

**Manhattan Community Board 4**  
(All Fields Must Be Completed)

Liquor License Stipulations Application

APPLICANT: <b>LICORES 47, CORP.</b>		DOING BUSINESS AS (DBA): <b>PARADA 47, MEXICAN RESTAURANT</b>		
STREET ADDRESS: <b>526 WEST 47TH STREET</b>		CROSS STREET: <b>AMTRAK - NORTHEAST LINE, 11TH AVENUE</b>		
OWNER:	NAME: <b>VICTOR A. VASQUEZ</b>	ATTORNEY:	NAME:	
	PHONE: <b>(212) 265-2626</b>		PHONE:	
	FAX:		FAX:	
MANAGER:	NAME: <b>VICTOR A. VASQUEZ</b>	LANDLORD:	NAME: <b>SCOTT KOONEY</b>	
	PHONE: <b>(212) 265-2626</b>		PHONE: <b>(718) 858-8426 EX. 18</b>	
	FAX:		FAX: <b>(718) 855-3593</b>	
DESCRIPTION OF BUSINESS				
Establishment Type:	<input type="radio"/> Bar/Tavern <input type="radio"/> Bed & Breakfast <input type="radio"/> Eating Place Beer <input type="radio"/> Cabaret <input type="radio"/> Night Club <input type="radio"/> Hotel <input checked="" type="radio"/> Restaurant <input type="radio"/> Catering Establishment <input type="radio"/> Club (Fraternal Organization - Members Only) <input type="radio"/> Other (Explain): Bar/Arcade			
Method of Operation:	<input checked="" type="radio"/> Restaurant <input type="radio"/> Dance Club <input type="radio"/> Sports Bar <input type="radio"/> Adult Entertainment <input type="radio"/> Wine Bar <input type="radio"/> Pizzeria <input type="radio"/> Cafe <input type="radio"/> Other (Explain): Bar/Arcade			
License Type:	<input checked="" type="radio"/> On-Premise <input type="radio"/> Wine <input type="radio"/> Beer <input checked="" type="radio"/> Wine & Beer <div style="text-align: right; font-size: 2em; font-family: cursive;">V.A.V.</div>			
APPLICATION TYPE (check one)	<input checked="" type="radio"/> New	Has applicant owned or managed a similar business?	YES	<input checked="" type="radio"/> NO
		What is/was the name of establishment?		
		What is/was the address of the establishment?		
		What were the dates the applicant was involved with this former premise?		
	<input type="radio"/> Transfer	What is the prior license #?		
		What is the expiration date on the prior license?		
		Are you making any alterations or operational changes?	YES	NO
		<i>If alterations or operational changes are being made, please attach the plans to this form.</i>		
	<input type="radio"/> Alteration	What is the current license #?		
		What is the expiration date on the current license?		
<i>Please describe the nature of the alterations and attach the plans</i>				

**OPERATIONAL ISSUES**

HOURS		MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY
	Operation	6AM-7PM	6AM-7PM	6AM-7PM	6AM-7PM	6AM-7PM	6AM-7PM	X
	Music							X
	Kitchen	6:30-7:30 PM	6:30-7:30 PM	6:30-7:30 PM	6:30-7:30 PM	6:30-7:30 PM	6:30-7:30 PM	X

*Handwritten notes above table: 8am, 11pm, 8am, 11pm, 8am, 11pm, 11am to 10pm. VAV*

OCCUPANCY	INDOOR				DCA			OUTSIDE	
	Capacity (Certificate of Occupancy)	Maximum # of Persons You Anticipate Occupying Premises (Including Employees)	Number of Tables	Number of Seats	Number of Service Only Bars	Number of Stand-Up Bars	Number of Seats at Bars	Number of Seats	Number of Tables
			8	15	N/A	N/A	N/A	N/A	N/A

How many floors are there? What is the capacity for each floor? (please respond in space provided)  YES  NO  N/A **1 FLOOR CAPACITY:**

Will you be applying or intending to apply for a cabaret license? If yes, will there be dancing? (please respond in space provided)  YES  NO  N/A

Will applicant have bottle service?  YES  NO  N/A

Will you be hosting private parties and promotional events?  YES  NO  N/A

Will outside promoters be used?  YES  NO  N/A

Will the security plan submitted be implemented?  YES  NO  N/A

Will State certified security personnel be used?  YES  NO  N/A

Will New York Nightlife Association recommendations and NYPD Best Practices be followed?  YES  NO  N/A

