



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

August 5, 2013

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

Re: Hell's Chicken, LLC  
d/b/a Hell's Chicken  
641 10<sup>th</sup> Avenue (45/46)

Dear Chairman Rosen:

Manhattan Community Board 4 (MCB4) recommends denial of an alteration for an On-Premise Liquor License for Hell's Chicken at 641 10<sup>th</sup> Avenue (45/46) unless the following stipulations, agreed to by the applicant, are part of the method of operation for this establishment with a capacity of 74 people, 14 tables with 32 seats, and 1 stand up bar with no seats.

A signed copy of the questionnaire and stipulations are enclosed.

Sincerely,

Corey Johnson  
Chair

[signed 7/31/13]  
Paul Seres  
Co-Chair  
Business License & Permits  
Committee

[signed 7/31/13]  
Lisa Daglian  
Co-Chair  
Business License & Permits  
Committee

# Manhattan Community Board 4

(All Fields Must Be Completed)

## Liquor License Stipulations Application

APPLICANT <b>Hell's Chicken, LLC</b>		DOING BUSINESS AS (DBA) <b>Hell's Chicken</b>	
STREET ADDRESS <b>641 10th Avenue, South Store</b>		CROSS STREETS <b>45th / 46th Street</b>	
OWNER	NAME: <b>Sung Min</b>	ATTORNEY	NAME: <b>Yoomi Min</b>
	PHONE: <b>718 - 986 - 3771</b>		PHONE: <b>646 - 675 - 4577</b>
	FAX:		FAX:
MANAGER	NAME:	LANDLORD	NAME: <b>641 10th Avenue, LLC</b>
	PHONE:		PHONE: <b>212 - 757 - 8888</b>
	FAX:		FAX:

### DESCRIPTION OF BUSINESS

Establishment Type:  Bar/Tavern  Bed & Breakfast  Eating Place Beer  Cabaret  Night Club  Hotel  Restaurant  
 Catering Establishment  Club (Fraternal Organization - Members Only)  
 Other (Explain): \_\_\_\_\_

Method of Operation:  Restaurant  Dance Club  Sports Bar  Adult Entertainment  Wine Bar  Pizzeria  Cafe  
 Other (Explain): \_\_\_\_\_

License Type:  On-Premise  Wine  Beer  Wine & Beer

APPLICATION TYPE (check one)	<input type="radio"/> New	Has applicant owned or managed a similar business?	YES	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
		If alterations or operational changes are being made, please attach the plans to this form.		
	<input checked="" type="radio"/> Alteration	What is the current license #?	<b>1266157</b>	
		What is the expiration date on the current license?	<b>3/31/2014</b>	
Please describe the nature of the alterations and attach the plans <b>See additional information section</b>				

OPERATIONAL ISSUES									
HOURS		MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY	
	Operation	11AM - 1AM	11AM - 1AM	11AM - 1AM	11AM - 1AM	11AM - 1AM	11AM - 1AM	11AM - 1AM	11AM - 1AM
	Music	11AM - 1AM	11AM - 1AM	11AM - 1AM	11AM - 1AM	11AM - 1AM	11AM - 1AM	11AM - 1AM	11AM - 1AM
	Kitchen	11AM - 1AM	11AM - 1AM	11AM - 1AM	11AM - 1AM	11AM - 1AM	11AM - 1AM	11AM - 1AM	11AM - 1AM
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
	74	74	14	32	0	1	0	0	0
How many floors are there? What is the capacity for each floor? (please respond in space provided)					<input checked="" type="radio"/> 1-2	<input type="radio"/> 3-4	<input type="radio"/> 5+	1st floor; Basement for storage	
Will you be applying or intending to apply for a cabaret license? If yes, will there be dancing? (please respond in space provided)					YES	<input checked="" type="radio"/> NO	N/A		
Will applicant have bottle service?					<input checked="" type="radio"/> YES	NO	N/A		
Will you be hosting private parties and promotional events?					<input checked="" type="radio"/> YES	NO	N/A	occasionally	
Will outside promoters be used?					YES	<input checked="" type="radio"/> NO	N/A		
Will the security plan submitted be implemented?					YES	NO	<input checked="" type="radio"/> N/A		
Will State certified security personnel be used?					YES	NO	<input checked="" type="radio"/> N/A		
Will New York Nightlife Association recommendations and NYPD Best Practices be followed?					YES	NO	<input checked="" type="radio"/> 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)					<input checked="" type="radio"/> YES	NO	N/A	Will keep bicycles in the basement	
Will the applicant be applying for a Sidewalk Café now or in the future? (please respond in space provided)					YES	<input checked="" type="radio"/> 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	<input checked="" type="radio"/> N/A		
Will applicant provide contact information to neighbors and respond to complaints that arise?					<input checked="" type="radio"/> YES	NO	N/A		
Will you inform the Community Board office of your job openings and/or provide a hyperlink to your jobs webpage?					<input checked="" type="radio"/> YES	NO	N/A		
If you plan to have music, what type(s)?			<input checked="" type="radio"/> BACKGROUND	<input type="radio"/> LIVE MUSIC	<input type="radio"/> 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.					<input checked="" type="radio"/> 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?					<input checked="" type="radio"/> 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.)					<input checked="" type="radio"/> YES	NO	N/A		

