?			
When did applicant post the notice that was provided?			Yes
Where did applicant post the notice that was provided?			Storefront window
Will applicant provide owner cell phone number to neighbors and respond to complaints that arise? Please provide number in space provided.			O YES NO
Will applicant inform the Community Board office of its job openings and/or provide a hyperlink to applicants jobs webpage?			YES NO

BUILDING DESIGN	
State the name and type of business previously located in the space.	Steak Frites 2022-Present
Has a liquor-licensed establishment previously occupied this space at any time? If yes, please provide the name of the business.	VES NO Porky's Salvation Steak VES NO Frites
Do you plan any changes to the existing façade? If yes, please describe.	YES NO Frites
Has the applicant/owner(s) read MCB 4 ADA Guidelines Memo?	YES NO
Is the entrance ADA Compliant?	YES NO
Do you plan any changes to the existing façade? If yes, please describe.	YES NO
Will applicant have a vestibule within the establishment?	YES NO
Will 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?	YES NO
Will applicant comply with the NYC noise code?	YES 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 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 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
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 N/A
Will the kitchen exhaust system extend to the roof?	YES NO
Will the establishment have an illuminated sign?	YES NO
Will the establishment have a canopy extending over the sidewalk?	YES NO
Where will the air conditioner be located? What type is it?	Rooftop, Central Air
When was the air conditioner installed?	Unknown

OUTDOOR ITEMS - OTHER THAN SIDEWALK CAFÉ			
Has the applicant/owner(s) read MCB 4 Rear Yard Rooftop Policy?	YES	NO	N/A
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	
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'?	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	
If open dining in the parking lane, will applicant agree to leave the sidewalk free of any furniture?	YES	NO	
If open dining, will you comply with all NYC DOT guidelines?	YES	NO	
If open dining, will the installation be year-round?	YES	NO	

DCA APPROVED UNENCLOSED SIDEWALK CAFÉ OPEN	RESTAU	RANTS	
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	Ю	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	
Will applicant be serving alcohol in the sidewalk café? 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	20	retractable awning
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	N/A

7 of 10

ADDITIONAL STIPULATIONS: (Office Use Only)
- Sidewalk seating will not be closed in any way
- Any storm enslosure shall not extend no further than 18" from building facade
- Any A-frame signs shall be placed within sidewal seating area only
·
To the outent any additional atinulation as were 7 and 0.50 kg at 10.50 kg.
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: (O	ffice Use Only), Continued	
		·
To the extent any additional stipulation pages 1 – 6 of this application, the sti	on on pages 7 and 8 of this application conflicts with a ipulations on pages 7 and 8 control.	ny response on

Manhattan Community Board 4 (MCB4) re (MCB4's recommendation is based on a vote to October 4, 2023 full board meeting, with 40 of the recommendation, 0 members oppose abstaining and 0 present but not eligible)	opera taken at its _ members voting in favor			owner are part of the method of	
CB4 REPRESENTATIVES					Saturday Carle
Nelly Gonzalez CB4 Assistant District Manager	Frank Holozubiec CB4 BLP Committee Co-Chair	1	Burt Lazarin CB4 BLP Committee Co-Chai	ir	
APPLICANT AGREEMENT WITH	H THE COMMUNITY				- 中国
Applicant agrees to these stipulations as the stipulations are essential prerequisites to the stipulations incorporated in the method of agreement between MCB4 and applicant a supersede any oral statements or represent	the MCB4 recommendation re operation of its liquor license. and may only be altered in wri	garding this appli The stipulations i ting signed by M0	ication. Applicant agr in this application co	rees to have these nstitute the entire	
SIGNHERE -	Adam Schop	X Adam	Schop	08/21/23	
PR	INT NAME OF APPLICANT	SIGNATURE OF	APPLICANT	DATE	

