

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

Liquor License Stipulations Application

<b>APPLICANT</b> Aramark Educational Services LLC & The General Theological Seminary of the Episcopal Church		<b>DOING BUSINESS AS (DBA)</b>		
<b>STREET ADDRESS</b> 180 Tenth Avenue		<b>CROSS STREETS</b> 20th & 21st Streets		
<b>OWNER</b>	<b>NAME:</b> The General Theological Seminary of the Episcopal Church	<b>ATTORNEY</b>	<b>NAME:</b> Donald M. Bernstein, Esq.	
	<b>PHONE:</b> 212-243-5150		<b>PHONE:</b> 212-486-6000	
	<b>FAX:</b>		<b>FAX:</b> 212-486-8668	
<b>MANAGER</b>	<b>NAME:</b> Aramark Educational Services LLC	<b>LANDLORD</b>	<b>NAME:</b> N/A -- The General Theological Seminary of the Episcopal Church is fee owner	
	<b>PHONE:</b> 212-243-5150		<b>PHONE:</b> 212-243-5150	
	<b>FAX:</b>		<b>FAX:</b>	
<b>DESCRIPTION OF BUSINESS</b>				
<b>Establishment Type:</b>	<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 type="radio"/> Restaurant <input checked="" type="radio"/> Catering Establishment <input type="radio"/> Club (Fraternal Organization - Members Only) <input type="radio"/> Other (Explain): _____			
<b>Method of Operation:</b>	<input 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 checked="" type="radio"/> Other (Explain): <u>Catering Establishment</u>			
<b>License Type:</b>	<input checked="" type="radio"/> On-Premise <input type="radio"/> Wine <input type="radio"/> Beer <input type="radio"/> Wine & Beer			
<b>APPLICATION TYPE</b> (check one)	<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 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"/> <b>Transfer</b>	What is the prior license #?		
		What is the expiration date on the prior license?		
		Are you making any alterations or operational changes?	<b>YES</b>	<b>NO</b>
		<i>If alterations or operational changes are being made, please attach the plans to this form.</i>		
	<input checked="" type="radio"/> <b>Alteration</b>	What is the current license #?	1196144	
		What is the expiration date on the current license?	08/31/2013	
Please describe the nature of the alterations and attach the plans removing the hotel property from the licensed premises				

OPERATIONAL ISSUES									
HOURS		MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY	
	Operation	Varies. Is a conference center with a Catering Establishment license.							
	Music	Not opened to the public, so there are no set hours.							
	Kitchen								
OCCUPANCY	INDOOR				BAR			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
	296	will vary by event	35-37	389	0	0	N/A	N/A	N/A
How many floors are there? What is the capacity for each floor? (please respond in space provided)					1-2	3-4	5+	1-5	
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	No	
Will applicant have bottle service?					YES	NO	N/A	No	
Will you be hosting private parties and promotional events?					YES	NO	N/A	Yes	
Will outside promoters be used?					YES	NO	N/A	No	
Will the security plan submitted be implemented?					YES	NO	N/A	N/A	
Will State certified security personnel be used?					YES	NO	N/A	Yes	
Will New York Nightlife Association recommendations and NYPD Best Practices be followed?					YES	NO	N/A	No	
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	No	
Will the applicant be applying for a Sidewalk Café now or in the future? (please respond in space provided)					YES	NO	N/A	No	
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	N/A	
Will applicant provide contact information to neighbors and respond to complaints that arise?					YES	NO	N/A	Yes	
Will you inform the Community Board office of your job openings and/or provide a hyperlink to your jobs webpage?					YES	NO	N/A	Yes	
If you plan to have music, what type(s)?			BACKGROUND	LIVE MUSIC	DJ	Background music			
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	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	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	N/A	

OUTDOOR ITEMS				
Will applicant use the rooftop, rear yard or any outdoor space?	YES	NO	N/A	No
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	N/A	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	N/A	N/A
The rear yard, rooftop, and any other outdoor space will not allow standing space for patrons to drink or smoke.	YES	NO	N/A	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	N/A	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	N/A	N/A
Applicant will have a lighting plan that will allow safe usage of the outdoor space without disrupting neighbors?	YES	NO	N/A	N/A

LOCATION & ZONING				
Primary Zoning District:	C2-5	Overlay (If Applicable):	7RB	
Is this a Special District? If yes, is it Clinton, West Chelsea or Hudson Yards?	YES	NO	N/A	unknown
Does the building have a Certificate of Occupancy ("C of O") or a letter of no objection?	YES	NO	N/A	Yes
Is the 500 Foot Rule or 200 Foot Rule Triggered? If yes, which? Please attach a diagram of the establishments that triggers the rule.	YES	NO	N/A	N/A -- Alteration Application
Is a Public Assembly permit required?	YES	NO	N/A	
Are your plans filed with DOB?	YES	NO	N/A	
Building Type	<input type="radio"/> Residential <input type="radio"/> Commercial <input type="radio"/> Mixed Use <input checked="" type="radio"/> Other, describe: <u>Conference Center</u>			
Adjacent Buildings	<input type="radio"/> Residential <input checked="" type="radio"/> Commercial <input type="radio"/> Mixed Use <input type="radio"/> Other, describe: _____			
NOTIFICATION: What organizations / community groups have you notified regarding your application?	# 1			
	# 2			
	# 3			

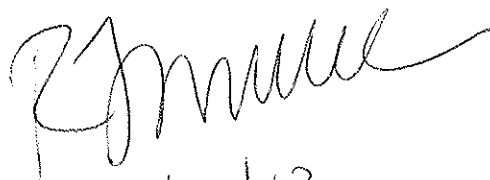
ADDITIONAL INFORMATION: (Applicant Use)

ADDITIONAL NOTES: (Office Use Only)

license just for conference center and  
catering facility.

- alteration to remove space  
from hotel license.

- No other change to method of  
operation.



2/12/13

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

[Empty box for additional stipulations]

Manhattan Community Board 4 (MCB4) recommends:

Approval  Denial unless all agreed to by applicant is part of the method of operation  Denial

**CB4 REPRESENTATIVES**

  
Nelly Gonzalez  
CB4 Community Associate

  
Lisa Daglian  
CB4 BLP Committee Co-Chair

  
Paul Seres  
CB4 BLP Committee Co-Chair

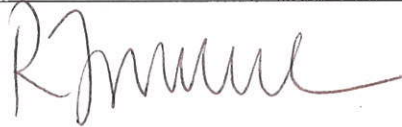
**APPLICANT AGREEMENT WITH THE COMMUNITY**