Will the applicant be using delivery bicycles? If yes, have you applied to DOT for bicycle rack? Delivery bicycles are to be clearly marked with the name of the restaurant and staff will wear attire clearly noting name. (please respond in space provided)  YES  NO  N/A **10 BICYCLES VAV**

Will the applicant be applying for a Sidewalk Café now or in the future? (please respond in space provided)  YES  NO  N/A

If yes to the above, are plans attached and submitted to DCA? How many tables/seats? (please respond in space provided)  YES  NO  N/A

Will applicant provide contact information to neighbors and respond to complaints that arise?  YES  NO  N/A

Will you inform the Community Board office of your job openings and/or provide a hyperlink to your jobs webpage?  YES  NO  N/A

If you plan to have music, what type(s)?  BACKGROUND  LIVE MUSIC  DJ

**BUILDING DESIGN**

Doors and windows will be closed when any amplified music is played and in the event of no amplified sound, will be closed by 11 PM Friday and Saturday and 10 PM on all other days.  YES  NO  N/A

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

Do you agree to comply with DOB rules concerning a storm enclosure? Storm enclosures can be used between November 15 and April 15, but they may NOT project more than 18 inches from the store front.  YES  NO  N/A **VAV**

OUTDOOR ITEMS			
Will applicant use the rooftop, rear yard or any outdoor space?	YES	<input checked="" type="radio"/> NO	N/A
If yes to the above, the rear yard, rooftop, and any outdoor space will be closed and vacated by 11 PM on Friday & Saturday and 10 PM on all other days.	YES	NO	<input checked="" type="radio"/> N/A
The service and consumption of alcohol in the rear yard, on the rooftop, or in any other outdoor space will be only via seated food service.	YES	NO	<input checked="" type="radio"/> N/A
The rear yard, rooftop, and any other outdoor space will not allow standing space for patrons to drink or smoke.	YES	NO	<input checked="" type="radio"/> N/A
Applicant will do everything in their power to provide an effective sound baffling or sound controlled environment through landscaping or some type of enclosure, where possible; provided they do not violate any fire or building code regulations? This includes possibly working with landlords for soundproofing tenants apartments (such as installing soundproofing windows, acoustical tiles, etc.).	YES	NO	<input checked="" type="radio"/> N/A
Applicant will enforce a quiet environment in the outdoor space, so as not to disturb nearby residents (e.g. there will be no amplified music, as per the law, and windows and doors to areas that play amplified music shall be closed). The applicant will make every effort possible to limit the noise emanating from diners by posting signs outside and also on menus asking for respect of the neighbor's privacy and peace. The staff will also encourage a peaceful environment amongst the outdoor diners.	YES	NO	<input checked="" type="radio"/> N/A
Applicant will have a lighting plan that will allow safe usage of the outdoor space without disrupting neighbors?	YES	NO	<input checked="" type="radio"/> N/A