OUTDOOR ITEMS			
Will applicant use the rooftop, rear yard or any outdoor space?	YES	<input checked="" type="radio"/> NO	<input type="radio"/> 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.).	<input checked="" type="radio"/> YES	NO	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:	R8		Overlay (if Applicable):	C2-5
Is this a Special District? If yes, is it Clinton, West Chelsea or Hudson Yards?	<input checked="" type="radio"/> YES	NO	N/A	Clinton
Does the building have a Certificate of Occupancy ("C of O") or a letter of no objection?	<input checked="" type="radio"/> YES	NO	N/A	
Is the 500 Foot Rule or 200 Foot Rule Triggered? If yes, which? Please attach a diagram of the establishments that triggers the rule.	<input checked="" type="radio"/> YES	NO	N/A	500 Foot Rule. See attached diagram
Is a Public Assembly permit required?	YES	<input checked="" type="radio"/> NO	N/A	
Are your plans filed with DOB?	<input checked="" type="radio"/> YES	NO	N/A	
Building Type	<input type="radio"/> Residential <input type="radio"/> Commercial <input checked="" type="checkbox"/> Mixed Use <input type="radio"/> Other, describe: _____			
Adjacent Buildings	<input type="radio"/> Residential <input type="radio"/> Commercial <input checked="" type="checkbox"/> Mixed Use <input type="radio"/> Other, describe: _____			
NOTIFICATION: What organizations / community groups have you notified regarding your application?	# 1	Community Board 4		
	# 2			
	# 3			

**ADDITIONAL INFORMATION: (Applicant Use)**

Since the restaurant started operating, we noticed a significant number of patrons being turned away when they find out that we do not serve adult cocktail. The turning away of patrons has hurt our business and customer loyalty. The operators would like to provide a setting and atmosphere where people can enjoy nice meal along with their favorite drink. As such, we are seeking to obtain On-Premise license. There will be no other changes at this time to the method of operation, nor will there be any other changes to the stipulations established by the Community Board, which were agreed upon on 8/14/2012.

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

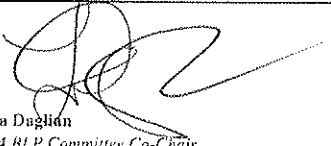
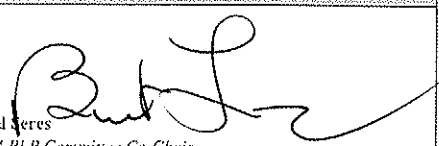
ADDITIONAL STIPULATIONS: (Office Use Only)

- will meet with block association
- will close doors & windows with music

SM


Manhattan Community Board 4 (MCB4) recommends:	<input type="radio"/> Approval <input type="radio"/> Denial unless all agreed to by applicant is part of the method of operation <input type="radio"/> Denial
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**CB4 REPRESENTATIVES**

Nelly Gonzalez <i>CB4 Community Associate</i>	 Lisa Duglian <i>CB4 BLP Committee Co-Chair</i>	 Paul Aeres <i>CB4 BLP Committee Co-Chair</i>
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**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.

<b>SIGN HERE</b> →	 SIGNATURE OF APPLICANT	5/21/2013 DATE
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