



CITY OF NEW YORK

**MANHATTAN COMMUNITY BOARD FOUR**

330 West 42<sup>nd</sup> Street, 26<sup>th</sup> floor New York, NY 10036  
tel: 212-736-4536 fax: 212-947-9512  
www.nyc.gov/mcb4

**COREY JOHNSON**  
Chair

**ROBERT J. BENFATTO, JR., ESQ.**  
District Manager

June 5, 2013

Dennis Rosen  
Chairman  
New York State Liquor Authority  
80 S. Swan Street, 9<sup>th</sup> Floor  
Albany, New York 12210

**Re: 505 Event Spaces Inc.  
d/b/a Pillars 37  
517 W. 37<sup>th</sup> Street**

Dear Chairman Rosen:

Manhattan Community Board 4 (MCB4) recommends denial of transfer restaurant license for 505 Event Spaces Inc. d/b/a Pillars 38 – 517 W. 37<sup>th</sup> Street unless the following stipulation, agreed to by the applicant, is part of the method of operation for this establishment with a capacity of 200, with varying numbers of tables and seats, two service bars and varying number of tables and seats outside within building property line.

A signed copy of the questionnaire, stipulations and community agreements are enclosed.

Sincerely,

Corey Johnson  
Chair

[signed 06/05/13]  
Paul Seres  
Co-Chair  
Business License &  
Permits Committee

[signed 06/05/13]  
Lisa Daglian  
Co-Chair  
Business License &  
Permits Committee

<b>APPLICANT</b> 505 Event Spaces Inc.		<b>DOING BUSINESS AS (DBA)</b> Pillars 37		
<b>STREET ADDRESS</b> 517 W. 37th St., New York, NY 10018		<b>CROSS STREETS</b> 10th and 11th Avenues		
<b>OWNER</b>	<b>NAME:</b> James Brady	<b>ATTORNEY</b>	<b>NAME:</b> John Springer (REP)	
	<b>PHONE:</b> 201-923-5511		<b>PHONE:</b> 631-331-3334	
	<b>FAX:</b>		<b>FAX:</b> 631-880-7101	
<b>MANAGER</b>	<b>NAME:</b> James Brady	<b>LANDLORD</b>	<b>NAME:</b> 505 W. 37th LLC	
	<b>PHONE:</b> 201-923-5511		<b>PHONE:</b> 877-505-3737	
	<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>Special events space / private bookings</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 checked="" 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?	statement attachment as exhibit A	
		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>
		if alterations or operational changes are being made, please attach the plans to this form.		
	<input type="radio"/> <b>Alteration</b>	What is the current license #?		
		What is the expiration date on the current license?		
Please describe the nature of the alterations and attach the plans				

## OPERATIONAL ISSUES

		MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY
<b>HOURS</b>	<b>Operation</b>	6 p- 4a	6 p- 4a	6 p- 4a	6 p- 4a	6 p- 4a	6 p- 4a	6 p- 4a
	<b>Music</b>	varies by event	varies	varies	varies	varies	varies	varies
	<b>Kitchen</b>	varies by event	varies	varies	varies	varies	varies	varies

<b>OCCUPANCY</b>	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
	pending	200	varies	varies	2	0	0	varies	varies

How many floors are there? What is the capacity for each floor? (please respond in space provided)	1-2	3-4	5+	1st floor only
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 cabaret permit will be sought, but there will be small-scale patron dancing not subject to special permit (i.e. weddings, bar/bat mitzvahs)
Will applicant have bottle service?	YES	NO	N/A	No
Will you be hosting private parties and promotional events?	YES	NO	N/A	Private parties only
Will outside promoters be used?	YES	NO	N/A	No
Will the security plan submitted be implemented?	YES	NO	N/A	Yes
Will State certified security personnel be used?	YES	NO	N/A	No
Will New York Nightlife Association recommendations and NYPD Best Practices be followed?	YES	NO	N/A	Yes
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)?	<b>BACKGROUND</b>	<b>LIVE MUSIC</b>	<b>DJ</b>	Background & DJ
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## 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	Yes
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	If necessary, yes
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	yes