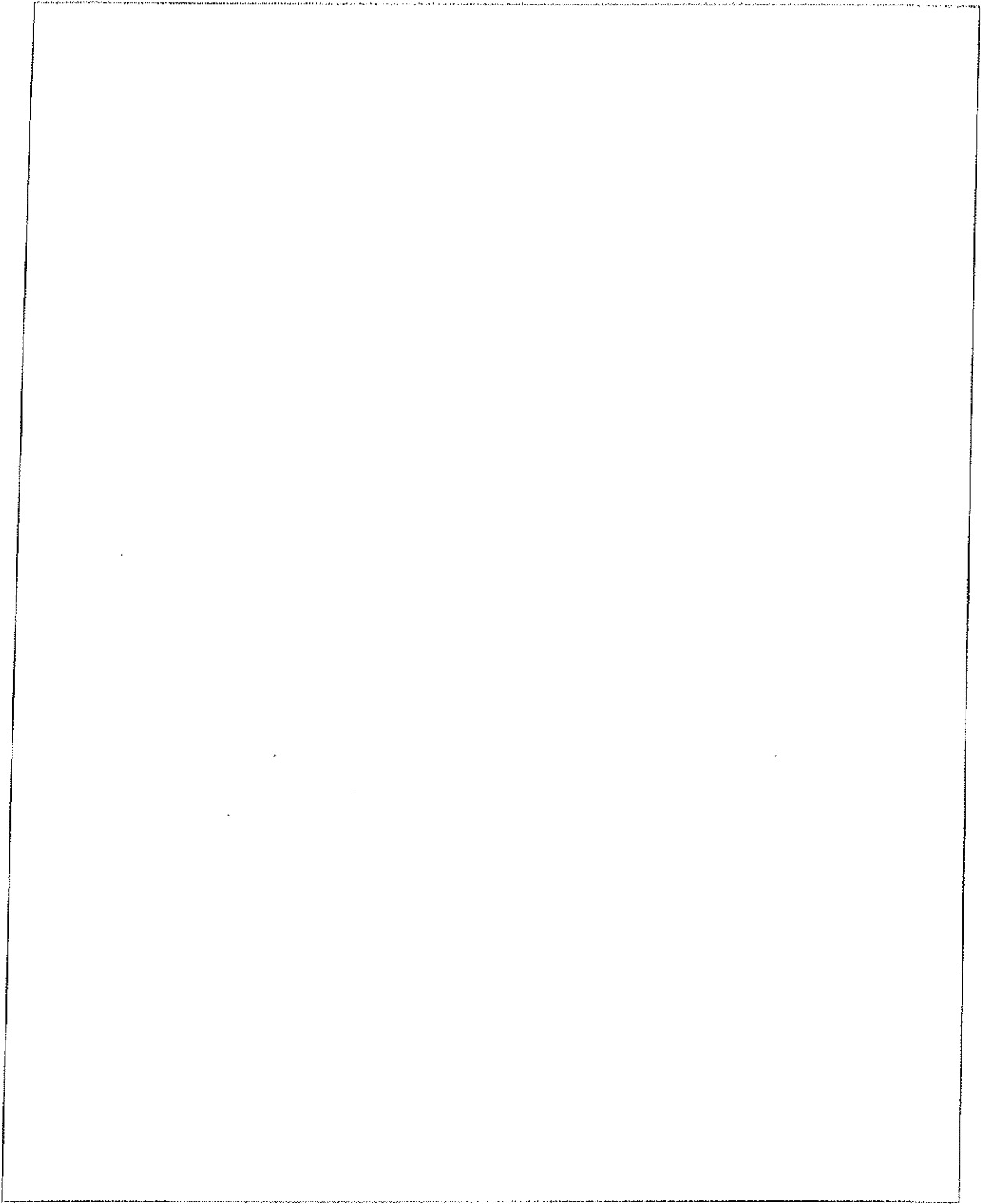
LOCATION & ZONING			
Primary Zoning District:		Overlay (If Applicable):	
Is this a Special District? If yes, is it Clinton, West Chelsea or Hudson Yards?	YES	<input checked="" type="radio"/> NO	N/A
Does the building have a Certificate of Occupancy ("C of O") or a letter of no objection?	YES	NO	N/A
IN PROCESS OF GETTING LETTER OF NO OBJECTION			
Is the 500 Foot Rule or 200 Foot Rule Triggerred? If yes, which? Please attach a diagram of the establishments that triggers the rule.	YES	NO	N/A
Is a Public Assembly permit required?	YES	<input checked="" type="radio"/> NO	N/A
Are your plans filed with DOB?	YES	NO	N/A
Building Type	<input checked="" type="checkbox"/> Residential <input type="checkbox"/> Commercial <input type="checkbox"/> Mixed Use <input type="checkbox"/> Other, describe:		
Adjacent Buildings	<input checked="" type="checkbox"/> Residential <input type="checkbox"/> Commercial <input type="checkbox"/> Mixed Use <input type="checkbox"/> Other, describe:		
NOTIFICATION: What organizations / community groups have you notified regarding your application?	# 1		
	# 2		
	# 3		

**ADDITIONAL INFORMATION: (Applicant Use)**

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

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

- Applicant agrees to submit photos/or plans of kitchen ventilation system prior to 10/1/14 (photos submitted 9/25/14)
- Applicant agrees to submit documentation of soundproofing prior to 10/1/14 (photos submitted 9/25/14)
- Applicants agrees windows and doors will be closed at all times
- Applicant will meet with the 47/48<sup>th</sup> Street Block Association prior to 10/1/14.