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



2/12/13

## SAMPLE MENU

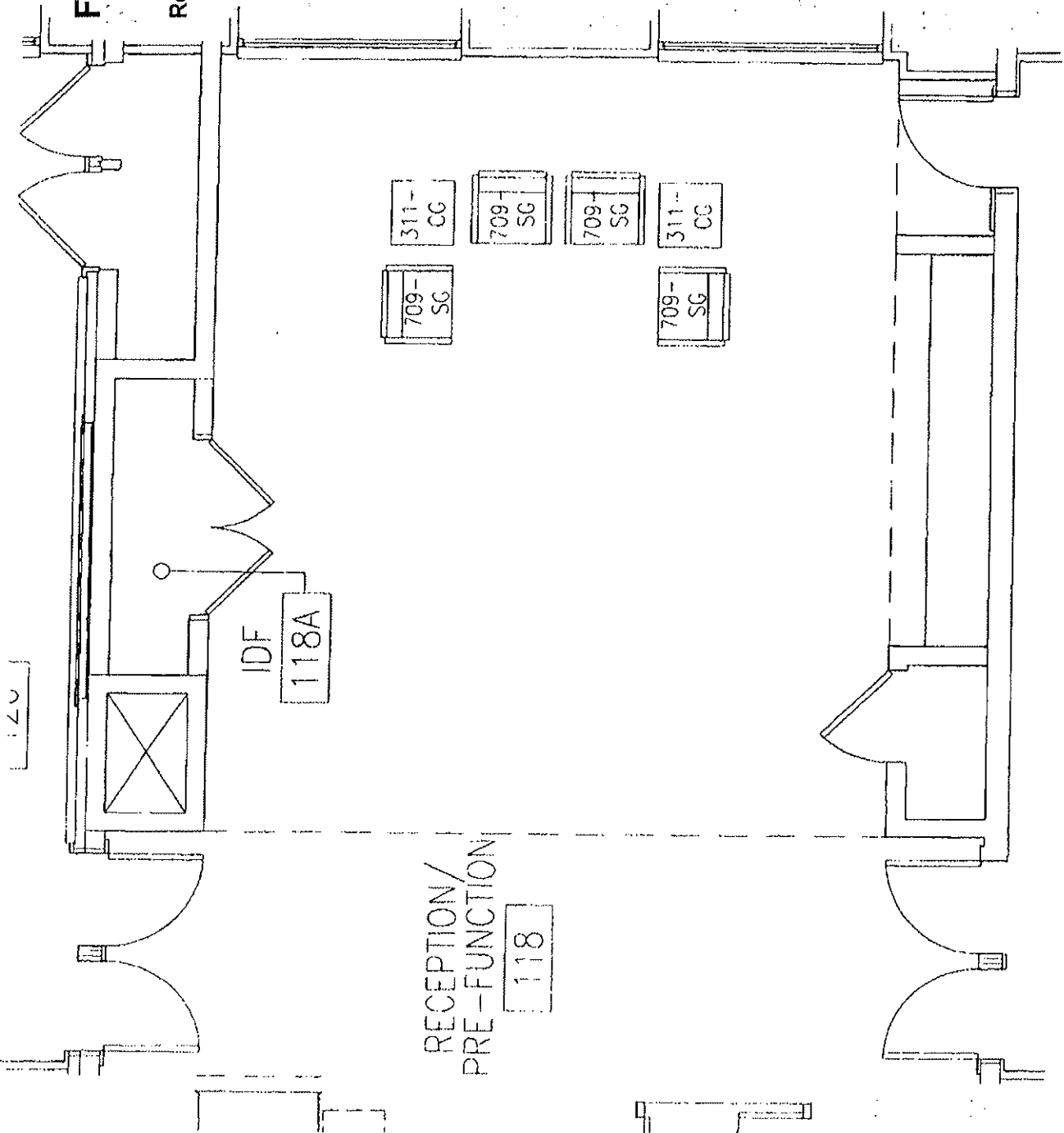
## FLOOR PLANS





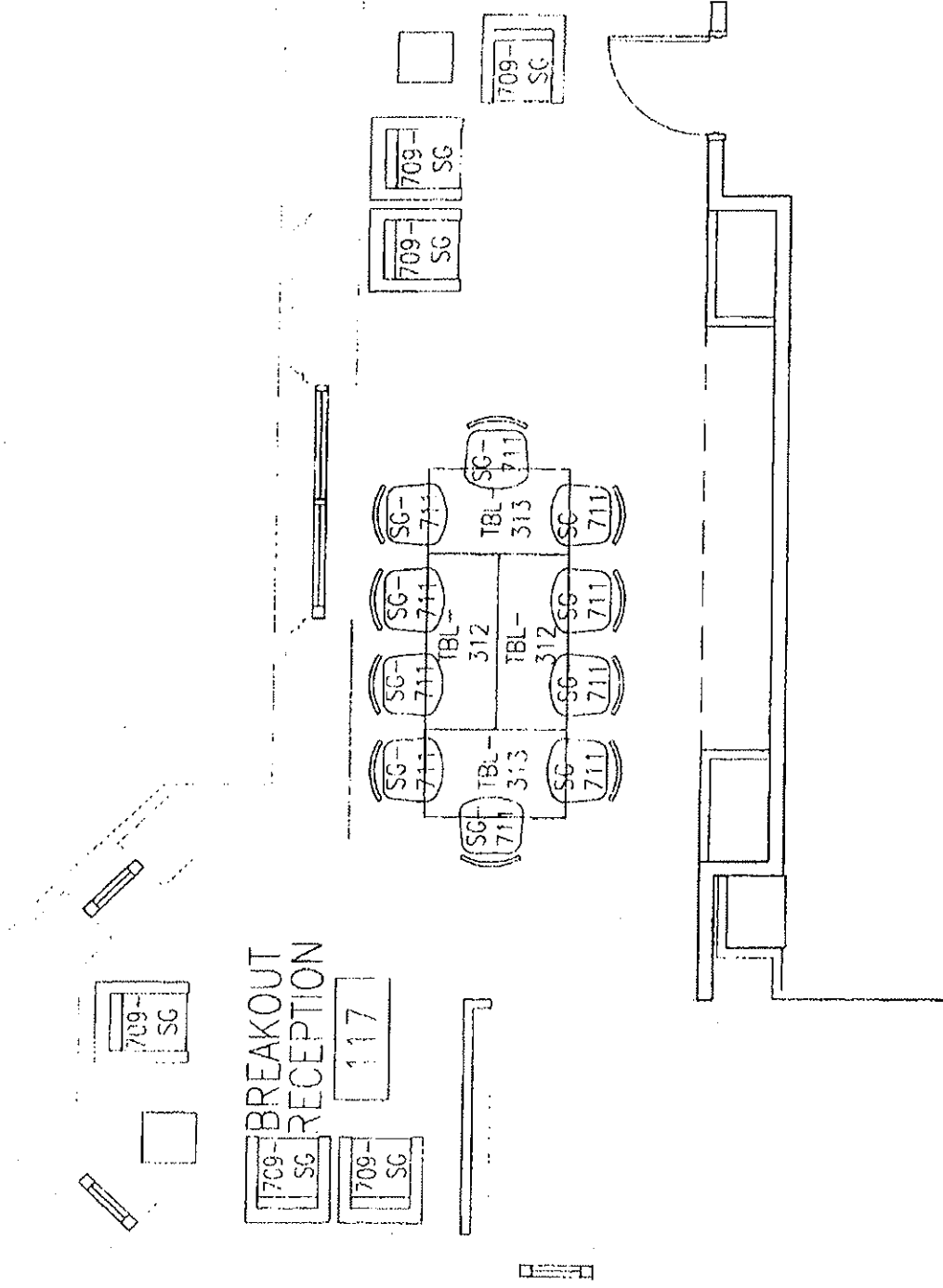
FIRST FLOOR

Reception/Pre-Function

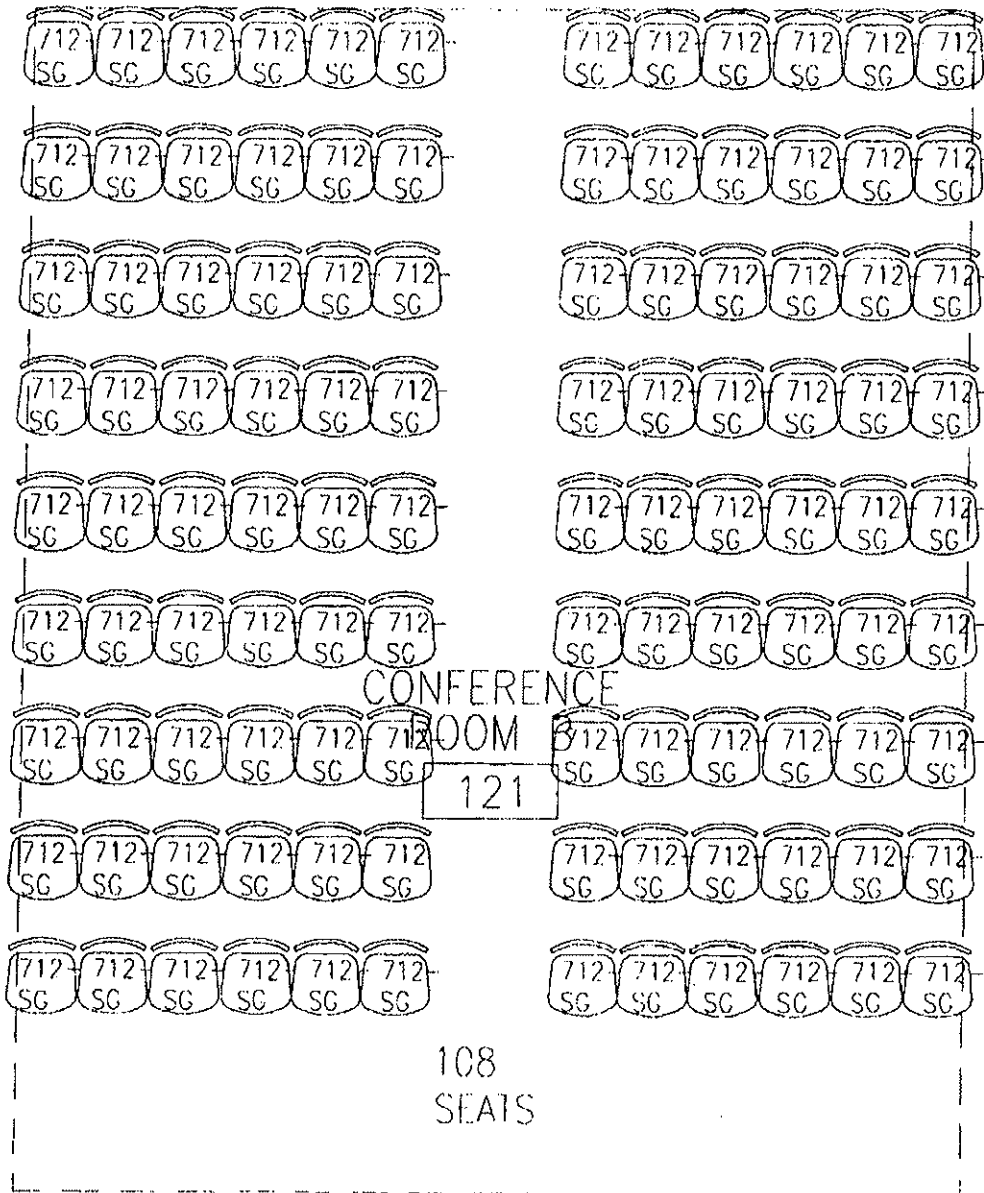


