

Manhattan Community Board 4

(All Fields Must Be Completed)

NYS Liquor License/DOT Dining Out Stipulations Application

CORPORATION NAME Caffe 555 LLC		DOING BUSINESS AS (DBA) Caffe Vento	
STREET ADDRESS 555 West 38th Street		CROSS STREETS corner of 38th Street	ZIP CODE 10018
Applicant <i>(Attach a list of all individuals that will be listed/associated with the license)</i>	NAME: Aris Balili 929-385-4680 Alexandros Balili 929-841-4967	ATTORNEY/ REPRESENTATIVE	NAME:
	PHONE:		PHONE:
	EMAIL: aris@primakitchen.com alexandros@primakitchen.com		EMAIL:
MANAGER	NAME: Hacene Bouarauj	LANDLORD	NAME: West 38 Res L.L.C.
	PHONE: 917-526-8112		PHONE: 212-847-3700
	EMAIL: hacene@dacaponyc.com		EMAIL: patricia.dunphy@rockrose.com
APPLICATION TYPE (<u> </u> <i>New York State Liquor License</i> <u> </u> <i>Dept. of Transportation Dining Out</i>)			
<input checked="" type="radio"/> New	Has applicant owned or managed a similar business?	YES	
	What is/was the name and address of establishment?	Da Capo, 1392 Madison Avenue, NYC 10029	
	What were the dates applicant was involved with this former premise?	10/2013 to present	
<input type="radio"/> Corp Change/Class Change/Method of Operation Change/Removal	What is the license # and expiration date?		
	Is applicant making any alterations or operational changes?	YES	
	If alterations or operational changes are being made, please describe/list all changes.	re-location and lengthening of the bar.	
<input type="radio"/> Alteration	What is the current license # and expiration date?		
	Please list/describe the nature of all the changes and attach the plans:		
METHOD OF OPERATION			
TYPE OF ALCOHOL	<input type="radio"/> Liquor/Wine/Beer & Cider <input type="radio"/> Beer & Cider <input checked="" type="radio"/> Wine/Beer & Cider		
ESTABLISHMENT TYPE	<input 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 <input type="radio"/> Adult Entertainment <input checked="" type="radio"/> CAFE + WINE BAR Wine Bar <input type="radio"/> Dance Club <input type="radio"/> Sports Bar <input type="radio"/> Club (Fraternal Organization - Members Only)		
Has applicant filed with the SLA? If yes, when? If no, when does applicant plan to file?		NO	July 9
Is the 500 Foot Rule applicable? If yes, please attach a diagram of the On-Premise liquor license establishments within a 500 foot radius of the establishment and the Public Interest Statement.		NO	
Is the 200 Foot Rule applicable? If yes, please attach a diagram of the schools and houses of worship within a 200 foot radius of the establishment.		NO	
Has applicant/owner(s) read MCB4 Policy Regarding Concentration and Location of Alcoholic-Serving Establishments?	YES		

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

HOURS of Operation		MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY
	Indoors	7a-10p	7a-10p	7a-10p	7a-11p	7a-11p	8a-11p	8a-9p
	Outdoors	/	/	/	/	/	/	/
	Kitchen	7a-10p	7a-10p	7a-10p	7a-11p	7a-11p	8a-11p	8a-9p
	Music (indoors)	7-10	7-10	7-10	7-11	7-11	8-11	8-9

If yes, what type(s)?
(Circle all that apply)

BACKGROUND
 LIVE MUSIC
 DJ
 JUKE BOX
 KARAOKE

OCCUPANCY

	Capacity Pursuant to Certificate of Occupancy	Maximum Occupancy (Including Employees)	Number of Tables	Number of Seats	Number of Service-Only Bars	Number of Stand-Up Bars	Number of Seats at Stand-Up Bar
INSIDE	60	40	8	22	1	0	/
OUTSIDE <i>(Rooftop/Rear Yard/Patio/Terrace/Garden; within the premises)</i>							
DOT Dining Out: Sidewalk Cafe							
DOT Dining Out: Roadway	/	/	/	/			

How frequently will the owner(s) be at the establishment?

ONE OF THREE WILL BE THERE EVERY DAY

Will there be dancing?

YES NO

Will applicant have bottle or table service for alcohol beverages other than wine?