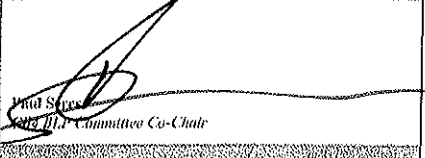


Manhattan Community Board 4 (MCB4) recommends:  Denial unless all agreed to by applicant is part of the method of operation  
 Denial  Approval

**CBI REPRESENTATIVES**

  
Nelly Gonzalez  
CBI Assistant District Manager

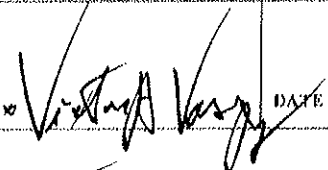
  
Frank Holmquist  
CBI BLP Committee Co-Chair

  
Paul Spina  
CBI BLP Committee Co-Chair

**APPLICANT AGREEMENT WITH THE COMMUNITY**

Pursuant to these stipulations, this applicant agrees to have these provisions incorporated in the method of operation of their liquor license. Additionally, the applicant agrees to the community agreements as the basis for the community supporting this application.

SIGN HERE →

SIGNATURE OF APPLICANT  DATE: 7/25/14

*at least agree, 9-9-14*

Project Name

Client

Address

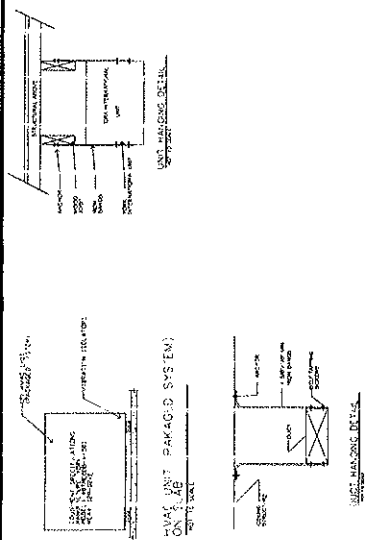
City

State

Zip

526  
WEST 47 STREET  
NEW YORK, NY  
10037

ALTERATION TYPE 3  
RENOVATION OF COMMERCIAL  
BUILDING FOR  
NEW EATING & DRINKING  
ESTABLISHMENT.



**VACUANT CALCULATION**

AREA = 1,400 SQ FT  
 PEOPLE = 55 PERSONS  
 VOLUME = 11,000 CU FT  
 AIR CHANGES = 11.400/11,000 = 1.036  
 INDEX = 307.5/11,000 = 2.795

ACCORDING TABLE 1.2, MIN. MIN. OUTDOOR  
 AIR FLOW RATE = 15 CFM PER PERSON  
 SUPPLY TOTAL = 825 CFM  
 EXHAUST = 1.2 X 825 = 1000

BTU PER SQ FT = 23  
 1,400 X 23 = 32,200 BTU  
 32,200/2000 = 16.1 TON

TOTAL MIN. EFFICIENCY UNIT FURNACE (EAF) = 1.6  
 TON MIN. EFFICIENCY UNIT FURNACE (EAF) = 1.6

**V.C. VENTILATION INDEX**

AREA	VENTILATION INDEX	MIN. INDEX	MAX. INDEX
REST ROOM	133.0	133.0	133.0
TOILET	133.0	133.0	133.0
STAIR	133.0	133.0	133.0
MECHANICAL ROOM	133.0	133.0	133.0

**NOTE:** CALCULATE VENTILATION INDEX FOR EACH ROOM OR ZONE. THE INDEX SHALL BE THE HIGHEST OF THE FOLLOWING:

1. VENTILATION INDEX AS SHOWN IN THIS SCHEDULE.

2. VENTILATION INDEX AS SHOWN IN THE MECHANICAL CODE.

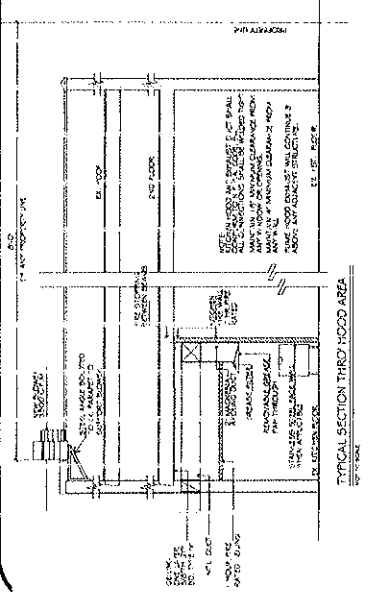
3. VENTILATION INDEX AS SHOWN IN THE MECHANICAL CODE.