# FIRST FLOOR

## Breakout/Conference Room/Reception Room



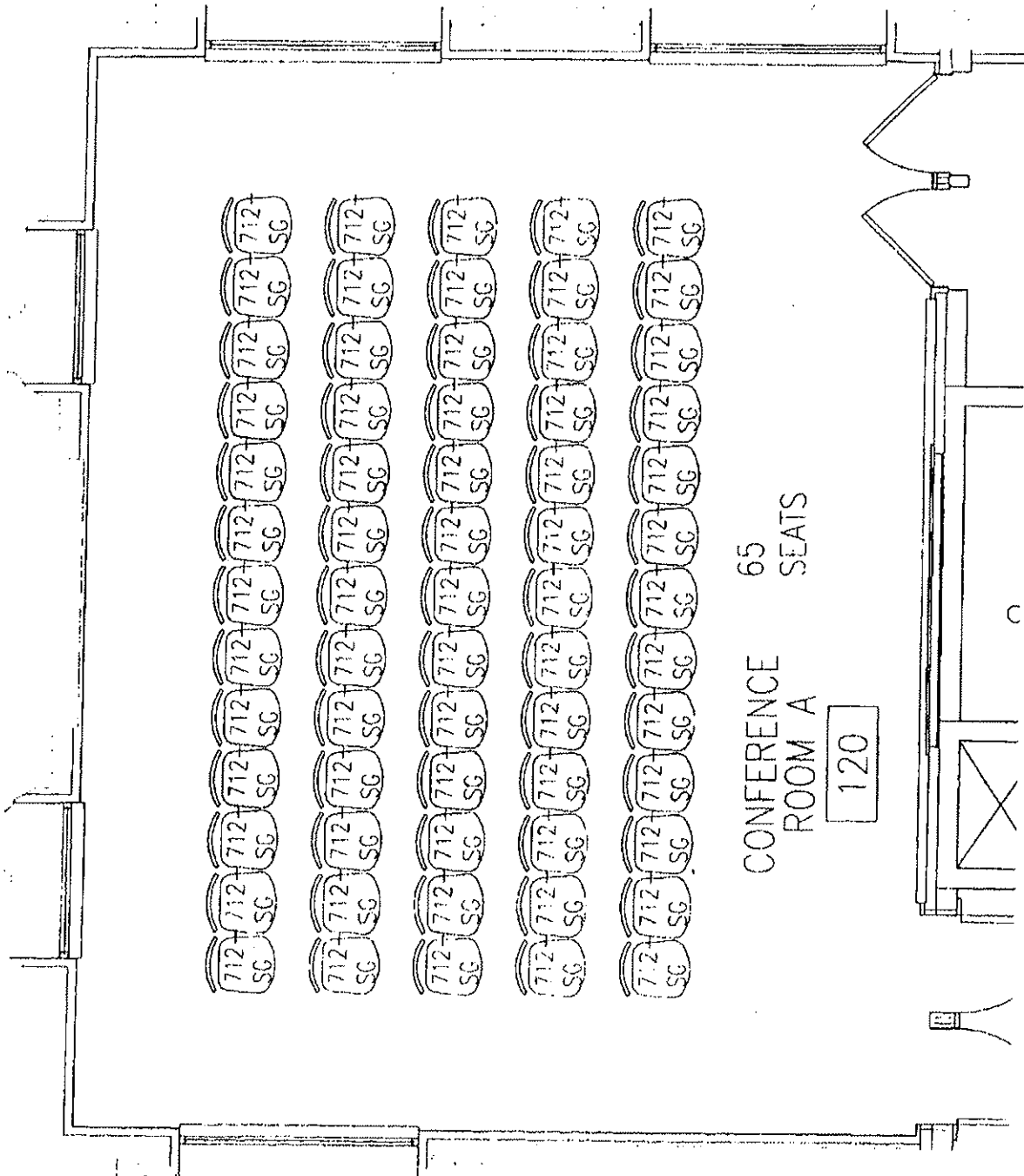
**FIRST FLOOR** Conference Room B



108  
SEATS

**FIRST FLOOR**

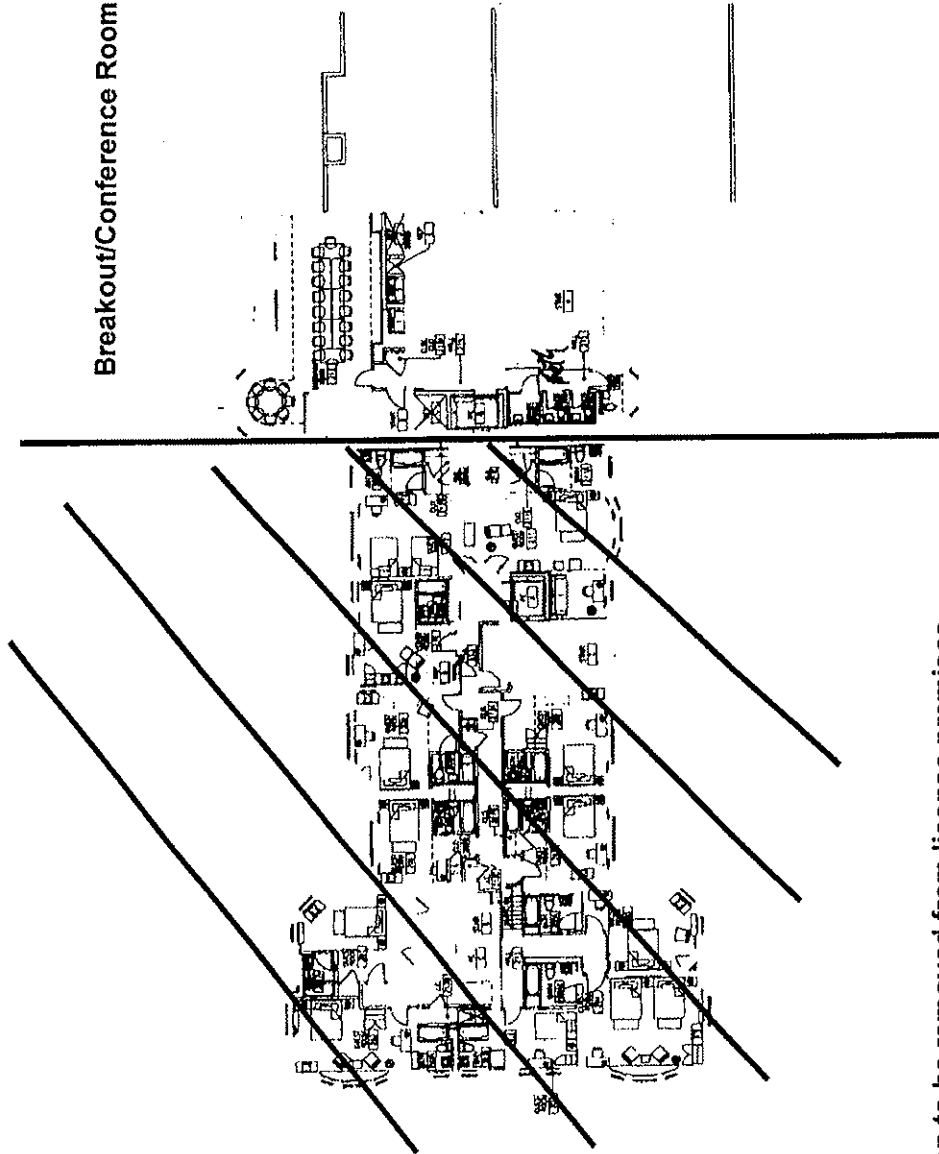
**Conference Room A**



CONFERENCE ROOM A  
65 SEATS

120

# SECOND FLOOR



Portion to be removed from license premises

Client: Thompson, James  
Discipline: Architecture  
Project Name: Education Center  
Address: 1234 Main St, Suite 100  
City: Anytown, State 12345