OUTDOOR ITEMS				
Will applicant use the rooftop, rear yard or any outdoor space?	YES	NO	N/A	yes, courtyard
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	We'll discuss BLP on 5/14
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	This will be discussed with BLP.
The rear yard, rooftop, and any other outdoor space will not allow standing space for patrons to drink or smoke.	YES	NO	N/A	This will be discussed with BLP.
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	Yes
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	Yes.
Applicant will have a lighting plan that will allow safe usage of the outdoor space without disrupting neighbors?	YES	NO	N/A	Yes

LOCATION & ZONING				
Primary Zoning District:	Com Use Group 6	Overlay (If Applicable):		
Is this a Special District? If yes, is it Clinton, West Chelsea or Hudson Yards?	YES	NO	N/A	No
Does the building have a Certificate of Occupancy ("C of O") or a letter of no objection?	YES	NO	N/A	pending
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	yes, list and map attached
Is a Public Assembly permit required?	YES	NO	N/A	Yes
Are your plans filed with DOB?	YES	NO	N/A	Yes
Building Type	<input type="radio"/> Residential <input checked="" type="radio"/> Commercial <input type="radio"/> Mixed Use <input type="radio"/> Other, describe: _____			
Adjacent Buildings	<input type="radio"/> Residential <input type="radio"/> Commercial <input checked="" type="radio"/> Mixed Use <input type="radio"/> Other, describe: _____			
NOTIFICATION: What organizations / community groups have you notified regarding your application?	# 1	Manhattan Community Board 4		
	# 2			
	# 3			

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

# PILLARS

517 WEST 37TH STREET

717.241.1400 WWW.PILLARS7.COM

BY APPOINTMENT ONLY





CITY OF NEW YORK  
 MANHATTAN COMMUNITY BOARD NO. 2  
 110 West Street, 20th Floor, New York, NY 10038  
 Tel: 212-312-4500 Fax: 212-312-4512  
 www.nyc.gov/m20

City of New York  
 Department of Social Services  
 110 West Street, 20th Floor  
 New York, NY 10038

**PUBLIC NOTICE**

Business Licenses and Permits Commission  
 will discuss an application submitted by

