

# Manhattan Community Board 4

(All Fields Must Be Completed)

## Liquor License/Sidewalk Cafe Stipulations Application

|   |   |   |   |
|---|---|---|---|
| <b>CORPORATION NAME</b><br><br>HIBISCUS MEXIPRO INC   |   | <b>DOING BUSINESS AS (DBA)</b><br><br>EL GALLO TAQUEIRA |   |
| <b>STREET ADDRESS</b><br><br>609 9TH AVE., NEW YORK, NY (aka 607-609 9th Ave., space #2)  |   | <b>CROSS STREETS</b><br><br>w43 and w44th st.           | <b>ZIP CODE</b><br><br>10036                  |
| <b>OWNER</b><br><br><i>(Attach a list of all the people that will be associated/listed with the license)</i>  | <b>NAME:</b> ALEJANDRO TORRES   | <b>ATTORNEY/ REPRESENTAIVE</b>                          | <b>NAME:</b> JOHN SPRINGER                    |
|   | <b>PHONE:</b> 917-335-4643  |   | <b>PHONE:</b> 631-331-3334                    |
|   | <b>EMAIL:</b> alex@elgallobk.com  |   | <b>EMAIL:</b> JOHN@NYBARGUY.COM               |
| <b>MANAGER</b>  | <b>NAME:</b> SAME   | <b>LANDLORD</b>   | <b>NAME:</b> NINTH AVENUE REALTY LLC          |
|   | <b>PHONE:</b>   |   | <b>PHONE:</b>                                 |
|   | <b>EMAIL:</b>   |   | <b>EMAIL:</b>                                 |
| <b>APPLICATION TYPE</b> ( <u>    </u> <i>Liquor License</i> <u>    </u> <i>Unenclosed Sidewalk Cafe</i> )   |   |   |   |
| <input type="radio"/> <b>New</b>  | Has applicant owned or managed a similar business?  |   | <b>YES</b> <b>NO</b>                          |
|   | What is/was the name and address of establishment?  |   |   |
|   | What were the dates applicant was involved with this former premise?  |   |   |
| <input checked="" type="radio"/> <b>Corp Change/Class Change/Removal</b>  | What is the license # and expiration date?  |   | 1353014 exp. 6/30/2025                        |
|   | Is applicant making any alterations or operational changes?   |   | <b>YES</b> <b>NO</b> no                       |
|   | <i>If alterations or operational changes are being made, please describe/list all changes.</i>  |   |   |
| <input type="radio"/> <b>Alteration</b>   | What is the current license # and expiration date?  |   |   |
|   | <i>Please list/describe the nature of all the changes and attach the plans:</i>   |   |   |
| <b>METHOD OF OPERATION</b>  |   |   |   |
| <b>TYPE OF ALCOHOL</b>  | <input checked="" type="radio"/> Liquor/Wine/Beer & Cider <input type="radio"/> Beer & Cider <input type="radio"/> Wine/Beer & Cider  |   |   |
| <b>ESTABLISHMENT TYPE</b>   | <input checked="" type="radio"/> Restaurant <input type="radio"/> Cabaret <input type="radio"/> Night Club <input type="radio"/> Hotel <input type="radio"/> Bar/Tavern <input type="radio"/> Catering Establishment<br><input type="radio"/> Adult Entertainment <input type="radio"/> Wine Bar <input type="radio"/> Dance Club <input type="radio"/> Sports Bar <input type="radio"/> Club (Fraternal Organization – Members Only) |   |   |
| Has applicant/owner filed with the SLA? If yes, when? If no, when do you plan to file?  |   | <b>YES</b>  | <b>NO</b> <input checked="" type="checkbox"/> |
| Is the 500 Foot Rule applicable? If yes, please attach a diagram of the On-Premise liquor license establishments within a 500 ft. radius of your establishment and the Public Interest Statement. |   | <input checked="" type="checkbox"/> <b>YES</b>          | <b>NO</b>                                     |
| Is the 200 Foot Rule applicable? If yes, please attach a diagram of the schools and houses of worship that trigger the rule.  |   | <b>YES</b>  | <input checked="" type="checkbox"/> <b>NO</b> |
| Has applicant/owner(s) read MCB4 Policy Regarding Concentration and Location of Alcoholic-Serving Establishments?   |   | <input checked="" type="checkbox"/> <b>YES</b>          | <b>NO</b>                                     |

**OPERATIONAL DETAILS (\*Closing time will be when establishment is vacated of all patrons)**

| HOURS*<br><i>(Indoor Only)</i>                                      |                  | MONDAY            | TUESDAY | WEDNESDAY  | THURSDAY | FRIDAY   | SATURDAY | SUNDAY  |
|---|------------------|-------------------|---------|------------|----------|----------|----------|---------|
|   | <b>Operation</b> | 10a-12a           | 10a-12a | 10a-12a    | 10a-12a  | 10a-12a  | 10a-12a  | 10a-12a |
|   | <b>Kitchen</b>   | 10a-12a           | 10a-12a | 10a-12a    | 10a-12a  | 10a-12a  | 10a-12a  | 10a-12a |
|   | <b>Music</b>     | 10a-12a           | 10a-12a | 10a-12a    | 10a-12a  | 10a-12a  | 10a-12a  | 10a-12a |
| If you plan to have music, what type(s)?<br>(Circle all that apply) |                  | <b>BACKGROUND</b> |         | LIVE MUSIC | DJ       | JUKE BOX | KARAOKE  |         |