**Project Name**  
**Project No.**  
**Scale**  
**Date**  
**Author**  
**Checker**  
**Appr.**  
**Notes**

**Legend**

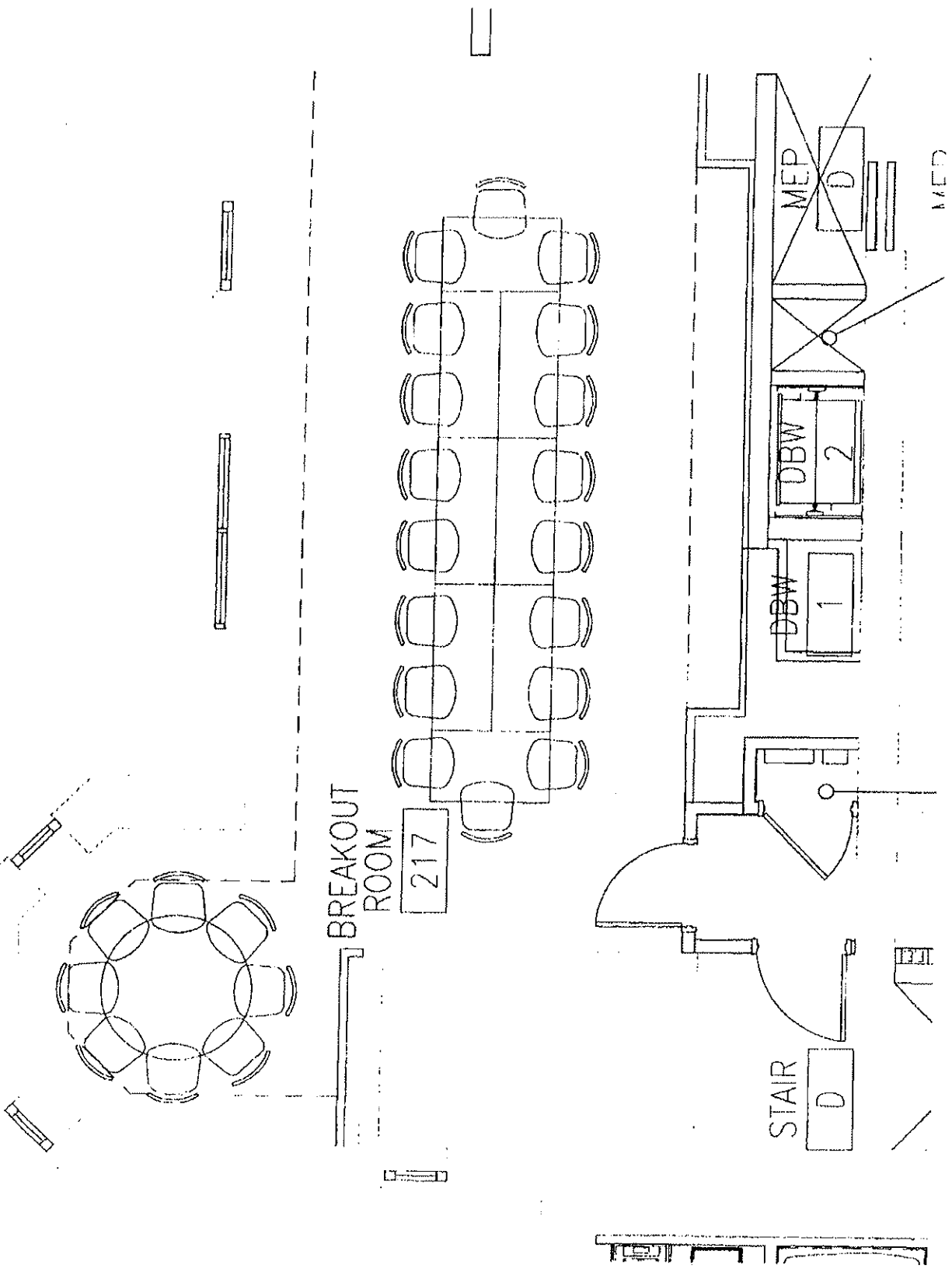
**Room Schedule**

**Section**

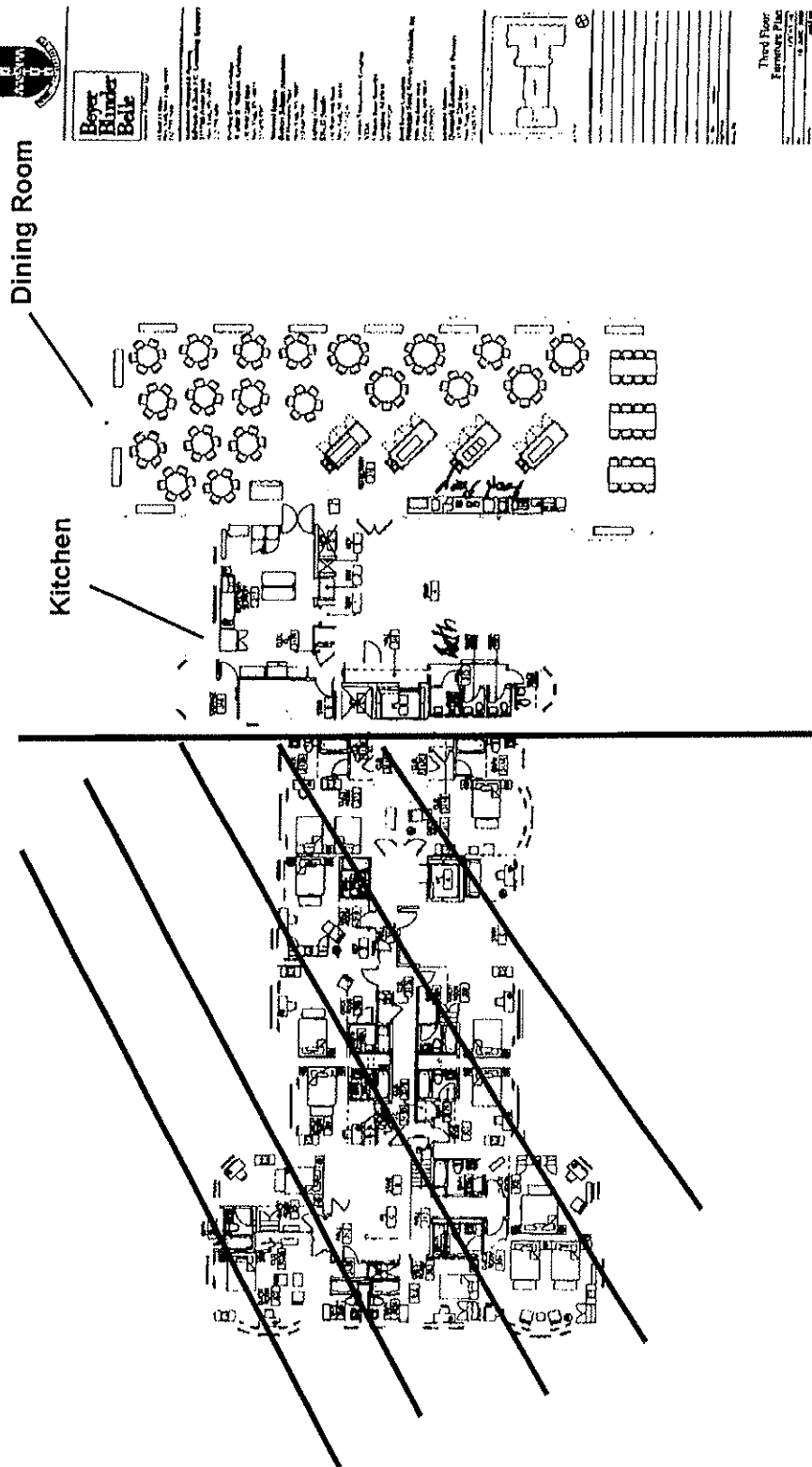
**Second Floor Furniture Plan**  
Date: 10/10/2012  
Scale: 1/8" = 1'-0"