OFFICE USE ONLY
Original Amended Date

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

Date Notice Sent: 5014 34, 2023 1a. Delivered by: Certified Mail Return Receipt Requested
. 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:
O New Application O Removal O Class Change
For premises in the City of New York:
O New Application O New Application and Temporary Retail Permit O Renewal Alteration O Removal
O Class Change O Method of Operation O 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: Community Board 4 M
Applicant/Licensee Information:
4. Licensee Serial Number (if applicable): 1350080 Expiration Date (if applicable): 143035
5. Applicant or Licensee Name: SB TAVERA) 16C
6. Trade Name (if any): Steuk Wites
7. Street Address of Establishment: 496 N. n.th. WE
8. City, Town or Village: , NY Zip Code: 16018
9. Business Telephone Number of applicant/ Licensee: 929.614.5070
10. Business E-mail of Applicant/Licensee: Adam & Steak frites bistro. Com
11. Type(s) of alcohol sold or to be sold: O Beer & cider O Wine, Beer & Cider Cider
12. Extent of Food Service: Full Food menu; full kitchen run by a chef/cook O Menu meets legal minimum food requirements; food prep area requi
13. Type of Establishment: RESTAURANT
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): Open lest corants

	E USE ONLY	
Original () Amended	Date	49
16. List the floor(s) of the building that the establishment is located on:	around floor	
17. List the room number(s) the establishment is located in within the buil	ding, if appropriate:	
18. Is the premises located within 500 feet of three or more on-premises li	quor establishments? Yes ©	No
19. Will the license holder or a manager be physically present within the ex		X Yes O No
20. If this is a transfer application (an existing licensed business is being pu	rchased) provide the name and serial numb	per of the licensee:
Name	Seria	Number
21. Does the applicant or licensee own the building in which the establish	ment is located?	26) K NO
Owner of the Building in Which	n the Licensed Establishment is Located	
22. Building Owner's Full Name: GCONG TO TOO	160 166	
100000	10 m	
23. Building Owner's Street Address:	31731.	
24. City, Town or Village:	State:	Zip Code: 1001
25. Business Telephone Number of Building Owner:	214.411	ohn
Representative or Attorney Repres Application for a License to Traffic in Alco 26. Representative/Attorney's Full Name: Frank W. Palillo	enting the Applicant in Connection with which the Establishment Identified in the Establishment Identified Id	th the this Notice
Application for a License to Traffic in Alco	ohol at the Establishment Identified in t	th the this Notice
Application for a License to Traffic in Alco 26. Representative/Attorney's Full Name: Frank W. Palillo	ohol at the Establishment Identified in t	th the this Notice Zip Code: 10004
26. Representative/Attorney's Full Name: Frank W. Palillo 27. Representative/Attorney's Street Address: Sixty Broad Street, Street Address: Street Address: Sixty Broad Street, Street Address: Sixty Broad Street, Street Address: Street Address: Sixty Broad Street, Street Address: Street Address: Sixty Broad Street, Street Address: S	ohol at the Establishment Identified in the state in the	this Notice
26. Representative/Attorney's Full Name: Frank W. Palillo 27. Representative/Attorney's Street Address: Sixty Broad Street, Sc 28. City, Town or Village: New York 29. Business Telephone Number of Representative/Attorney: (212) 23	ohol at the Establishment Identified in the stablishment Identified in the stable in t	this Notice
26. Representative/Attorney's Full Name: Frank W. Palillo 27. Representative/Attorney's Street Address: Sixty Broad Street, St. 28. City, Town or Village: New York 29. Business Telephone Number of Representative/Attorney: (212) 23	State: NY 27-1640 Mail.com I of the legal entity that holds or is applications made in submitted document that representations made in this for disapproval of the application or revocations.	ying for the license. uments relied upon by orm will also be relied action of the license.
Application for a License to Traffic in Alco 26. Representative/Attorney's Full Name: Frank W. Palillo 27. Representative/Attorney's Street Address: Sixty Broad Street, St. 28. City, Town or Village: New York 29. Business Telephone Number of Representative/Attorney: (212) 23 30. Business E-mail Address of Representative/Attorney: Fwpalillo@g I am the applicant or licensee holder or a principal Representations in this form are in conformity with representations in this form are in conformity with representations and that false representations may result in	State: NY 27-1640 Mail.com I of the legal entity that holds or is applications made in submitted document that representations made in this for disapproval of the application or revocations.	ying for the license. uments relied upon by orm will also be relied action of the license.
Application for a License to Traffic in Alco 26. Representative/Attorney's Full Name: Frank W. Palillo 27. Representative/Attorney's Street Address: Sixty Broad Street, Sc. 28. City, Town or Village: New York 29. Business Telephone Number of Representative/Attorney: (212) 23 30. Business E-mail Address of Representative/Attorney: Fwpalillo@g I am the applicant or licensee holder or a principal Representations in this form are in conformity with me the Authority when granting the license. I understate upon, and that false representations may result in By my signature, I affirm - under Penalty of Perjet	State: NY 27-1640 I of the legal entity that holds or is apple epresentations made in submitted doc nd that representations made in this for disapproval of the application or revocury - that the representations made in the submitted document of the application or revocury - that the representations made in the submitted document of the application or revocury - that the representations made in the submitted document of the application or revocury - that the representations made in the submitted document of the submitted document o	ying for the license. uments relied upon by orm will also be relied action of the license.