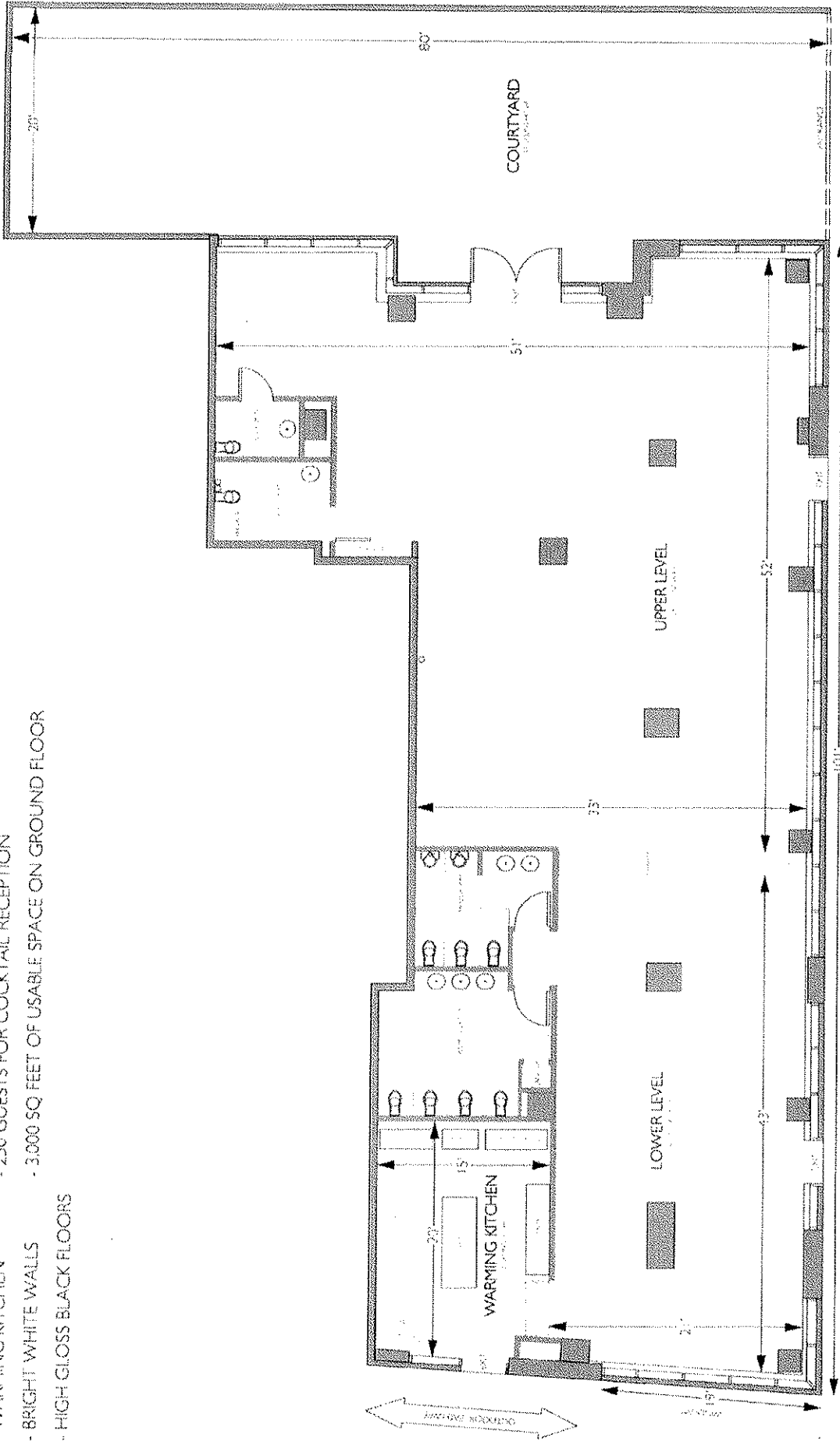
**505 Event Spaces Inc.  
 d/b/a Pillars 37  
 517 W 37<sup>th</sup> Street**

An application for an  
 On-Premise Liquor License

**DATE:** Tuesday, May 14, 2013  
**TIME:** 9:30 PM  
**PLACE:** 1st Floor of the NY Times Square  
 200 West 44<sup>th</sup> Street

You must give at least 10 days notice to all interested parties in the community.  
 A meeting will be held for a public hearing at the address above on the  
 date and time indicated. Please call 212-312-4500 for more information.

- 80'X20' COURTYARD
- WRAP AROUND GLASS WINDOWS
- 23'-25' HIGH CEILINGS
- 100 GUESTS FOR SIT DOWN DINNER
- WARMING KITCHEN
- 250 GUESTS FOR COCKTAIL RECEPTION
- BRIGHT WHITE WALLS
- 3,000 SQ FEET OF USABLE SPACE ON GROUND FLOOR
- HIGH GLOSS BLACK FLOORS





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

### LANDLORD IDENTIFICATION INFORMATION

1. Name of Landlord (as appears on lease and deed): 505 West 37<sup>th</sup> LLC

2. Landlord Mailing Address

Street Address: 505 West 37<sup>th</sup> Street

City: New York State: NY Zip Code: 10018

3. Telephone Number of Landlord: 877-505-3737

4. Landlord Principals

Name	Address
<u>Steve Gonzales</u>	<u>387 Park Avenue South NY, NY 10016</u>

5(a). Are any persons listed on this form currently or previously licensed under the ABC Law?  YES  NO

5(b). If YES, list the names and serial numbers:

6(a). Are any persons listed on this form police officers?  YES  NO

6(b). If YES, list the names:

7. List number of years real property has been owned by landlord: 5 yrs



505 Event Spaces Inc.  
dba Pillars 37  
517 W. 37th Street,  
New York, NY 10018



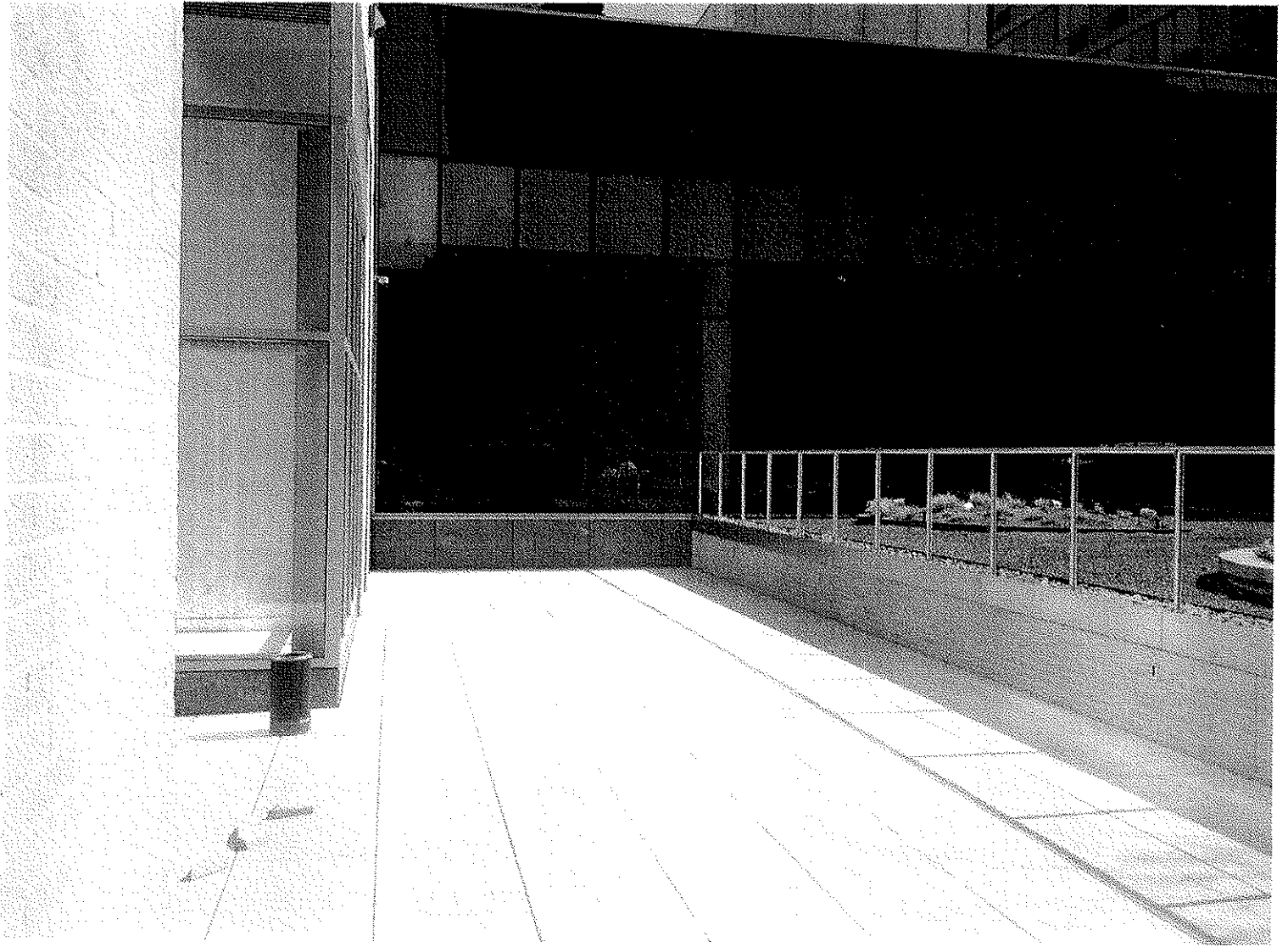
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## **APPLICANT'S STATEMENT CONCERNING MENU**