**A8.02**

**SECOND FLOOR** Breakout/Conference Room



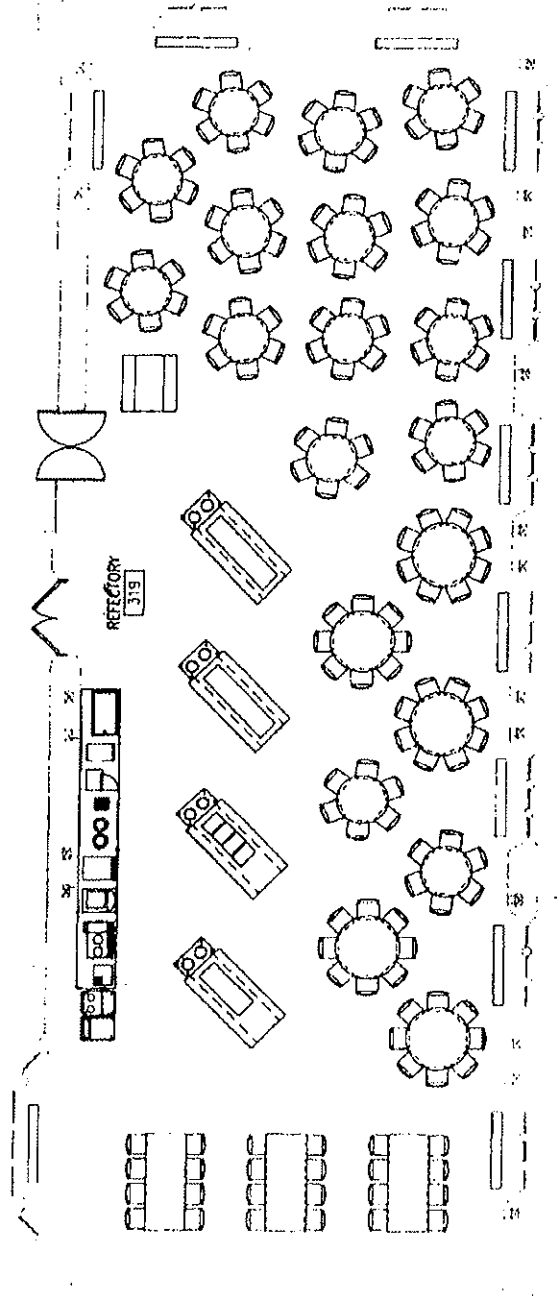
# THIRD FLOOR



Portion to be removed from licensed premises

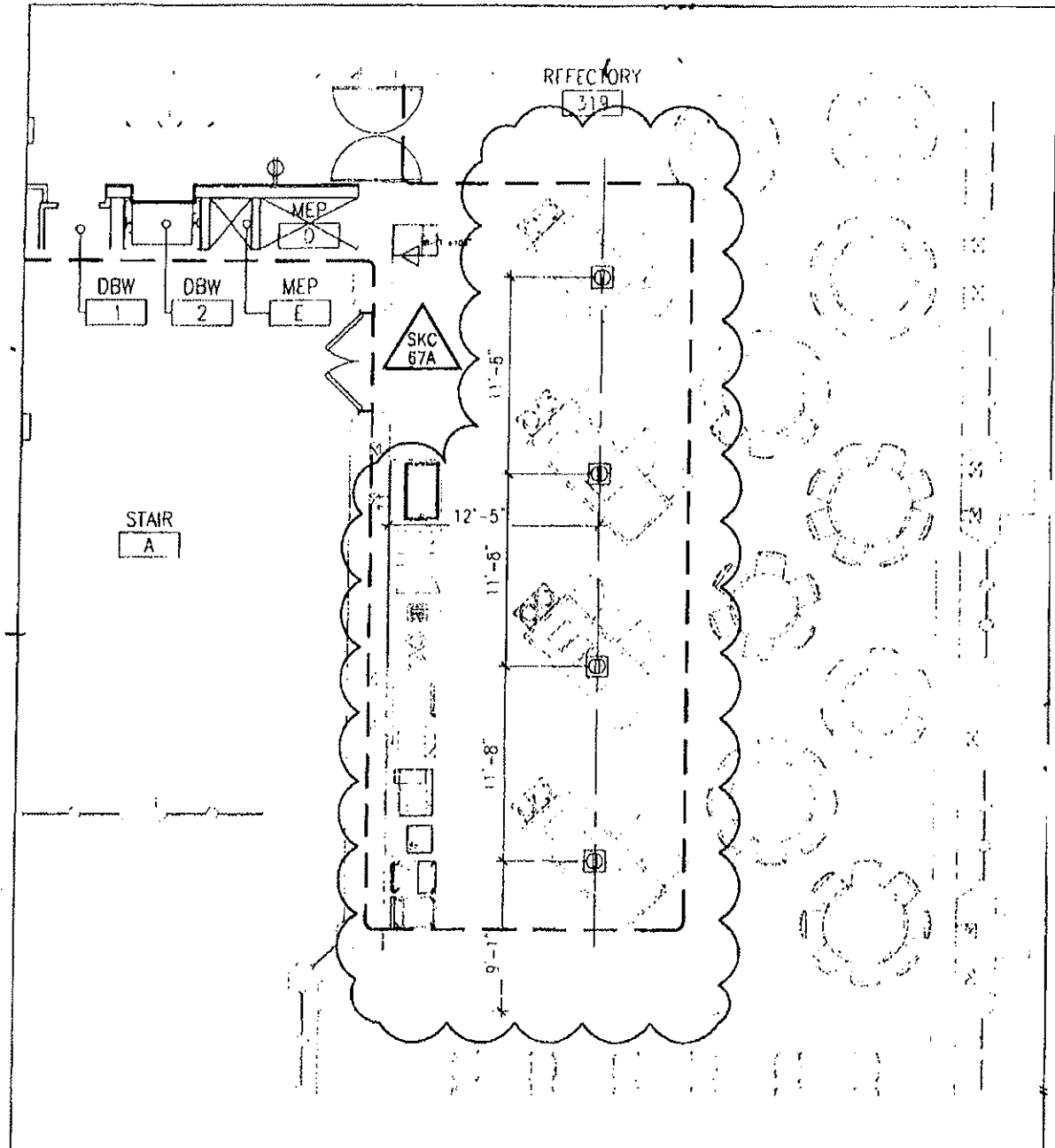


# THIRD FLOOR Dining Room Optional Set-up



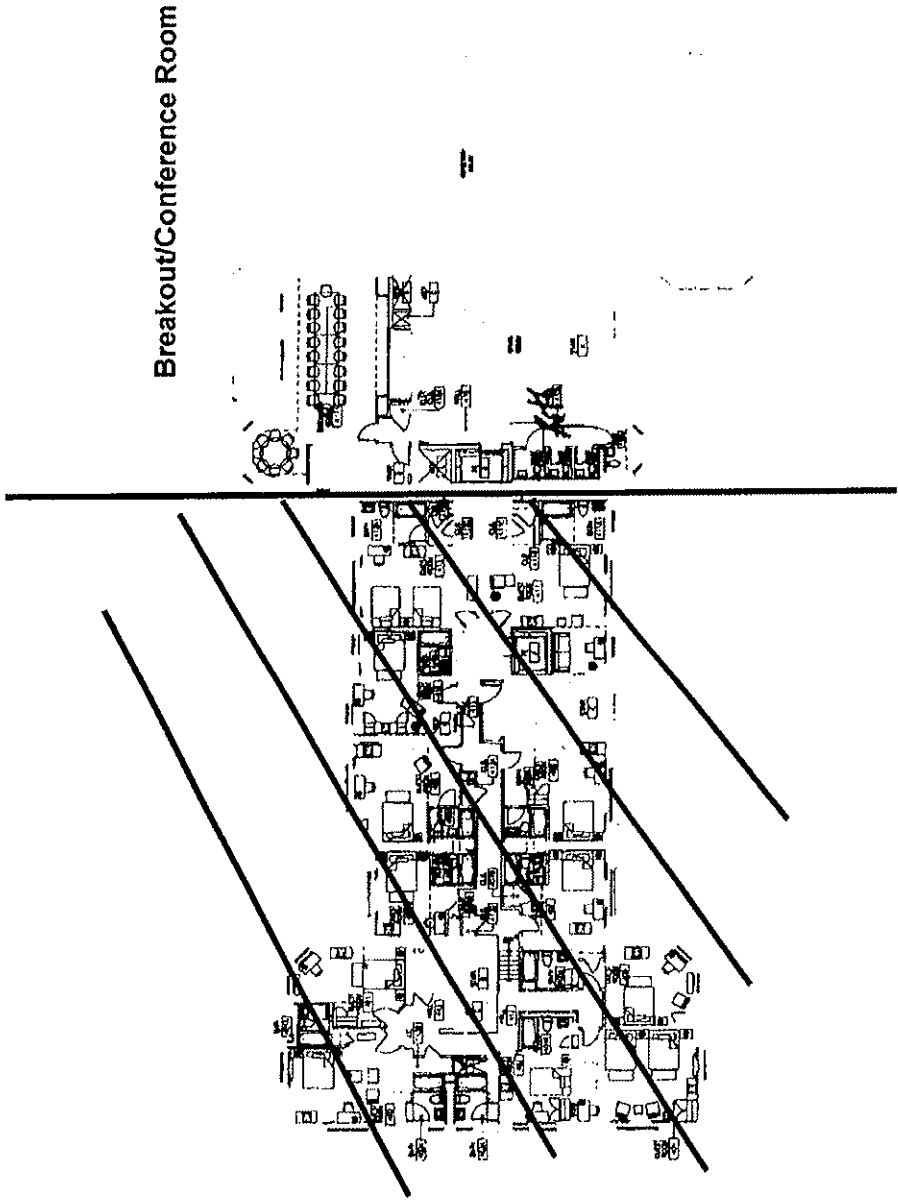
OPTION 4	90 PERSONS
15 4'-0" TABLE 6 SEATING	40 PERSONS
5 5'-0" TABLE 8 SEATING	40 PERSONS
3 EXISTING TABLE 8 SEATS	154 PERSONS
TOTAL	