YES NO

Will applicant be hosting private promotional or corporate events?

YES NO

Will outside promoters be used on a regular basis? If yes, please describe.

YES NO

Will applicant have a security plan? If yes, please attach.

YES NO

Will security plan be implemented?

YES NO

Will State certified security personnel be used?

YES NO

Will New York Nightlife Association and NYPD Best Practices be followed?

YES NO

Does applicant agree to notify MCB4 prior to making changes to its method of operation?

YES NO

Will applicant be using delivery bicycles? If yes, how many? Please describe where delivery bicycles will be parked when picking up deliveries?

YES NO

Will delivery bicycles be clearly marked with the name of the restaurant and will staff wear attire clearly marked with the name as described by NYC Law?	YES	NO	N/A
Where will applicants' own delivery bicycles be parked when not making deliveries?	N/A		
If applicant is using third party delivery service, where will third party delivery bicycles park?	N/A		
Where will applicant store its garbage containers when not in use?	YES		
Where will applicant lay out garbage containers and at what time?	YES, 10P		

LOCATION & ZONING

Is this a Special District? If yes, is it Clinton, West Chelsea or Hudson Yards?	YES	<input checked="" type="radio"/> NO	
Does the building have a Certificate of Occupancy ("C of O") or a Letter of No Objection?	<input checked="" type="radio"/> YES	NO	
Is a Public Assembly permit required?	YES	<input checked="" type="radio"/> NO	
Are your plans filed with DOB?	<input checked="" type="radio"/> YES	NO	
What is the zoning designation for this location?			

Community Notification/Relations

NOTIFICATION: List all block associations; tenant associations, co-op boards or condo boards of residential buildings; and community groups that applicant has notified regarding its application. For each, please list both the organization and individual you contacted.	# 1	SEE ATTACHED	
	# 2		
	# 3		
	# 4		
	# 5		
When did applicant post the notice that was provided?	YES		
Where did applicant post the notice that was provided?	ON FRONT WINDOW		
Please provide dates when applicant met with the groups listed above.	SENT EMAIL		
Who was your contact person at each group you met with?			
Will applicant provide a cell phone number to neighbors and respond to complaints that arise? If yes, please provide.	<input checked="" type="radio"/> YES	NO	917 5268112
Will applicant inform the Community Board office of its job openings and/or provide a hyperlink to applicant's jobs webpage?	<input checked="" type="radio"/> YES	NO	

MULTIPLE SPACES/FLOORS 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

BUILDING DESIGN			
State the name and type of business previously located in the space.	NEW BUILDING		
Has a liquor-licensed establishment previously occupied this space at any time? If yes, please provide the name of the business.	YES	NO	N/A
Do you plan any changes to the existing façade? If yes, please describe.	YES	<input checked="" type="radio"/> NO	/
Has the applicant/owner(s) read MCB4 ADA Guidelines Memo?	<input checked="" type="radio"/> YES	NO	
Is the entrance ADA Compliant?	<input checked="" type="radio"/> YES	NO	
Do you plan any changes to the existing façade? If yes, please describe.	YES	<input checked="" type="radio"/> NO	
Will applicant have a vestibule within the establishment?	YES	<input checked="" type="radio"/> NO	
Will applicant use a storm enclosure?	YES	NO	ONLY DURING THE WINTER
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?	<input checked="" type="radio"/> YES	NO	
Will applicant comply with the NYC noise code?	<input checked="" type="radio"/> 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	N/A
Will applicant close all windows, French doors, garage doors by 11 p.m. Friday and Saturday and 10 p.m. on all other days even if no music or amplified sound is played inside the establishment?	YES	NO	N/A
Has applicant obtained an acoustical report from a certified sound engineer to assess potential noise disturbance to the neighboring residents and buildings?	YES	<input checked="" type="radio"/> 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	NO FREESTANDING BUILDING
Will the kitchen exhaust system extend to the roof?	<input checked="" type="radio"/> YES	NO	
Will the establishment have an illuminated sign?	YES	<input checked="" type="radio"/> NO	
Will the establishment have a pole-supporting canopy extending over the sidewalk?	YES	<input checked="" type="radio"/> NO	
Where will the air conditioner be located? What type is it?	INSIDE UNIT		
When was the air conditioner installed?	WITH BUILDING CONSTRUCTION		