**OCCUPANCY**

|   | Capacity<br>(Certificate of Occupancy) | Maximum # of Persons Occupying Premises (Including Employees) | Number of Tables | Number of Seats | Number of Service Only Bars  | Number of Stand-Up Bars | Number of Seats at Stand-Up Bar |
|---|--|---|------------------|-----------------|--|-------------------------|---------------------------------|
| <b>INSIDE</b>                                       | 74                                     | 20  | 5                | 17              | 0  | 1                       | 0                               |
| <b>OUTSIDE</b><br><i>(Other than sidewalk café)</i> | N/A                                    | N/A   | 0                | 0               | N/A  | 0                       | 0                               |
| <b>DCA APPROVED UNENCLOSED SIDEWALK CAFÉ</b>        |  |   |                  |                 | NOTE: No outside areas associated with this SLA application. Applicant is aware that any future use of existing shed requires separate notice, permit, SLA amendment |                         |                                 |

|  |  |   |
|--|--|---|
| How many floors are there? What is the capacity for each floor?  | 2 ... ground floor & base. ground floor=20 ppl |   |
| How frequently will the owner(s) be at the establishment?  | frequently .. 25 hours a week (more initially) |   |
| Will there be dancing?   | YES  | NO <input checked="" type="checkbox"/>    |
| Will applicant have bottle or table service for beverage alcohol?  | YES  | NO <input checked="" type="checkbox"/>    |
| Will applicant be hosting private; promotional or corporate events?  | YES  | NO 6-8 per year (family/corp)             |
| Will outside promoters be used on a regular basis? If yes please describe.   | YES  | NO <input checked="" type="checkbox"/>    |
| Will applicant have a security plan? If, yes please attach.  | YES  | NO <input checked="" type="checkbox"/>    |
| Will security plan be implemented?   | YES <input checked="" type="checkbox"/>        | NO strict zero tolerance policy in effect |
| Will State certified security personnel be used?   | YES  | NO <input checked="" type="checkbox"/>    |
| Will New York Nightlife Association and NYPD Best Practices be followed?   | YES <input checked="" type="checkbox"/>        | NO  |
| Does applicant agree to notify MCB4 prior to making changes to its method of operation?  | <b>YES</b>                                     | NO <input checked="" type="checkbox"/>    |
| Will applicant be using delivery bicycles? If yes, how many?   | YES  | NO <input checked="" type="checkbox"/>    |
| Will delivery bicycles be clearly marked with the name of the restaurant and will staff wear attire clearly noting name as described by NYC Law? | YES  | NO n/a                                    |
| Where will delivery bicycles be stored during the day when not in use?   | n/a  |   |

**MULTIPLE SPACES/FLOORS CAPACITY BREAKDOWN**

| Space /Floor | Description/Use of Space | Capacity | Hours | # of Tables | # of Seats | # of Service Only Bars | # of Stand-Up Bars/Seats at Bar | Music |
|--------------|--------------------------|----------|-------|-------------|------------|------------------------|---------------------------------|-------|
| n/a          |                          |          |       |             |            |                        |                                 |       |
|              |                          |          |       |             |            |                        |                                 |       |
|              |                          |          |       |             |            |                        |                                 |       |
|              |                          |          |       |             |            |                        |                                 |       |
|              |                          |          |       |             |            |                        |                                 |       |
|              |                          |          |       |             |            |                        |                                 |       |
|              |                          |          |       |             |            |                        |                                 |       |

| <b>LOCATION &amp; ZONING</b>  |          |      |  |
|---|----------|------|--|
| Is this a Special District? If yes, is it Clinton, West Chelsea or Hudson Yards?          | YES      | NO   | yes. CLA - CLINTON PRESERVATION AREA       |
| Does the building have a Certificate of Occupancy ("C of O") or a letter of no objection? | YES<br>✓ | NO   |  |
| Is a Public Assembly permit required?   | YES      | NO ✓ |  |
| Are your plans filed with DOB?  | YES      | NO   | none required, taking over existing eatery |

| <b>Community Notification/Relations</b>  |     |   |                    |
|--|-----|---|--------------------|
| <b>NOTIFICATION:</b><br>List all block associations; tenant associations, co-op boards or condo boards of residential buildings; and community groups that applicant has notified regarding its application. For each please list both the organization and individual you contacted | # 1 | all CB 4 block and tenant associations per staff instrucionts |                    |
|  | # 2 |   |                    |
|  | # 3 |   |                    |
|  | # 4 |   |                    |
|  | # 5 |   |                    |
| Please provide dates when applicant met with the groups listed above.  |     | none  |                    |
| Who was your contact person at each group you met with?  |     | none  |                    |
| When did applicant post the notice that was provided?  |     | day of receipt  |                    |
| Where did applicant post the notice that was provided?   |     | front door.. corner lamp posts                                |                    |
| Will applicant provide owner cell phone number to neighbors and respond to complaints that arise? Please provide number in space provided.   |     | YES<br>✓  | NO<br>917-335-4643 |
| Will applicant inform the Community Board office of its job openings and/or provide a hyperlink to applicants jobs webpage?  |     | YES<br>✓  | NO                 |

| <b>BUILDING DESIGN</b>  |                           |              |                            |
|---|---------------------------|--------------|----------------------------|
| State the name and type of business previously located in the space.  | SWIFT EATS                |              |                            |
| Has a liquor-licensed establishment previously occupied this space at any time? If yes, please provide the name of the business.  | YES                       | NO           |                            |
| 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?  | 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           | NOT NEEDED                 |
| 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?   | dining area. Wall-mounted |              |                            |
| When was the air conditioner installed?   | n/a                       |              |                            |

**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 | n/a |
| Are the floorplans for the outdoor space(s) included?   | YES | NO | n/a |
| Will applicant close and vacate the outdoor space(s) by 11PM on Friday & Saturday and 10 PM on all other days?  | YES | NO | n/a |
| Will the service and consumption of alcohol in any outdoor space only be via seated food service?   | YES | NO | n/a |
| Will applicant not allow standing space for patrons to drink or smoke in any outdoor space(s) or on the sidewalk?   | YES | NO | n/a |
| Will there be no amplified music, as per the law?   | YES | NO | n/a |
| If amplified sound is played inside the establishment, will windows and doors be closed?  | YES | NO | n/a |
| Will applicant agree to post signs outside asking customers to respect the neighbors'?  | YES | NO | n/a |
| Will applicant agree to train staff to encourage a peaceful environment?  | YES | NO | n/a |
| Will applicant provide effective sound control (landscaping enclosure, soundproofing tenants apartments)  | YES | NO | n/a |
| Will there be a lighting plan that allows safe usage of the outdoor space without disrupting neighbors?   | YES | NO | n/a |
| If open dining in the parking lane, will applicant agree to leave the sidewalk free of any furniture?   | YES | NO | n/a |
| If open dining, will you comply with all NYC DOT guidelines?  | YES | NO | n/a |
| If open dining, will the installation be year-round?  | YES | NO | n/a |