**THIRD FLOOR** Dining Hall Optional Set-up




RECEPTACLES LOCATION (RFI 252)	<b>Beyer Blinder Belle Architects &amp; Planners LLP</b> 41 East 11th Street, New York, NY 10003				
	Author: BBB	Date: 1857.00			
HOFFMAN REFECTORY	X	ED CENTER A9.03	Date: 02.13.07		
		Scale: 1/8" = 1'-0"	MY	SKC- 67A	

# FOURTH FLOOR



City of New York  
Department of Buildings  
Division of Design & Construction  
100 Nassau Street, 10th Floor  
New York, NY 10038



**Project:** **Reynolds Building**  
**Address:** 100 Nassau Street  
**City:** New York, NY  
**County:** New York  
**Block:** 100  
**Lot:** 100  
**Room:** 400  
**Room Type:** Office  
**Room Use:** Office  
**Room Area:** 10,000 sq. ft.  
**Room Volume:** 100,000 cu. ft.  
**Room Height:** 10 ft.  
**Room Depth:** 10 ft.  
**Room Width:** 10 ft.  
**Room Length:** 10 ft.  
**Room Orientation:** North  
**Room Orientation:** South  
**Room Orientation:** East  
**Room Orientation:** West  
**Room Orientation:** Other

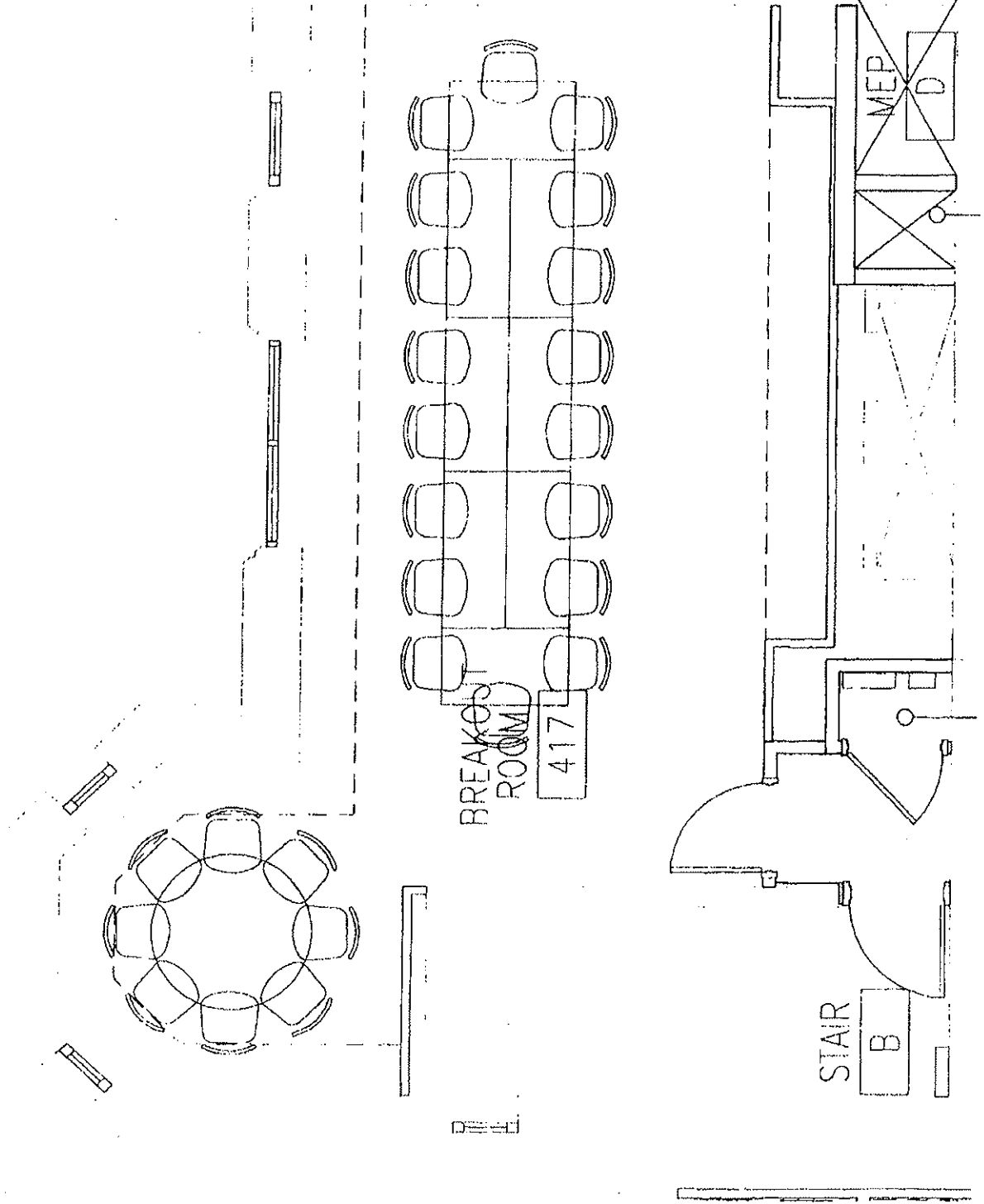


Room No.	Room Name	Room Area	Room Volume	Room Height	Room Depth	Room Width	Room Length	Room Orientation
400	Office	10,000	100,000	10	10	10	10	North