**THE MENU FOR EVENTS AT PILLARS 37 WILL BE GEARED MORE TOWARD CORPORATE PARTIES, COCKTAIL PARTIES ETC.**

**THIS SPACE HAS A COMMERCIAL WARMING KITCHEN THAT MEETS THE STANDARDS SET DOWN THE STATE ALCOHOLIC BEVERAGE CONTROL ACT.**

**OUTSIDE CATERERS PREPARE THE FOOD THAT WILL BE SERVED OFF-SITE. THE FOOD – TYPICALLY HOR DOURVE PLATTERS, FINGER SANDWICHES, BUFFET-STYLE HOT ENTREES, SALADS ETC – ARE THEN WARMED AND PLATED FOR SERVICE AT PILLARS 37.**

**#end#**

100 ft map

507 W. 37

Proposed



Clyde's



Artisanal  
Cheese.



Cafe  
Slind.



W 36th

38th St Linco

10th Ave

W 37th St



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

Print YOUR Name **JAMES BRADY**

**3. Residences for the past TEN years.**

Address	From (month/year)	To (month/year)
510 Sicomac Avenue Wyckoff NJ 07481	June 1992	Present
Address	From (month/year)	To (month/year)
Address	From (month/year)	To (month/year)
Address	From (month/year)	To (month/year)
Address	From (month/year)	To (month/year)

Exhibit A

**4. Your occupation for the past TEN years**

From/To (month/year)	Employer	Employer Address
Oct 2006 to Present	Studio 450	450 West 31st Street NY NY 10001
Type of business	Position	
Event Space / Catering Hall	OWNER / MANAGER	
From/To (month/year)	Employer	Employer Address
1/02 to 6/09	Loft Eleven	386 W 37th St. NY, NY 10001
Type of business	Position	
Event SPACE / Meeting Hall	OWNER / MANAGER	
From/To (month/year)	Employer	Employer Address
11/02 to 6/09	Penthouse 15	336 W 37th Street NY NY 10001
Type of business	Position	
Event SPACE / Meeting Hall	OWNER / MANAGER	

**5. LICENSE HISTORY / AFFILIATIONS**

(a) If you are an applicant (i.e. proprietor, partner, stockholder, officer or director) or applicant's spouse, will you continue your present occupation or business?  YES  NO

List hours you will devote to business sought to be licensed:

Noon till 2 AM

continued on next page

Print Form

Proximity Report for Location:

February 17, 2013

505 W 37TH ST, New York, 10018

\* 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.

Closest Liquor Stores

Name	Address	Approx. Distance
ODYSSEY WINE & SPIRITS INC	490 10TH AVE	135 ft
34TH STREET WINERY INC	460 WEST 34TH STREET STORE 1	875 ft
SHILORI INC	486 9TH AVENUE	990 ft
474 9TH AVE INC	474 9TH AVENUE	1000 ft
42 & 10TH SPIRITS LTD	507 W 42ND STREET	1325 ft
39TH STREET WINE INC	354 W 39TH ST	1465 ft
589 NINTH AVENUE CORP	589 9TH AVENUE	1620 ft

Churches within 500 Feet

Name	Approx. Distance
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Schools within 500 Feet

Name	Address	Approx. Distance
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On-Premise Licenses within ~~750 Feet~~ **500 ft.**

Name	Address	Approx. Distance
CLYDE ARK LLC	505 W 37TH ST	20 ft
ARTISANAL CHEESE LLC	483 TENTH AVENUE 2ND FLR	55 ft
CAFE GRIND LLC, THE	477 10TH AVE	135 ft
OVEL GROUP LLC	450 10TH AVE	320 ft
SILK CORP	552 W 38TH STREET	660 ft
THREE BROTHERS BAKING INC	451 W 39TH ST	675 ft

Pending Licenses within 750 Feet

Name	Address	Approx. Distance
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Unmapped licenses within zipcode of report location

Name	Address
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Brady  
2500 ft