**DCA APPROVED UNENCLOSED SIDEWALK CAFÉ**

|   |     |    |     |
|---|-----|----|-----|
| Has the applicant/owner(s) read MCB4 Sidewalk Café Policy?  | YES | NO | n/a |
| Will applicant be applying for a sidewalk café now or in the future?  | YES | NO | n/a |
| Is applicant in this application seeking to include a sidewalk café in its liquor license?  | YES | NO | n/a |
| If yes, has applicant submitted an application and plans to NYC Dept. of Consumer Affairs? Please attach application and plans.   | YES | NO | n/a |
| Will applicant close and vacate the sidewalk café by 11 PM on Friday & Saturday and 10 PM on all other days?  | YES | NO | n/a |
| Will applicant be serving alcohol in the sidewalk café? If so, will you have waiter service?  | YES | NO | n/a |
| Will the café have a 3 ft. wide serving aisle running the entire length of the sidewalk cafe?   | YES | NO | n/a |
| Will applicant mark the perimeter of the café on the sidewalk?  | YES | NO | n/a |
| Will the service and consumption of alcohol in the sidewalk café only be via seated food service?   | YES | NO | n/a |
| Will the sidewalk café not provide standing space for drinking or smoking?  | YES | NO | n/a |
| Will applicant use any portable natural gas heaters? If so, do you have the requisite approvals from DOB & the Fire Department?   | YES | NO | n/a |
| Will applicant have a lighting plan that will allow safe usage of the outdoor space without disrupting neighbors?   | YES | NO | n/a |
| Will all furniture, plants and barricades be stored inside between the evening closing hours and the morning opening hours?   | YES | NO | n/a |
| Will all furniture be stored inside between December 21 <sup>st</sup> and March 21 <sup>st</sup> , and any other day when it rains or snows?  | YES | NO | n/a |
| Will applicant use umbrellas?   | YES | NO | n/a |
| If construction or construction protection has reduced the sidewalk width, will applicant always maintain an 8 foot clear path of sidewalk between the perimeter of the café and the closest obstruction including construction barricades? | YES | NO | n/a |
| If open dining is in the parking lane, will applicant agree to remove its sidewalk café?  | YES | NO | n/a |

**ADDITIONAL STIPULATIONS: (Office Use Only)**

***To the extent any additional stipulation on pages 7 and 8 of this application conflicts with any response on pages 1 – 6 of this application, the stipulations on pages 7 and 8 control.***



**ADDITIONAL STIPULATIONS: (Office Use Only), *Continued***

***To the extent any additional stipulation on pages 7 and 8 of this application conflicts with any response on pages 1 – 6 of this application, the stipulations on pages 7 and 8 control.***

|  |   |
|--|---|
| <p>Manhattan Community Board 4 (MCB4) recommends:<br/>         (MCB4's recommendation is based on a vote taken at its<br/>         December 6, 2023 full board meeting, with <u>39</u> members voting in favor<br/>         of the recommendation, <u>0</u> members opposed, <u>0</u> members<br/>         abstaining and <u>0</u> present but not eligible)</p> | <p><input checked="" type="checkbox"/> Denial unless all stipulations agreed to by applicant/owner are part of the method of operation</p> <p><input type="radio"/> Denial   <input type="radio"/> Approval</p> |
|--|---|

**CB4 REPRESENTATIVES**

|  |  |  |
|--|--|--|
| <br>Nelly Gonzalez<br><i>CB4 Assistant District Manager</i> | <br>Frank Holozubiec<br><i>CB4 BLP Committee Co-Chair</i> | <br>Burt Lazarin<br><i>CB4 BLP Committee Co-Chair</i> |
|--|--|--|

**APPLICANT AGREEMENT WITH THE COMMUNITY**

Applicant agrees to these stipulations as the basis for the community support of this application and acknowledges that all of these stipulations are essential prerequisites to the MCB4 recommendation regarding this application. Applicant agrees to have these stipulations incorporated in the method of operation of its liquor license. The stipulations in this application constitute the entire agreement between MCB4 and applicant and may only be altered in writing signed by MCB4 and applicant. These stipulations supersede any oral statements or representations in connection with this application.

|                           |   |   |   |
|---------------------------|---|---|---|
| <p><b>SIGN HERE</b> →</p> | <p>ALEJANDRO TORRES<br/> <small>PRINT NAME OF APPLICANT</small></p> | <br><small>SIGNATURE OF APPLICANT</small> | <p>9/25/2023<br/> <small>DATE</small></p> |
|---------------------------|---|---|---|



OFFICE USE ONLY

Original     Amended    Date \_\_\_\_\_

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

1. Date Notice Sent: 08/06/2023                      1a. Delivered by: Overnight Mail, Tracking Number and Pro

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

THIS IS AN RW TO OP-LIQUOR CLASS CHANGE AND TEMPORARY PERMIT APPLICATION

For premises in the City of New York:

New Application     New Application and Temporary Retail Permit     Renewal     Alteration     Removal  
 Class Change     Method of Operation     Corporate Change