FROMAGE

CHEESE 7 EACH 3 OR 5

SALADES & TARTINE

GREEN SALAD, SHAVED SEASONAL VEGETABLES 15 SALADE LYONNAISE 18 CHICKEN PAILLARD 25

SMOKED SALMON TARFINE 22 CROQUE MADAME 17

GOURMANDISE

CHOPPED CHICKEN LIVER ON TOAST 12 BRANDADE BENIGETS 14 PATE DE CAMPAGNE 14 JAMBON DE PARIS 16 **BONE MARROW 18** PORC RILLETE 14 TET DE VEAU 15 ESCARGOT 17

HORS D'OUVRES

OYSTERS

6 FOR 18/12 FOR 36 JUMBO SHRIMP COCKTAIL 4/20 MACARONI GRATIN 16 STEAK TARTARE 18 ONION SOUP 15

BURGER AMERICAIN

STEAK FRITES

BONE IN NY STRIP 62 HANGER STEAK 34 **ENTRECOTE 56**

CHATEAUBRIAND FOR TWO 135 COTE DE BEOUF FOR TWO 138

PLATS PRINCIPEAUX

MUSHROOMS, ROASTED GARLIC, MORNAY GNOCCI PARRISIENNE GRATIN 24 TROUT ALMONDINE 28 GRUYERE OMELETTE 16 LOUP DE MER FOR TWO MOULES - FRITES 24 POULET ROTI 26

PLATS DE JOURS

SKATE GRENOBLOSIE 26 MONDAY TUESDAY

LOBSTER SPAGHETTI M/P

WEDNESDAY

THURSDAY
MORRCAN LAMB TAGINE 36 VEAL ESCALOPE 32 FRIDAY

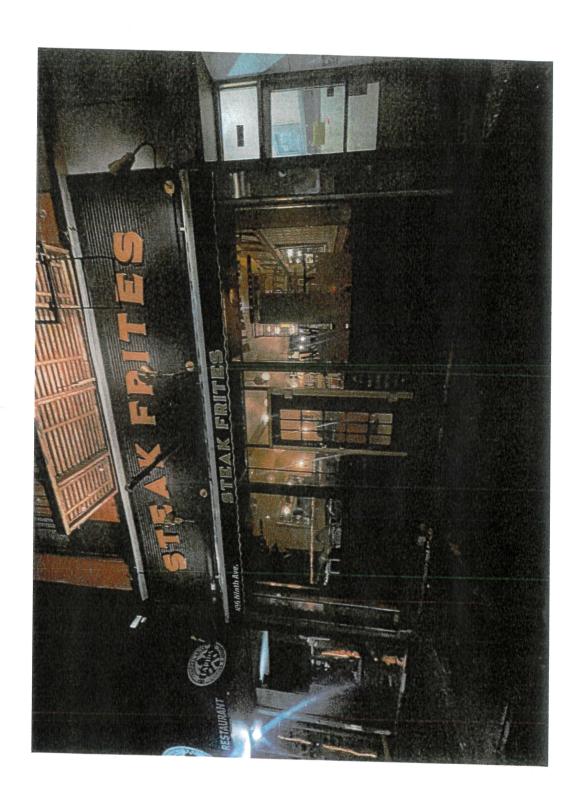
SLOW COOKED BEEF SHORTRIB 38 RABBIT RESILING & MOUTARDE 28 **BOUILLIBASSE 28** SATURDAY SUNDAY