4. VENTILATION INDEX AS SHOWN IN THE MECHANICAL CODE.

5. VENTILATION INDEX AS SHOWN IN THE MECHANICAL CODE.

**A/C UNITS SPECIFICATIONS**

UNIT	TYPE	MODEL	TONnage	EFFICIENCY
1	PACKAGED	RTU-100	10.0	13.0
2	PACKAGED	RTU-150	15.0	13.0



**NOTE:** THE FOLLOWING NOTES APPLY TO ALL PACKAGED A/C UNITS:

1. ALL PACKAGED A/C UNITS SHALL BE INSTALLED IN ACCORDANCE WITH THE MANUFACTURER'S INSTALLATION INSTRUCTIONS.
2. ALL PACKAGED A/C UNITS SHALL BE INSTALLED IN ACCORDANCE WITH THE MECHANICAL CODE.
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15. ALL PACKAGED A/C UNITS SHALL BE INSTALLED IN ACCORDANCE WITH THE MECHANICAL CODE.

THIS PLAN IS PREPARED ONLY FOR THE PROJECT AND SITE SHOWN. IT IS NOT TO BE USED FOR ANY OTHER PROJECT OR SITE. THE CONTRACTOR SHALL BE RESPONSIBLE FOR VERIFYING THE ACCURACY OF ALL DIMENSIONS AND CONDITIONS SHOWN ON THIS PLAN. THE CONTRACTOR SHALL BE RESPONSIBLE FOR OBTAINING ALL NECESSARY PERMITS AND APPROVALS FROM THE APPROPRIATE AGENCIES. THE CONTRACTOR SHALL BE RESPONSIBLE FOR OBTAINING ALL NECESSARY MATERIALS AND EQUIPMENT. THE CONTRACTOR SHALL BE RESPONSIBLE FOR THE PROTECTION OF ALL EXISTING UTILITIES AND STRUCTURES. THE CONTRACTOR SHALL BE RESPONSIBLE FOR THE PROTECTION OF ALL EXISTING LANDSCAPE AND PLANTING. THE CONTRACTOR SHALL BE RESPONSIBLE FOR THE PROTECTION OF ALL EXISTING HISTORIC STRUCTURES AND MONUMENTS. THE CONTRACTOR SHALL BE RESPONSIBLE FOR THE PROTECTION OF ALL EXISTING CULTURAL RESOURCES. THE CONTRACTOR SHALL BE RESPONSIBLE FOR THE PROTECTION OF ALL EXISTING ARCHAEOLGICAL REMAINS. THE CONTRACTOR SHALL BE RESPONSIBLE FOR THE PROTECTION OF ALL EXISTING PALEONTOLOGICAL REMAINS. THE CONTRACTOR SHALL BE RESPONSIBLE FOR THE PROTECTION OF ALL EXISTING GEOLOGICAL FORMATIONS. THE CONTRACTOR SHALL BE RESPONSIBLE FOR THE PROTECTION OF ALL EXISTING SOILS AND ROCKS. THE CONTRACTOR SHALL BE RESPONSIBLE FOR THE PROTECTION OF ALL EXISTING WATER RESOURCES. THE CONTRACTOR SHALL BE RESPONSIBLE FOR THE PROTECTION OF ALL EXISTING AIR RESOURCES. THE CONTRACTOR SHALL BE RESPONSIBLE FOR THE PROTECTION OF ALL EXISTING CLIMATE RESOURCES. THE CONTRACTOR SHALL BE RESPONSIBLE FOR THE PROTECTION OF ALL EXISTING BIODIVERSITY. THE CONTRACTOR SHALL BE RESPONSIBLE FOR THE PROTECTION OF ALL EXISTING ECOSYSTEMS. THE CONTRACTOR SHALL BE RESPONSIBLE FOR THE PROTECTION OF ALL EXISTING CULTURAL HERITAGE. THE CONTRACTOR SHALL BE RESPONSIBLE FOR THE PROTECTION OF ALL EXISTING HISTORIC LANDSCAPE. THE CONTRACTOR SHALL BE RESPONSIBLE FOR THE PROTECTION OF ALL EXISTING HISTORIC ARCHITECTURE. 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