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

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

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

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

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

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

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

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

3. Name of Municipality or Community Board: MANHATTAN COMMUNITY BOARD 4

**Applicant/Licensee Information:**

4. Licensee Serial Number (if applicable): 1353014                      Expiration Date (if applicable): 06/30/2025

5. Applicant or Licensee Name: HIBISCUS MEXPRO INC

6. Trade Name (if any): EL GALLO TAQUERIA

7. Street Address of Establishment: 609 9TH AVE.

8. City, Town or Village: NEW YORK, NY    Zip Code: 10036

9. Business Telephone Number of applicant/ Licensee: 9173354643

10. Business E-mail of Applicant/Licensee: JOHN@NYBARGUY.CCOM OR ALEX@ELGALLOBK.COM

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

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

13. Type of Establishment: 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): \_\_\_\_\_

**Manhattan Community Board 4**  
 RECEIVED  
 Date: 8/11/23  
 Time: \_\_\_\_\_  
 By: Nelly Gonzalez

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

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

**Owner of the Building in Which the Licensed Establishment is Located**

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

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

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

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

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

31. Printed Principal Name:  Title:

Principal Signature: John Springer

This report is for informational purposes only in aid of identifying establishments potentially subject to 500 and 200 foot rules. Distances are approximated using industry standard GIS techniques and do not reflect actual distances between points of entry. The NYS Liquor Authority makes no representation as to the accuracy of the information and disclaims any liability for errors.

|                       |  |
|-----------------------|--|
| Proximity Report For: |  |
| Location              | <b>609 9th Ave, New York, New York, 10036</b>      |
| Geocode               | <b>Latitude: 40.75934<br/>longitude: -73.99220</b> |
| Report Generated On   | <b>9/26/2022</b>                                   |

| 8 Closest Liquor Stores                       |  |          |
|---|--|----------|
| Name  | Address  | Distance |
| 589 NINTH AVENUE CORP<br>Ser #: 1023817       | 589 9TH AVENUE<br>NEW YORK, NY 10036               | 347 ft   |
| WEST 42 WINE & SPIRITS INC<br>Ser #: 1335361  | 424 W 42ND ST<br>NEW YORK, NY 10036                | 606 ft   |
| NINTH AVENUE VINTNER LTD<br>Ser #: 1023814    | 669 671 9TH AVENUE<br>NEW YORK, NY 10036           | 788 ft   |
| GRACE WINE & SPIRITS INC<br>Ser #: 1220827    | 610 10TH AVENUE<br>NEW YORK, NY 10036              | 834 ft   |
| TIME SQUARE CONVENIENCE INC<br>Ser #: 1302533 | 705 8TH AVE<br>NEW YORK, NY 10036                  | 979 ft   |
| AUTHORITY CELLARS INC<br>Ser #: 1305784       | 625 8TH AVE<br>SPACE BTS 234<br>NEW YORK, NY 10018 | 1,165 ft |
| 39TH STREET WINE INC<br>Ser #: 1257090        | 354 W 39TH ST<br>NEW YORK, NY 10018                | 1,252 ft |
| GM & M RETAIL LIQUOR INC<br>Ser #: 1023628    | 302 W 40TH STREET<br>NEW YORK, NY 10018            | 1,288 ft |

| Schools within 500 feet    |         |          |
|----------------------------|---------|----------|
| Name                       | Address | Distance |
| No Schools within 500 feet |         |          |

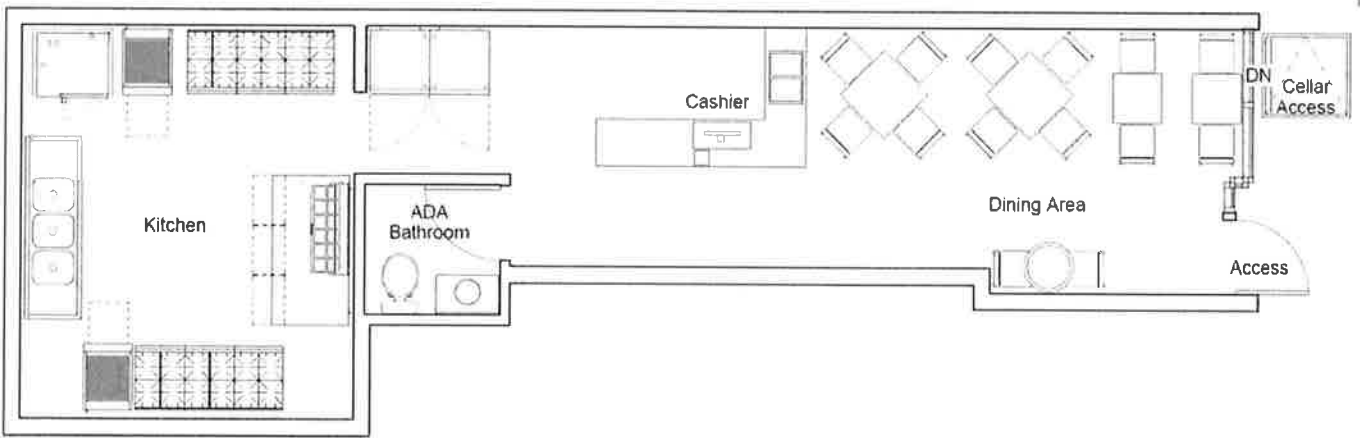
| Churches within 500 feet                |          |
|---|----------|
| Name                                    | Distance |
| Residential Amenities Corporat          | 396 ft   |
| Crossroads Seventh Day Adventist Church | 410 ft   |
| Origins Church                          | 458 ft   |

| Pending On Premises Liquor Licenses within 750 feet |
|---|
|   |

| Inactive On Premises Liquor Licenses within 750 feet |                                     | Distance |
|--|-------------------------------------|----------|
| Name   | Address                             | Distance |
| 576 9TH AVE LLC<br>Ser #: 1342556                    | 576 9TH AVE<br>NEW YORK, NY 10036   | 452 ft   |
| SV FOODS NY INC<br>Ser #: 1344435                    | 332 W 44TH ST<br>NEW YORK, NY 10036 | 469 ft   |
| 574 SB LLC<br>Ser #: 1346295                         | 574 9TH AVE<br>NEW YORK, NY 10036   | 476 ft   |
| RED EYE NY LLC<br>Ser #: 1340691                     | 355 W 41ST ST<br>NEW YORK, NY 10036 | 621 ft   |
| FUSHIMI NYC LLC<br>Ser #: 1348088                    | 311 W 43RD ST<br>NEW YORK, NY 10036 | 640 ft   |
| J ENTERTAINMENT GROUP INC<br>Ser #: 1346007          | 358 W 46TH ST<br>NEW YORK, NY 10036 | 741 ft   |