***NO OUTDOOR SPACE**

OUTDOOR PRIVATE PROPERTY – ROOFTOP, REAR YARD, TERRACE			
Has the applicant read MCB4 Rear Yard Rooftop Policy?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	
Will applicant use outdoor spaces: rooftop, rear yard, patio, porch, balcony, pavilion, etc. who? If yes, which one(s)?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	ENTRANCE
Are the floorplans for the outdoor space included?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	
Will applicant close and vacate the outdoor space by 11 p.m. on Friday & Saturday and 10 p.m. on all other days?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	
Will the service and consumption of alcoholic beverages in outdoor space only be via seated food service?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	
Will applicant prohibit patrons from drinking in any outdoor space(s)?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	
Will there be no amplified music, as per the law?	<input checked="" type="radio"/> YES	<input checked="" type="radio"/> NO	
If amplified sound is played inside the establishment, will doors be closed?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	N/A
Will applicant agree to post signs outside the establishment to respect the neighbors?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	
Will applicant agree to train staff to maintain a peaceful environment?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	
Will applicant provide effective noise control (landscaping enclosure, soundproofing, etc.)	<input checked="" type="radio"/> YES	<input type="radio"/> NO	
Will there be a light fixture that allows safe usage of the outdoor space without disrupting neighbors?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	

DEPARTMENT OF TRANSPORTATION DINING OUT: SIDEWALK			
Has the applicant read MCB4 Sidewalk Café Policy?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	
Will applicant be applying for sidewalk seating now or in the future?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	IN FUTURE
If you answered no to the question above, jump to the next page			
Did applicant submit an application and dimension site plan at scale to NYC Dept. of Transportation? Please attach a copy of application and plans.	<input type="radio"/> YES	<input checked="" type="radio"/> NO	
Will applicant close and vacate the sidewalk and roadway seating by 11 p.m. on Friday & Saturday and 10 p.m. on all other days?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	
Will applicant respect trees and tree pits and insure the health of the tree?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	
Will the service and consumption of alcohol in any outdoor space only be via seated food service?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	
Will applicant prohibit patrons from drinking in any outdoor space(s) or adjacent sidewalk?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	
Will applicant permit NO wait lines or smoking outside?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	
Will there be no amplified music, as per the law?	<input type="radio"/> YES	<input checked="" type="radio"/> NO	
If amplified sound is played inside the establishment, will windows and doors be closed?	<input type="radio"/> YES	<input type="radio"/> NO	N/A
Will there be a staff person responsible to ensure no loitering, noise or crowds outside?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	
Will applicant agree not to use propane heaters?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	
Will applicant agree to abide by all applicable fire codes, including not blocking fire escapes?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	
Will the outdoor dining deposit its garbage in a container on the parking lane?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	
Will the café have a 3 foot-wide serving aisle running the entire length of the sidewalk seating?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	
Will the sidewalk seating have a platform?	<input type="radio"/> YES	<input checked="" type="radio"/> 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?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	
Will there be a lighting plan that allows safe usage of the outdoor space without disrupting neighbors?	<input checked="" type="radio"/> YES	<input type="radio"/> NO	
Will the sidewalk seating block subway grate, utility hardware or Siamese water connection?	<input type="radio"/> YES	<input checked="" type="radio"/> 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 closes obstruction including construction barricades?	4		

