Manhattan Community Board 4 (All Fields Must Be Completed)

CORPORATION NAM	ME		DOING BUSINESS AS (DBA)							
GLUR LLC			GLUR							
STREET ADDRESS	CROSS STREE	ETS								
144 W 19th Stree	t New Yo	ork, NY	6&7th Ave			10011				
Applicant	NAME:	Issaraporn Weerakongsuwan			NAME:					
(Attach a list of all individuals that will	PHONE:	5157890818	ATTORNEY/ REPRESENTA		PHONE:					
be listed/associated with the license)	EMAIL:	glurnyc@gmail.com			EMAIL:					
	NAME:	Chad Than			NAME:					
MANAGER	PHONE:	5157890818	LANDLORD		PHONE:					
	EMAIL:	glurnyc@gmail.com		-	EMAIL:					
APPLICATIO	ON TYP	E (New York State Liqu	or License	X	Dept. of Tra	nsportatio	n Dining Out)			
	Has applica	ant owned or managed a similar business?			YES	NO				
O New	What is/wa	s the name and address of establishment?								
	What were	the dates applicant was involved with this form	er premise?							
O Corp	What is the	license # and expiration date?								
Change/Class	Is applican	t making any alterations or operational changes	?		YES	NO				
Change/Method of Operation Change/Removal	If alteratior	as or operational changes are being made, pleas	e describe/list all c	changes.						
X Alteration	What is the	current license # and expiration date?		#1318849 Exp: 10/31/2025						
	Please list/o	describe the nature of all the changes and attach	he plans: Adding an outdoor/sidewalk dining							
METHOD OF	OPER	ATION								
TYPE OF ALCOH	OL	Liquor/Wine/Beer & Cider	Ов	eer & Ci	der	🗭 Wine/B	eer & Cider			
		🗭 Restaurant 🔿 Cabaret 🔿	Night Club) Hotel	O Bar/Tavern	O Cat	tering Establishment			
ESTABLISHMENT TYPE O Adult Entertainment O Wine E			ar 🔿 Danc	e Club	O Sports Bar O	Club (Fratema	al Organization – Members Only)			
Has applicant filed with the SLA? If yes, when? If no, when doe applicant plan to file?			YES	NO	NA					
Is the 500 Foot Ru	YES	NO								
of the On-Premise radius of the establ			NO							
Is the 200 Foot Ru of the schools and	YES	NO								
the establishment.		-			NO					
		MCB4 Policy Regarding of Alcoholic-Serving	YES	NO	YES					

		MONDAY	TUESDAY	Y	WEDNESD	AY	THU	RSDAY	I	FRIDAY	SA	TURDAY	s	JNDAY
HOURS	Indoors	1130 - 10	10 1130 - 10 1130 - 10			1130 - 10 11		11:	30 - 10	1130 - 10		1130	- 10	
of	Outdoors						4400	10						
Operation		1130-10	1130-10		1130-10		1130	-10	11	30-11	11.	30-11	113	J-10
	Kitchen	1130 - 10	1130 - 10		1130 - 10		1130 -	- 10	11:	30 - 10	113	0 - 10	1130	- 10
	Music (indoors)	1130-10	1130-10		1130-10		1130-10		1130	0-10	1130	-10	1130-10)
If yes, what typ (Circle all that a			BACKGRO	UND	LIVE MU	SIC]	DJ	J	UKE BOX		KA	RAOKI	2
	<u>appiy)</u>				OCCUPAN	CY					I			
	Pu Ce	ipacity rsuant to rtificate of cupancy	Maximum Occupancy (Including Employees)	Num of Tal				mber of e-Only Ba	rs	Number Stand-Up l		Number of at Stand-U		
INSIDE	74		27	9	19		0)		1		3		
OUTSIDE												-		
(Rooftop/Rear Yard/Patio/Terr /Garden; withir the premises)														
DOT Dining Out: Sidewal Cafe				2	4									
DOT Dining (loadway	Out:													
How frequent	ly will the ow	mer(s) be at the	establishment?	 ?										
Will there be						1	00%							
Will applicant		or table service	for alcohol bev	erages	other than		YES YES	NO	NO					
wine? Will applican	t he hosting p	rivate promotio	nal or corporate	e event	·s?		YES	NO	NO					
						-	YES	NO	NO					
Will outside promoters be used on a regular basis? If yes, please describe. Will applicant have a security plan? If yes, please attach.						-	YES	NO	NO					
			Preuse attacil.				YES	NO	NO					
Will security plan be implemented? Will State certified security personnel be used?					-	YES	NO	NA						
		ssociation and		actices	be followed	?	YES	NO	NA					
	-	ify MCB4 prior				-	YES	NO	NA YES	;				
Will applicant		very bicycles?	If yes, how ma arked when pic				YES	NO	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	NA
Where will applicants' own delivery bicycles be parked when not making deliveries?	NA		
If applicant is using third party delivery service, where will third party delivery bicycles park?	YES,	OUTS	IDE ON THE ROADWAY
Where will applicant store its garbage containers when not in use?			
	BASE	MENT	
Where will applicant lay out garbage containers and at what time?			
	OUTS	SIDE 10)PM

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

Community Notification/Relat	ions							
NOTIFICATION:	# 1							
List all block associations; tenant associations, co-op boards or condo boards of residential	# 2							
buildings; and community groups that applicant has notified regarding its application. For each,	# 3							
please list both the organization and individual you contacted.	# 4							
	# 5							
When did applicant post the notice that	was prov	ided?	YES					
Where did applicant post the notice that	t was prov	vided?	CORNERS OF 19TH AND 7TH AVE BOTH SIDES					
Please provide dates when applicant me above.	et with th	e groups listed	NA					
Who was your contact person at each group you met with?			NA					
Will applicant provide a cell phone nun to complaints that arise? If yes, please p	ighbors and respon	d	YES	NO	NO			
Will applicant inform the Community Board office of its job opening and/or provide a hyperlink to applicant's jobs webpage?				YES	NO	NO		