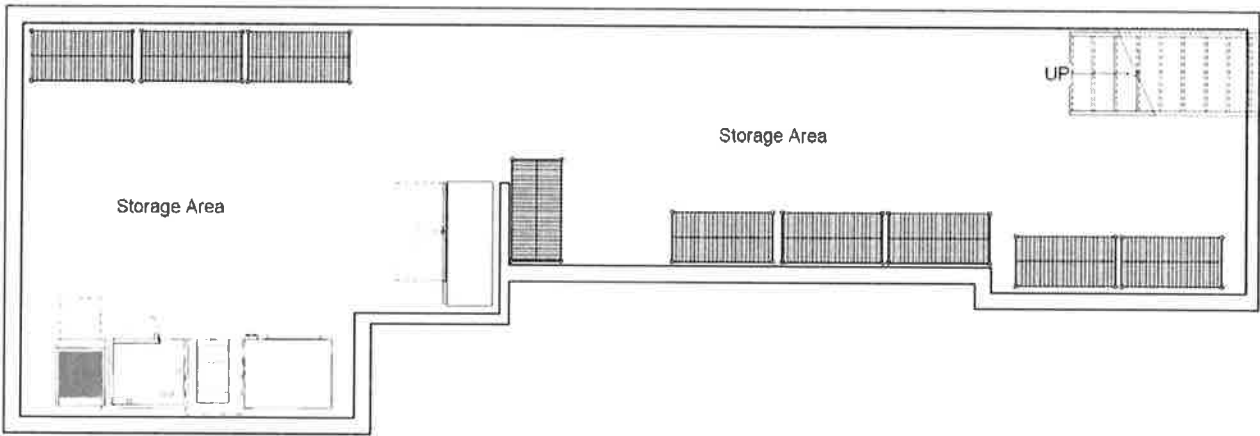
| Active On Premises Liquor Licenses within 750 feet       |  |          |
|--|--|----------|
| Name   | Address  | Distance |
| HORSHOES INC<br>Ser #: 1154126                           | 611 9TH AVENUE<br>NEW YORK, NY 10036                                     | 39 ft    |
| ZONEA FOOD & BEVERAGE INC<br>Ser #: 1266241              | 403 W 43RD ST<br>NEW YORK, NY 10036                                      | 69 ft    |
| RACHEL ON NINTH CORP<br>Ser #: 1196012                   | 608 9TH AVE<br>43RD & 44TH STREETS<br>NEW YORK, NY 10036                 | 81 ft    |
| WESTWAY DINER INC<br>Ser #: 1027996                      | 614 616 9TH AVENUE<br>NEW YORK, NY 10036                                 | 154 ft   |
| AGORA RESTAURANT CORP<br>Ser #: 1343514                  | 402 W 43RD ST<br>NEW YORK, NY 10036                                      | 169 ft   |
| PORTICI RESTAURANT INC<br>Ser #: 1138404                 | 621 9TH AVE<br>S/W COR OF 44TH ST & 9TH AVE<br>NEW YORK, NY 10036        | 191 ft   |
| CHIPOTLE MEXICAN GRILL OF COLORADO LLC<br>Ser #: 1166051 | 620 9TH AVE AKA 358 W 44 ST<br>43RD & 44TH STREETS<br>NEW YORK, NY 10036 | 203 ft   |
| MARILYN 18 REST INC<br>Ser #: 1324934                    | 358 W 44TH ST<br>NEW YORK, NY 10036                                      | 208 ft   |
| SRISTIENVONG INC<br>Ser #: 1308619                       | 592 9TH AVE<br>NEW YORK, NY 10036  | 215 ft   |
| LOTUS WEST CORP<br>Ser #: 1332247                        | 623 9TH AVE<br>NEW YORK, NY 10036  | 234 ft   |
| NINTH AVENUE SALOON INC<br>Ser #: 1027874                | 627 9TH AVENUE<br>NEW YORK, NY 10036                                     | 258 ft   |
| R&R WESTSIDE LLC<br>Ser #: 1296311                       | 356 W 44TH ST<br>NEW YORK, NY 10036                                      | 270 ft   |
| PONENTE LLC<br>Ser #: 1184275                            | 628 9TH AVENUE<br>WEST 44TH & WEST 45TH STREETS<br>NEW YORK, NY 10036    | 293 ft   |
| DANAS LLC<br>Ser #: 1119571                              | 630 NINTH AVE<br>W 44TH & 45TH STREETS<br>NEW YORK, NY 10036             | 319 ft   |
| LA SCALA RESTAURANT LLC<br>Ser #: 1202076                | 630 NINTH AVE<br>9THAVE & 8THAVE W 44TH&45TH ST<br>NEW YORK, NY 10036    | 319 ft   |