DEPARTMENT OF TRANSPORTATION DINING OUT: ROADWAY

Did applicant submit an application and dimension site plan at scale to NYC Dept. of Transportation? Please attach a copy of application and plans.	YES	<input checked="" type="radio"/> NO	
If you answered no to the question above, jump to the next page			
Will the roadway structure extend on top of the curb or pedestrian refuge? By how much?	YES	NO	
Will the roadway structure have an ADA compliant ramp (not in the bike lane)?	YES	NO	
Will the roadway structure extend in the striped zone along the bike lane? By how much?	YES	NO	
Will the electric wires be brought over at the roof level?	YES	NO	
Will applicant dismantle and dispose of a shed that is no longer in use, along with its furniture?	YES	NO	
Will there be no music or amplifies sound in any outdoor seating, as per law?	YES	NO	
Will applicant have a lighting plan that will allow safe usage of the outdoor space without disrupting neighbors?	YES	NO	
Will applicant close and vacate the sidewalk and roadway seating by 11 p.m. on Friday & Saturday and 10 p.m. on all other days?	YES	NO	
Will the Outdoor Dining Sidewalk & Roadway provide no standing space for drinking or smoking?	YES	NO	
Will the service and consumption of alcohol in the Outdoor Dining Sidewalk/Roadway only be via seated food service?	YES	NO	
Will applicant prohibit patrons from drinking in any outdoor space(s) or adjacent sidewalk?	YES	NO	
If amplified sound is played inside the establishment, will windows and doors be closed?	YES	NO	
Will applicant permit NO wait lines or smoking outside?	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 respect trees and tree pits and insure the health of the tree?	YES	NO	
Will applicant permit NO wait lines or smoking outside?	YES	NO	
Will there be a staff person responsible to ensure no loitering, noise or crowds outside?	YES	NO	
Will applicant agree not to use propane heaters?	YES	NO	
Will the outdoor dining deposit its garbage in a container on the parking lane?	YES	NO	

ADDITIONAL STIPULATIONS: (Office Use Only)

- This application does not extend to any outdoor space
- Any storm enclosure shall extend no further than 18" from building facade

To the extent any additional stipulation on pages 9 and 10 of this application conflicts with any response on pages 1 – 11 of this application, the stipulations on pages 9 and 10 control.

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

To the extent any additional stipulation on pages 9 and 10 of this application conflicts with any response on pages 1 – 11 of this application, the stipulations on pages 9 and 10 control.


<p>Manhattan Community Board 4 (MCB4) recommends: <i>(MCB4's recommendation is based on a vote taken at its July 24, 2024 full board meeting, with 40 members voting in favor of the recommendation, 0 members opposed, 0 members abstaining and 0 present but not eligible)</i></p>	<p><input checked="" type="checkbox"/> Denial unless all stipulations agreed to by applicant/owner are part of the method of operation</p> <p><input type="checkbox"/> Denial <input type="checkbox"/> Approval</p>
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MCB4 REPRESENTATIVES

 <p>Nelly Gonzalez <i>MCB4 Assistant District Manager</i></p>	 <p>Frank Holozubiec <i>MCB4 BLP Committee Co-Chair</i></p>	 <p>Burt Lazarin <i>MCB4 BLP Committee Co-Chair</i></p>
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APPLICANT AGREEMENT WITH THE COMMUNITY

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

<p>SIGN HERE →</p>	<p>ARIS BAICI</p> <p>PRINT NAME OF APPLICANT</p>	 <p>SIGNATURE OF APPLICANT</p>	<p>7/1/24</p> <p>DATE</p>
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OFFICE USE ONLY

Original Amended Date _____

RECEIVED

Date: 5/29/24 49

Time: _____

By: [Signature]

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

1. Date Notice Sent: 5/22/2024 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:

For premises outside the City of New York:

New Application Removal Class Change

For premises in the City of New York:

New Application New Application and Temporary Retail Permit Renewal Alteration Removal

Class Change Method of Operation Corporate Change

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

For **Renewal** applicants, answer all questions

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

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

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

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

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

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

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

3. Name of Municipality or Community Board: Manhattan Community Board 4, 424 W 33rd St, #580 New York, NY 10001

Applicant/Licensee Information:

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

5. Applicant or Licensee Name: Caffe 555 LLC

6. Trade Name (if any): Caffe Vento

7. Street Address of Establishment: 555 West 38th Street

8. City, Town or Village: New York, NY Zip Code: 10018

9. Business Telephone Number of applicant/ Licensee: 212-659-0343

10. Business E-mail of Applicant/Licensee: aris@primakitchen.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: Bar/Tavern

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): cafe / wine bar with menu and recorded background music

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

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

16. List the floor(s) of the building that the establishment is located on:

17. List the room number(s) the establishment is located in within the building, if appropriate:

18. Is the premises located within 500 feet of three or more on-premises liquor establishments? Yes No

19. Will the license holder or a manager be physically present within the establishment during all hours of operation? Yes No

20. If this is a transfer application (an existing licensed business is being purchased) provide the name and serial number of the licensee:

Name
Serial Number

21. Does the applicant or licensee own the building in which the establishment is located? Yes (if YES, SKIP 23-26) No

Owner of the Building in Which the Licensed Establishment is Located

22. Building Owner's Full Name:

23. Building Owner's Street Address:

24. City, Town or Village: State: Zip Code:

25. Business Telephone Number of Building Owner:

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

26. Representative/Attorney's Full Name:

27. Representative/Attorney's Street Address:

28. City, Town or Village: State: Zip Code:

29. Business Telephone Number of Representative/Attorney:

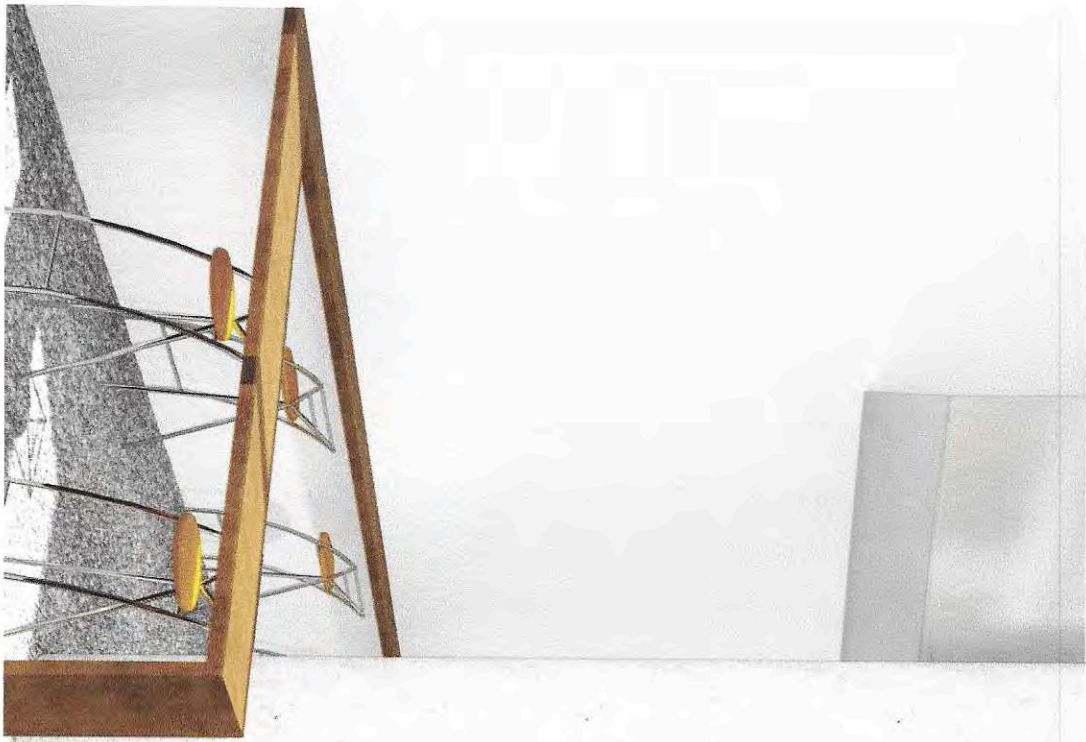
30. Business E-mail Address of Representative/Attorney:

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

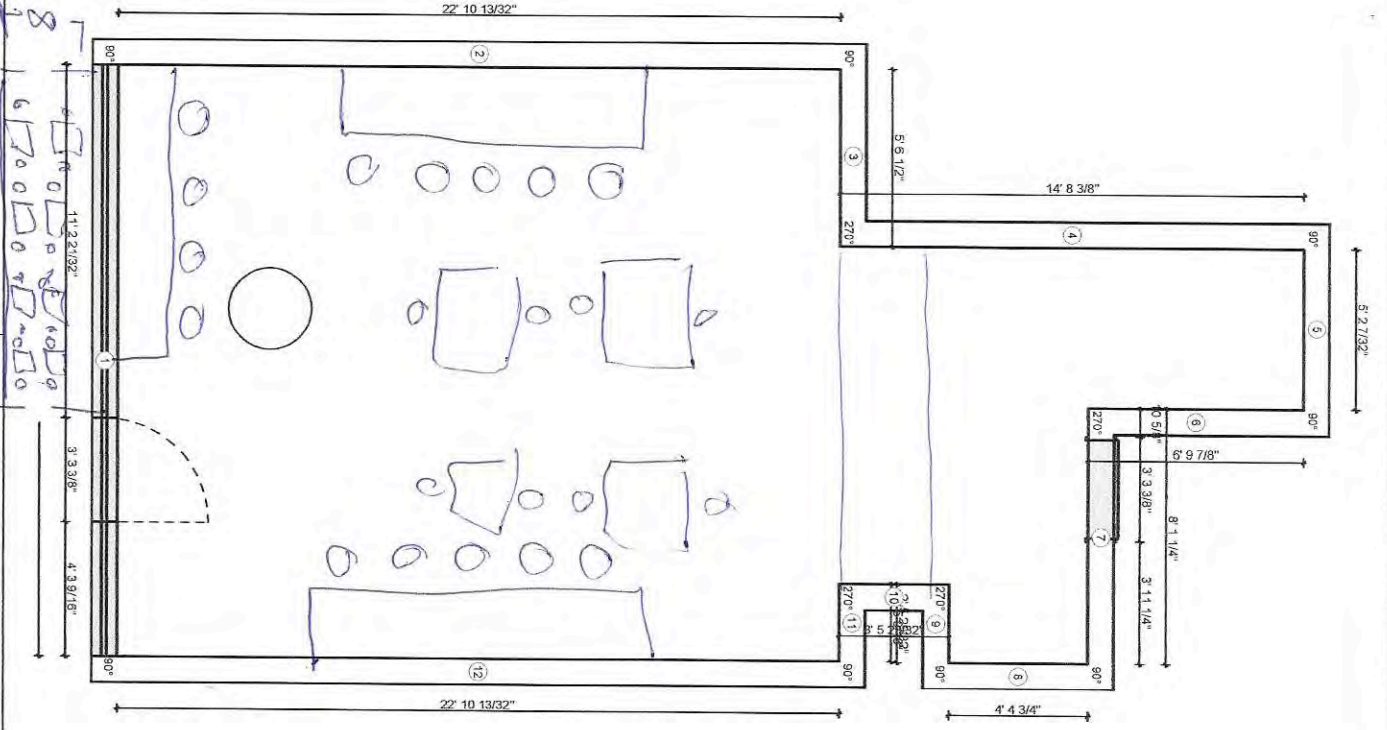
By my signature, I affirm - under **Penalty of Perjury** - that the representations made in this form are true.

31. Printed Principal Name: Title:

Principal Signature:



Prima kitchen
16 E 116th Street
10029 New York
ADMIN



Floor plan
Commission 1025/1
29.05.2021

555W 38th Street
NY 10018



DA CAPO

Frittata

Vegetarian 7

Organic eggs, zucchini, bell peppers, onions, on a brioche bun

Vegetarian 8

Organic eggs, Canadian bacon, onions, spinach, on a brioche bun

Panini

Caprese 11

Baguette, olive oil, fresh basil pesto, fresh mozzarella, tomatoes

Prosciutto di Parma 13

Baguette, olive oil, Prosciutto di Parma, fresh mozzarella, tomatoes

Tachino 13

Baguette, olive oil, sun-dried tomato pesto, brie cheese, tomatoes, baby arugula

Soppressata 12

Baguette, olive oil, fresh basil pesto, fontina cheese, tomatoes, baby arugula

Mortadella 12

Baguette, olive oil, mayonnaise, fontina cheese, tomatoes, baby arugula

Salumi

Prosciutto - Soppressata – Capicola – Coppa – Mortadella
Gorgonzola – Pecorino Romano – Fontina – Pannigiano Reggiano

\$7 per item - choice of 5 for \$29



DA CAPO

Wine and Beer Menu

Red Wine

Montepulciano D'Abruzzo, Italy - 18

Bussola Ripasso Superiore, Italy – 16

White Wine

Pinot Grigio delle Venezie, Italy – 16

Vernentino, Italy – 16

Prosecco

Prosecco, Italy - 15

Beer - 11

Lager
Stella, Italy

Pilsner
Peroni, Italy



ESPRESSO

PANINI

COFFEE

TEMPORARY
HOURS
M - F
8 TO 2
SAT/SUN
11 TO 1



555

CAFFEE



555

CALIFORNIA