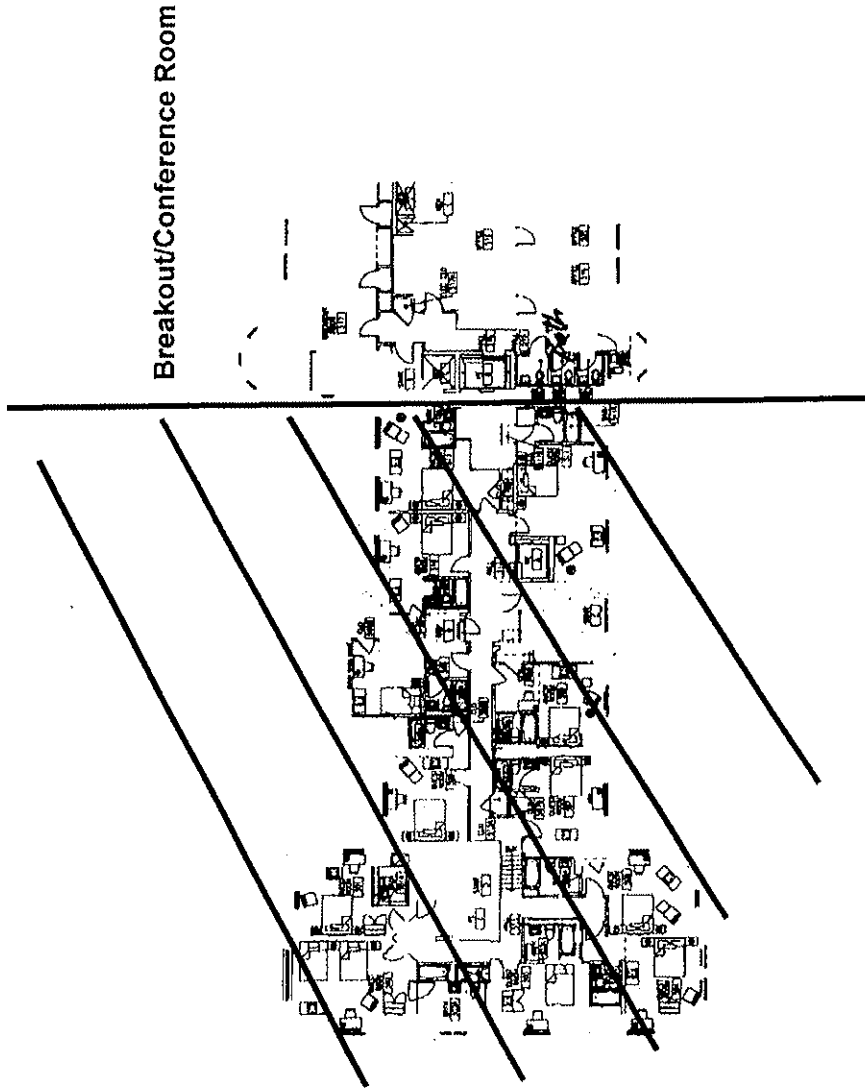
Fourth Floor  
Furniture Plan  
A8.04

Portion to be removed from licensed premises

**FOURTH FLOOR Breakout/Conference Room**



# FIFTH FLOOR



Portion to be removed from licensed premises

**Boyer, Rincker & Balle**  
Architects  
1000 North 10th Street  
Fargo, ND 58102  
701.785.1111

**ANSI Z39-18**  
Permanence of Paper  
Approved by the American National Standards Institute

**Fifth Floor Furniture Plan**  
Date: 10/1/11  
Scale: 1/8" = 1'-0"

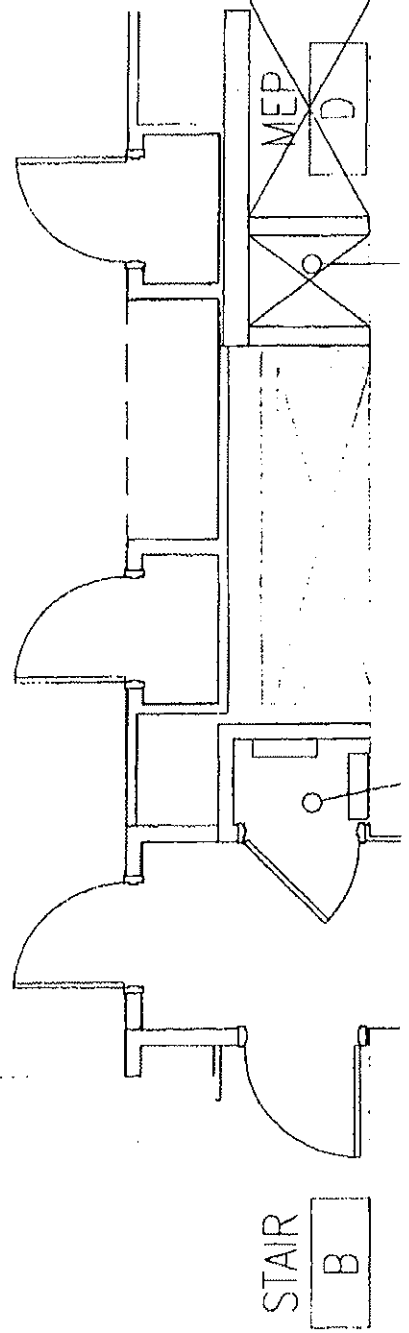
**A8.05**

**FIFTH FLOOR Breakout/Conference Room**



BREAKOUT  
ROOM

517



STAIR  
B

MEP  
D

J/LTF

CERTIFICATE OF OCCUPANCY



# Certificate of Occupancy

**CO Number: 104043483T005**

This certifies that the premises described herein conforms substantially to the approved plans and specifications and to the requirements of all applicable laws, rules and regulations for the uses and occupancies specified. No change of use or occupancy shall be made unless a new Certificate of Occupancy is issued. *This document or a copy shall be available for inspection at the building at all reasonable times.*

<b>A.</b>	<b>Borough:</b> Manhattan	<b>Block Number:</b> 00718	<b>Certificate Type:</b> Temporary
	<b>Address:</b> 171 NINTH AVENUE	<b>Lot Number(s):</b> 1	<b>Effective Date:</b> 11/10/2012
	<b>Building Identification Number (BIN):</b> 1083573	<b>Building Type:</b> Altered	<b>Expiration Date:</b> 02/08/2013
<i>For zoning lot metes &amp; bounds, please see BISWeb.</i>			
<b>B.</b>	<b>Construction classification:</b> 2-C		
	<b>Building Occupancy Group classification:</b> J-1		
	<b>Multiple Dwelling Law Classification:</b> OL		
	<b>No. of stories:</b> 6	<b>Height in feet:</b> 73	<b>No. of dwelling units:</b> 0
<b>C.</b>	<b>Fire Protection Equipment:</b> Standpipe system, Fire alarm system, Sprinkler system		
<b>D.</b>	<b>Type and number of open spaces:</b> None associated with this filing.		
<b>E.</b>	<b>This Certificate is issued with the following legal limitations:</b> None		
<b>Outstanding requirements for obtaining Final Certificate of Occupancy:</b>			
There are 16 outstanding requirements. Please refer to BISWeb for further detail.			
<b>Borough Comments:</b> None			

Borough Commissioner

Commissioner





# Certificate of Occupancy

CO Number: 104043483T005

Permissible Use and Occupancy						
All Building Code occupancy group designations are 1968 designations, except RES, COM, or PUB which are 1938 Building Code occupancy group designations.						
Floor From To	Maximum persons permitted	Live load lbs per sq. ft.	Building Code occupancy group	Dwelling or Rooming Units	Zoning use group	Description of use
CEL		OG	D-2			MECHANICAL ROOM
BAS	3	40	J-1		5	ACCESSORY OFFICES
BAS	6		J-1		5	THREE (3) GUEST ROOMS
BAS			D-2			MECHANICAL ROOM
BAS	6		J-1		4	KITCHEN
BAS	1		J-1		4	ACCESSORY OFFICES
001	70	40	J-1		5	NINE (9) GUEST ROOMS
001	74	130	F-1B		4	CONFERENCE ROOM B
001	69		E		4	CONFERENCE ROOM A
002	30	40	F-1B		4	BREAK OUT ROOM
002			J-1		5	TWELVE (12) GUEST ROOMS
003	5	40	F-4		4	ACC SERVERY
003			J-1		5	TWELVE (12) GUEST ROOMS

Borough Commissioner

Commissioner

DOCUMENT CONTINUES ON NEXT PAGE



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Permissible Use and Occupancy						
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Floor From To	Maximum persons permitted	Live load lbs per sq. ft.	Building Code occupancy group	Dwelling or Rooming Units	Zoning use group	Description of use
003	74		F-4		4	REFECTORY
004		40	J-1		5	TWELVE (12) GUEST ROOM
004	29		F-1B		4	BREAK OUT ROOM
005	7	40	E		4	OFFICES
005			J-1		5	TWELVE (12) GUEST ROOMS
005	20		F-1B		4	BREAK OUT ROOM
RO						
F						
PEN			J-1		4	ATTIC (UNOCCUPIED)
THIS BUILDING COMPLIES WITH SECTION 67 OF THE MULTIPLE DWELLING LAW						
END OF SECTION						

Borough Commissioner

Commissioner

END OF DOCUMENT