| Active On Premises Liquor Licenses within 750 feet                   |  |          |
|--|--|----------|
| Name   | Address  | Distance |
| 407 WEST 42ND STREET CORP<br>Ser #: 1028638                          | 407 W 42ND STREET<br>NEW YORK, NY 10036                          | 335 ft   |
| OLLIES 42ND LLC<br>Ser #: 1180694                                    | 411 W 42ND STREET<br>NEW YORK, NY 10036                          | 347 ft   |
| NINTH AVENUE TOMATO INC<br>Ser #: 1027876                            | 635 9TH AVENUE<br>NEW YORK, NY 10036                             | 364 ft   |
| 42ND ST DEVELOPMENT CORP DBA THEATRE ROW STUDIOS &<br>Ser #: 1129693 | 410 WEST 42ND STREET<br>9TH & 10TH AVENUES<br>NEW YORK, NY 10036 | 381 ft   |
| CHEZ JOSEPHINE LTD<br>Ser #: 1027772                                 | 414 W 42ND STREET<br>NEW YORK, NY 10036                          | 395 ft   |
| POD TS F&B LLC & CAFE SERAFINA WEST 42 LLC<br>Ser #: 1299766         | 400 W 42ND ST<br>NEW YORK, NY 10036                              | 406 ft   |
| ILURAS LLC & 358 W 44TH ST THEATER CO INC<br>Ser #: 1196150          | 358 W 44 ST 2ND FLOOR<br>8TH & 9TH AVES.<br>NEW YORK, NY 10036   | 466 ft   |
| THEATRE REFRESHMENT CO OF NY INC & MIDSUMMER<br>Ser #: 1281353       | 422 W 42ND ST<br>NEW YORK, NY 10036                              | 491 ft   |
| 647 NINTH AVE CORP<br>Ser #: 1250813                                 | 647 9TH AVE<br>NEW YORK, NY 10036                                | 511 ft   |
| PROGETTO INC<br>Ser #: 1154291                                       | 352 W 44TH ST<br>8TH & 9TH AVENUES<br>NEW YORK, NY 10036         | 514 ft   |
| ZAC 45 INC<br>Ser #: 1320900   | 651 9TH AVE<br>NEW YORK, NY 10036                                | 575 ft   |
| SIGNATURE THEATRE COMPANY INC & GREAT PERFORMANCES<br>Ser #: 1259008 | 450 W 42ND ST<br>NEW YORK, NY 10036                              | 608 ft   |
| 659 REST INC<br>Ser #: 1028039                                       | 659 9TH AVE<br>NEW YORK, NY 10036                                | 664 ft   |
| 656 9TH AVENUE LLC<br>Ser #: 1339807                                 | 656 9TH AVE<br>NEW YORK, NY 10036                                | 667 ft   |
| JOIN US HK LLC<br>Ser #: 1302077                                     | 364 W 46TH ST<br>NEW YORK, NY 10036                              | 722 ft   |
| GIFT NEW YORK NO 2 LLC<br>Ser #: 1322727                             | 360 W 46TH ST<br>NEW YORK, NY 10036                              | 734 ft   |