SIDES

ROASTED MUSHROOMS 14 CREAMED SPINACH 8 POMME FRITES 8 POTATO PUREE 8 HARICOT VERT 12

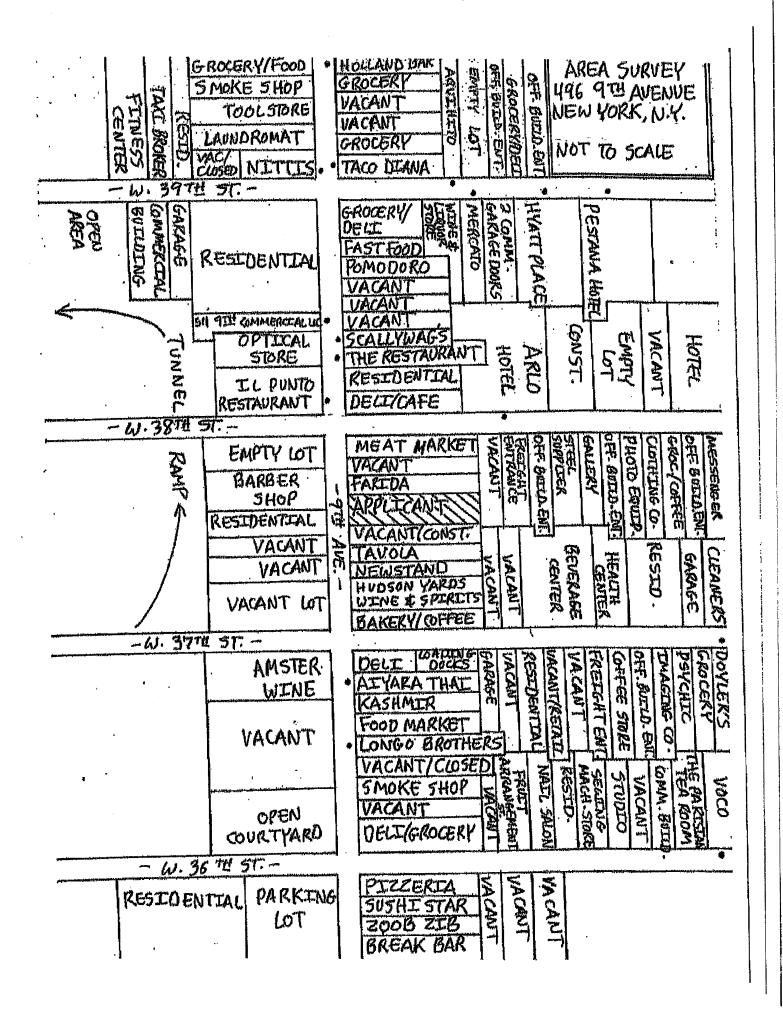
DESSERTS

CHOCOLATE SOUFFLEE 16 APPLE TARTE TATIN 18 POT DE CRÈME 12



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Landess-Simon, Inc.

Legal & Commercial Photography
45 Lewlins Park
Wyckeif, NJ 07481
Phone: (201) 848-5652
E-mail: landess@att.net
landessphotographets.com