MULTIPLE S	SPACES/FLOO	RS 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

BUILDING DESIGN			
State the name and type of business previously located in the space.	GLUR	REST	AURANT
Has a liquor-licensed establishment previously occupied this space at any time? If yes, please provide the name of the business.	YES	NO	YES. GLUR
Do you plan any changes to the existing façade? If yes, please describe.	YES	NO	NO
Has the applicant/owner(s) read MCB4 ADA Guidelines Memo?	YES	NO	YES
Is the entrance ADA Compliant?	YES	NO	YES
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	NO
Will applicant use a storm enclosure?	YES	NO	NA
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)	FREN	CH DOOR	RS 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 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	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	NA
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	NA
Will the kitchen exhaust system extend to the roof?	YES	NO	YES
Will the establishment have an illuminated sign?	YES	NO	NO
Will the establishment have a pole-supporting canopy extending over the sidewalk?	YES	NO	NA
Where will the air conditioner be located? What type is it?	BACK	YARD -	- MINI SPLIT
When was the air conditioner installed?	2019		

OUTDOOR PRIVATE PROPERTY – ROOFTOP, REAR YARD, TERRACE							
Has the applicant/owner(s) read MCB4 Rear Yard Rooftop Policy?	YES	NO	YES				
Will applicant use any outdoor spaces: rooftop, rear yard, patio, porch, balcony, pavilion, tents, deck, gazebo? If yes, which one(s)?	YES	NO					
			NA				
Are the floorplans for the outdoor space(s) included?	YES	NO	YES				
Will applicant close and vacate the outdoor space(s) by 11 p.m. on Friday & Saturday and 10 p.m. on all other days?	YES	NO	YES				
Will the service and consumption of alcohol in any outdoor space only be via seated food service?	YES	NO	YES				
Will applicant prohibit patrons from drinking in any outdoor space(s)?	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	NA				
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					
Will there be a lighting plan that allows safe usage of the outdoor space without disrupting neighbors?	YES	NO	YES				

DEPARTMENT OF TRANSPORATION DINING OUT: SI	DEWA	ALK	
Has the applicant read MCB4 Sidewalk Café Policy?	YES	NO	YES
Will applicant be applying for sidewalk seating now or in the future?	YES	NO	YES
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.	YES	NO	YES
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	YES
Will applicant respect trees and tree pits and insure the health of the tree?	YES	NO	YES
Will the service and consumption of alcohol in any outdoor space only be via seated food service?	YES	NO	YES
Will applicant prohibit patrons from drinking in any outdoor space(s) or adjacent sidewalk?	YES	NO	YES
Will applicant permit NO wait lines or smoking outside?	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	NA
Will there be a staff person responsible to ensure no loitering, noise or crowds outside?	YES	NO	YES
Will applicant agree not to use propane heaters?	YES	NO	YES
Will applicant agree to abide by all applicable fire codes, including not blocking fire escapes?	YES	NO	YES
Will the outdoor dining deposit its garbage in a container on the parking lane?	YES	NO	NO
Will the café have a 3 foot-wide serving aisle running the entire length of the sidewalk seating?	YES	NO	YES
Will the sidewalk seating have a platform?	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 there be a lighting plan that allows safe usage of the outdoor space without disrupting neighbors?	YES	NO	YES
Will the sidewalk seating block subway grate, utility hardware or Siamese water connection?	YES	NO	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?			NA

DEPARTMENT OF TRANSPORATION DINING OUT: RC	DADW	AY	
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	NO	NO
f 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 now 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	
Vill applicant prohibit patrons from drinking in any outdoor space(s) or adjacent idewalk?	YES	NO	
f amplified sound is played inside the establishment, will windows and doors be losed?	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 s sandwich boards, sidewalk signs, freestanding menus and plants, as per the aw?	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)

- All sidewalk obstructions placed by applicant will be removed

- Applicant will not place any tables or chairs on curbside of sidewalk

- DOT Dining Sidewalk Cafe will be limited to 2 tables no large than 14" by 14" with 2 chairs at each table. Those tables and chairs will be placed against the building facade, extending no further than 3' 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.

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Manhattan Community Board 4 (Megaring (MCB4's recommendation is based on a December 4, 2024 full board meeting, which in favor of the recommendation, _0_m members abstaining and _0_present b	a vote taken at its ith 42 members voting nembers opposed, 0	Denial unless all stipulations agreed to by applicant/owner are part of the method of operation O Denial O Approval						
MCB4 REPRESENTATIVES								
Nelly Gonzalez MCB4 Assistant District Manager	Frank Holozubiec MCB4 BLP Committee Co-Chair	hyli	Burt Lazarin MCB4 BLP Committee Co-C	Thair				
APPLICANT AGREEMENT WI	TH THE COMMUNIT	Y						
Applicant agrees to these stipulations as the basis for the community support of this application and acknowledges that all of these stipulations are essential prerequisites to the MCB4 recommendation regarding this application. Applicant agrees to have these stipulations incorporated in the method of operation of its liquor license. The stipulations in this application constitute the entire agreement between MCB4 and applicant and may only be altered in writing signed by MCB4 representatives and applicant. These stipulations supersede any oral statements, representations, or prior iterations in connection with this application.								
SIGN HERE \rightarrow	issava poto weevakings PRINT NAME OF APPLICANT	C.	F APPLICANT	11/3/24 DATE				

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