36.00 x 24.00 in



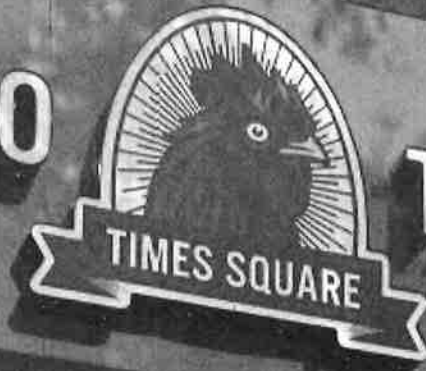


BASEMENT FLOOR

36.00 x 24.00 in

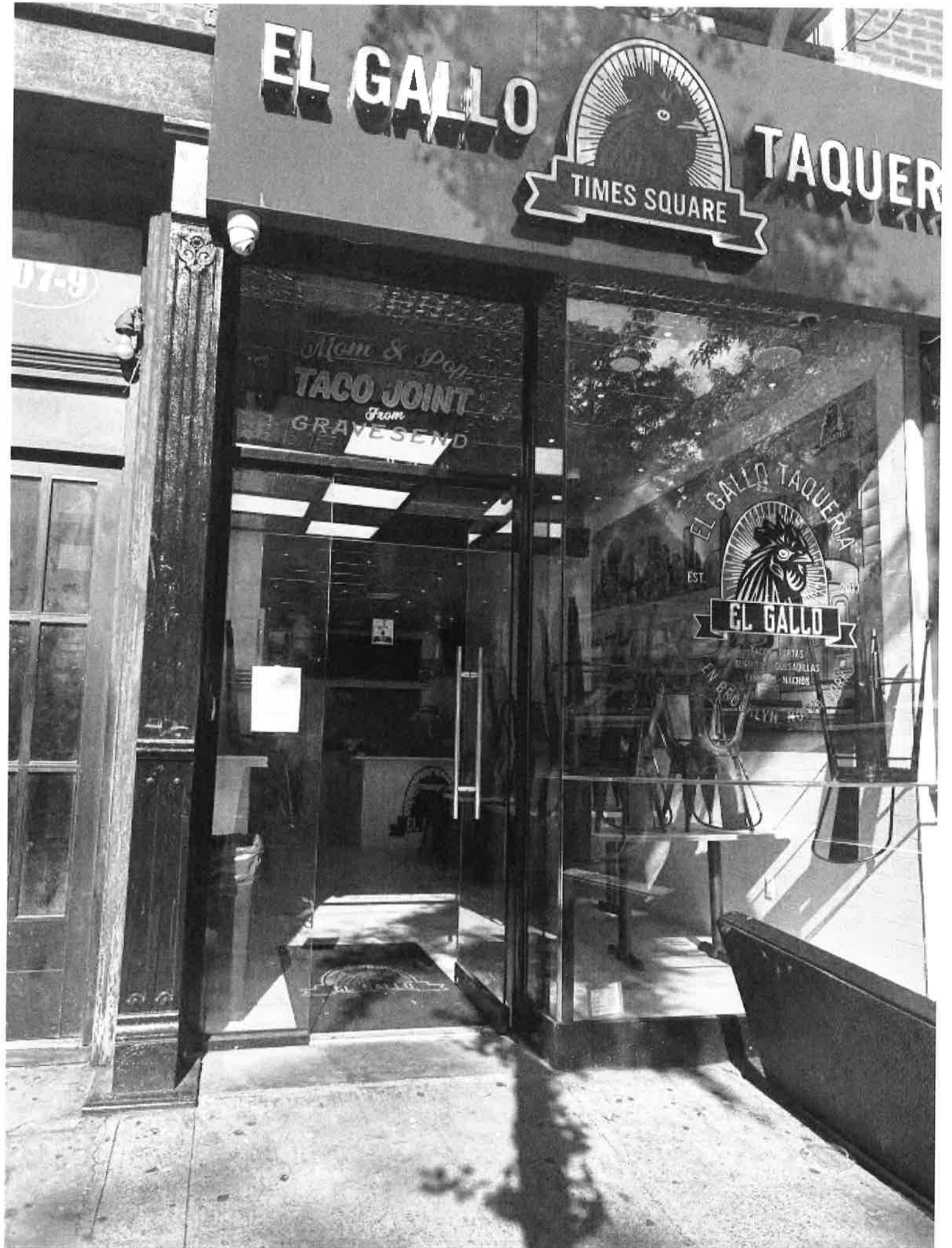


EL GALLO



TAQUERIA

*Mom & Pop*  
**TACO JOINT**  
*From*  
**GRAVESEND**



CITY OF NEW YORK  
MANHATTAN COMMUNITY BOARD No. 4  
424 W 33<sup>rd</sup> Street, Suite 580, New York, NY 10001  
Tel: 212-736-4536  
[www.nyc.gov/manhattancommunityboard4](http://www.nyc.gov/manhattancommunityboard4)

ATTENDANCE  
OR  
VIRTUAL  
PARTICIPATION

## PUBLIC NOTICE

Business Licenses and Permits Committee  
will discuss an application submitted by

**Hibiscus Mexpro Inc.  
d/b/a El Gallo Taqueria  
609 9<sup>th</sup> Avenue**

A Class Change Application to Upgrade to a Liquor,  
Wine, Beer & Cider License

**DATE:** Tuesday, Oct. 10, 2023

**TIME:** 6:30 PM

**PLACE:** Hybrid Meeting

**Video/Phone Conference Registration:**  
<https://tinyurl.com/mcb4-blpc-committee>

**In-Person:**  
**MCB4 Office**  
424 W 33<sup>rd</sup> Street, Suite 580

**Due to limited space and to follow health and safety precautions, we encourage you to participate remotely via Zoom. If you would like to attend in person, please email Assistant District Manager Nelly Gonzalez at [negonzalez@cb.nyc.gov](mailto:negonzalez@cb.nyc.gov) by 10am, Monday, September 11th.**

We invite you to attend the meeting and learn more about the applicant.  
Available: via audio and/or video conference by 12:00 on Monday, September 11,  
2023 or for more information, to Assistant District Manager Nelly Gonzalez  
212-736-4536

Filed according to the Administrative Code of the City of New York section 24-207.  
This notice is not intended to be a final decision.





JEFFREY LEFRANCIOS  
Chair

JESSE BODINE  
District Manager

CITY OF NEW YORK  
MANHATTAN COMMUNITY BOARD No. 4  
424 W 33<sup>rd</sup> Street, Suite 580 New York, NY 10001  
tel. 212-736-4536  
<https://cbmanhattan.cityofnewyork.us/cb4/>

## PUBLIC NOTICE

Business Licenses and Permits Committee  
will discuss an application submitted by

**Hibiscus Mexpro Inc.  
d/b/a El Gallo Taqueria  
609 9<sup>th</sup> Avenue**

A Class Change Application to Upgrade to a Liquor,  
Wine, Beer & Cider License

**DATE:** Tuesday, November 14, 2023

**TIME:** 6:30 PM

**PLACE:** Hybrid Meeting:



**Video/Phone Conference Registration:**  
**<https://tinyurl.com/mcb4-blp-committee>**

**In-Person:**  
**MCB4 Office**  
**424 W 33<sup>rd</sup> Street, Suite 580**

**Due to limited space and to follow health  
and safety precautions, we encourage you  
to participate remotely via Zoom. If you  
would like to attend in person, please  
email Assistant District Manager Nelly  
Gonzalez at [nelgonzalez@cb.nyc.gov](mailto:nelgonzalez@cb.nyc.gov) by  
10am, Monday November 13th.**

We invite you to attend this meeting and learn more about this application.  
Alternately, you should email your comments by 12 p.m. Monday, November 13,  
2023 or for more information, to Assistant District Manager Nelly Gonzalez  
[nelgonzalez@cb.nyc.gov](mailto:nelgonzalez@cb.nyc.gov)

Posted according to the Administrative Code of the City of New York section 10-  
119. Please do not remove until after the above meeting date.



MON - FRI

**PUBLIC NOTICE**  
 Notarizing  
 Notary Public  
 Notary Public  
 Notary Public

**Hibiscus Maxpro, Inc.**  
 471/5 El Gallo Taqueria  
 609 6th Avenue

Office Hours: Monday to Friday 10:00 AM to 6:00 PM  
 Saturday 10:00 AM to 5:00 PM  
 Sunday 12:00 PM to 5:00 PM

**DATE:** 10/15/2019  
**TIME:** 10:00 AM  
**PLACE:** 609 6th Avenue

**QR Code**

**1. I have read the above and I agree, with all its contents, to be notarized by the Notary Public, Hibiscus Maxpro, Inc. for the purpose of the above mentioned document.**

**2. I have read the above and I agree, with all its contents, to be notarized by the Notary Public, Hibiscus Maxpro, Inc. for the purpose of the above mentioned document.**

**3. I have read the above and I agree, with all its contents, to be notarized by the Notary Public, Hibiscus Maxpro, Inc. for the purpose of the above mentioned document.**

**4. I have read the above and I agree, with all its contents, to be notarized by the Notary Public, Hibiscus Maxpro, Inc. for the purpose of the above mentioned document.**

**5. I have read the above and I agree, with all its contents, to be notarized by the Notary Public, Hibiscus Maxpro, Inc. for the purpose of the above mentioned document.**