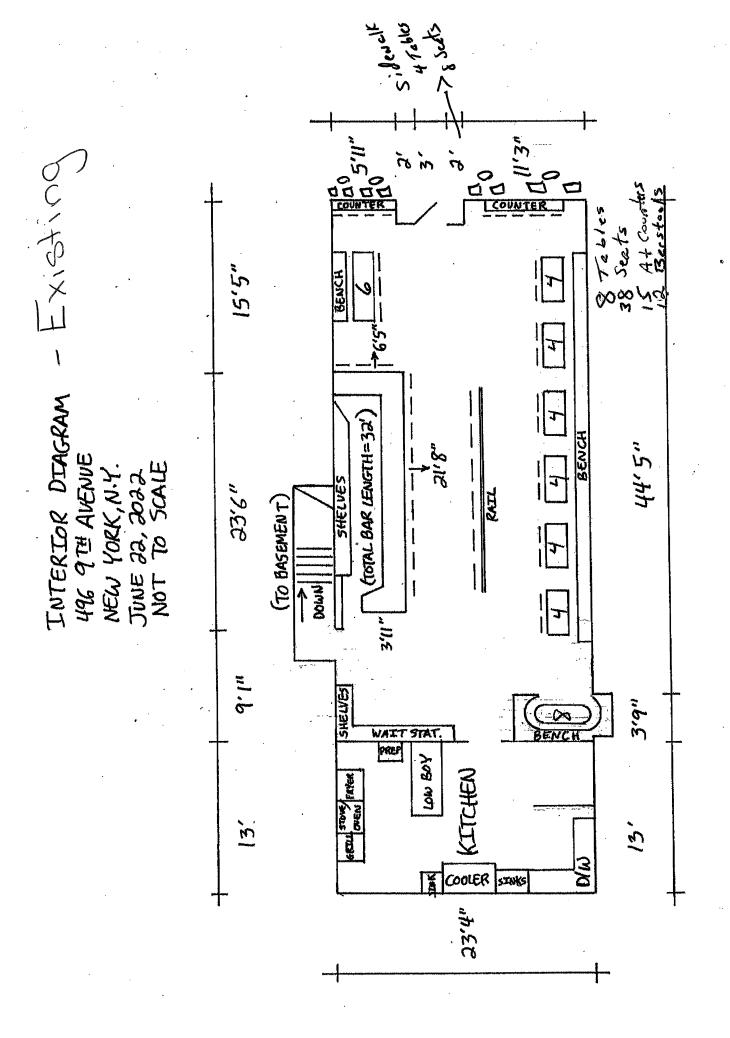
RE: 496 9TH AVENUE

- 1. II Pouto 507-509 9TH Avenue 184'
- 2. Aiyara Thai 480 9th Avenue 200'
- 3. 5 callyway's 508 974 Avenue 201'
- 4. The Restaurant 506 9TH Avenue 181'
- 5. Arlo Hotel 351 West 38TH Street 208
- 6. 511 9th Commercial LLC 511 9th Avenue 228'
- 7. Longo Bros. 474 9th Avenue 276'
- 8. Mercato 352 West 39 th street 341'
- 9. Hyatt Place 350 West 39TH Street 378'
- 10. Taco Diana 524 9TH Avenue 405'
- 11. Aquilito- 359 West 3975 Street-409'
- 12. Nittis 523 9th Avenue 420'
- 13. Doyler's Irish Pub 326-330 West 37th Street 458'
- 14. Holland Bar 532 9TH Avenue 469'
- 15. Pestana Hotel 338 West 39 TH Street-407'
- 16. Voco Hotel 341-343 West 36TH Street 480'

CHURCHES & SCHOOLS

There are no churches and schools within 500' of the applicant.

IL PUNTO DELT/CAFE RESTAURANT ー心·38世 St.-MEAT EMPTY MARKET LOT VACANT FARIDA BARBER SHOP PROCK PLOT APRLICANT RESIDENTIAL AVE. VACANT/ONST VACANT TAVOLA NEWSTAND VACANT HUDSON YARDS WINE & SPIRITS VACANT BAKERY/ LOT COFFEE - W. 3755-DELT AMSTER WINE



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		2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	CUR	-	:				4ft café		in the second se	REFRONT 20ft
			CURB	-	:				4ft café		in the second se	REFRONT 20ft
			CURRE	-	:				Afticatión		in the second se	REFRONT 20ft
			CUR	-	:		Action of the second of the se		Afticatión		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	REFRONT 20ft
			CLE	-	:						in the second se	REFRONT 20ft
			CURRE	-	:						in the second se	REFRONT 20ft
			CURB	-	:			:			in the second se	REFRONT 20ft
				-	:						in the second se	REFRONT 20ft
				-	:	: ->	٠,	:			in the second se	REFRONT 20ft
				-	:	: ->	٠,	:			in the second se	REFRONT 20ft
			CURR	-	:	: ->	٠,	:			in the second se	REFRONT 20ft
				-	:	A.CURB TO		:			in the second se	REFRONT 20ft
				-	:	A.CURB TO		:			in the second se	REFRONT 20ft
				-		A.CURB TO BUILDING		:			in the second se	REFRONT 20ft
				-	:	A.CURB TO BUILDING		:			in the second se	REFRONT 20ft
				-		A.CURB TO BUILDING		:			in the second se	REFRONT 20ft

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