**6. I have read the above and I agree, with all its contents, to be notarized by the Notary Public, Hibiscus Maxpro, Inc. for the purpose of the above mentioned document.**

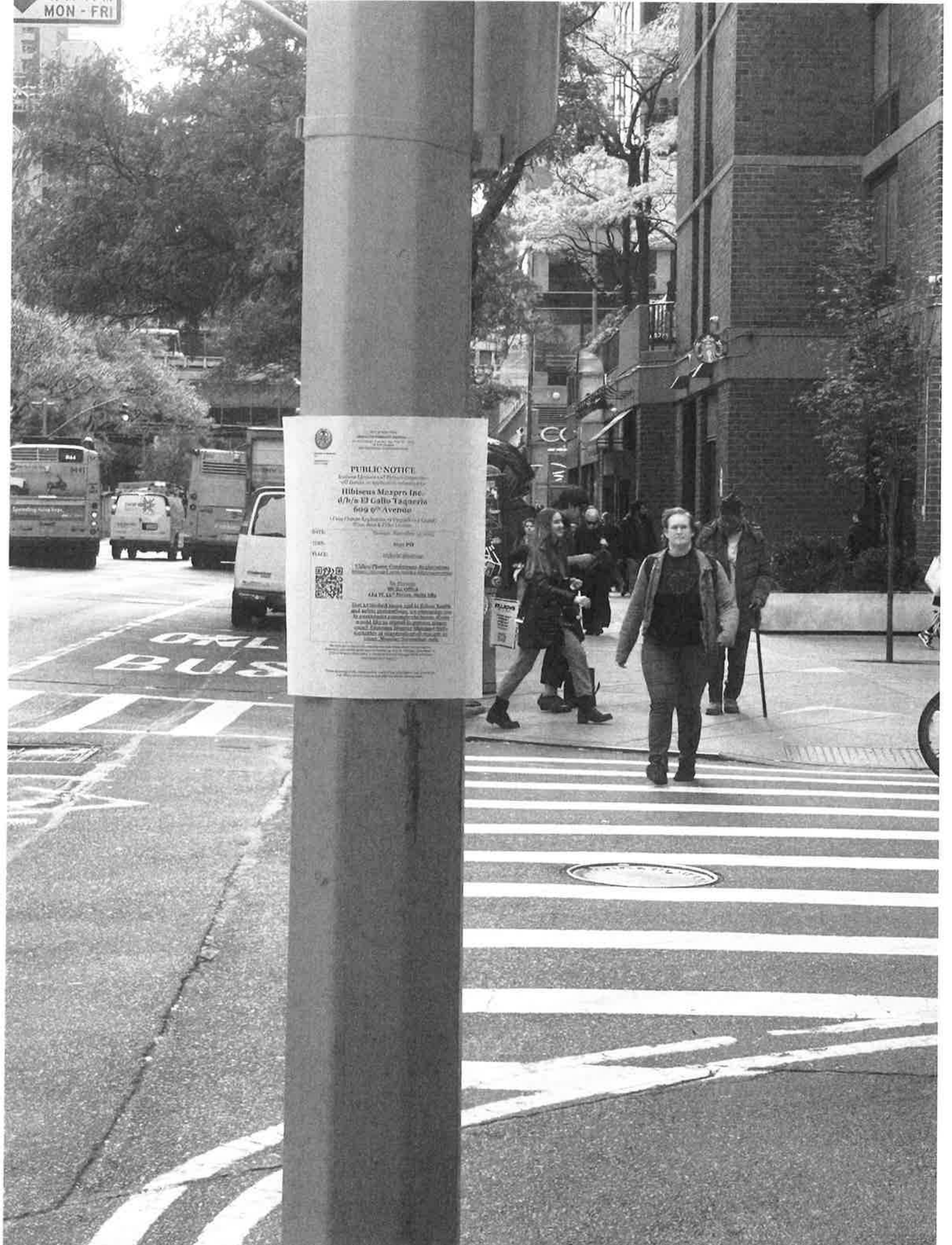
**7. I have read the above and I agree, with all its contents, to be notarized by the Notary Public, Hibiscus Maxpro, Inc. for the purpose of the above mentioned document.**

**8. I have read the above and I agree, with all its contents, to be notarized by the Notary Public, Hibiscus Maxpro, Inc. for the purpose of the above mentioned document.**

**9. I have read the above and I agree, with all its contents, to be notarized by the Notary Public, Hibiscus Maxpro, Inc. for the purpose of the above mentioned document.**

**10. I have read the above and I agree, with all its contents, to be notarized by the Notary Public, Hibiscus Maxpro, Inc. for the purpose of the above mentioned document.**

ORL  
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 GOVERNMENT OF MEXICO  
 SECRETARÍA DE ECONOMÍA  
 SECRETARÍA DE SALUD  
 SECRETARÍA DE TURISMO Y CULTURA

**PUBLIC NOTICE**  
 The Government of Mexico has authorized the  
**Hibiscus Mexico Inc.**  
 d/b/a El Gallo Taqueria  
 609 9th Avenue

(This Change application is subject to a Letter  
 from the FDA and EPA)

DATE: February, November 19, 2019  
 TIME: 6:00 PM  
 PLACE: Federal Building


 Video/Photo Conference Registration  
 Link: <https://www.hibiscusmexico.com/registration>

In Person  
 JACO O'Hara  
 #24 W. 53rd Street, Suite 200

Due to limited space and to follow health  
 and safety guidelines, we cannot see  
 in person everyone who wishes to  
 attend. We will attend in person, please  
 email [attending@hibiscusmexico.com](mailto:attending@hibiscusmexico.com)  
 if you are unable to attend in person.

This notice is subject to change without notice.  
 For more information, please contact the  
 Office of the Secretary of Health at [secretaria.salud@se.salud.gob.mx](mailto:secretaria.salud@se.salud.gob.mx)

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