| CORPORATION NAME  |                               |   | Doing Business as (DBA)    |                |          |   |  |  |
|---|-------------------------------|---|----------------------------|----------------|----------|---|--|--|
| Club A  | zure LL                       | С   | Scores New York            |                |          |   |  |  |
| STREET ADDRESS  |                               |   | CROSS STREETS              |                | ZIP CODE |   |  |  |
| 533-535   | West 2                        | 7th Street  | 10th & 11                  | th Avenues     | 1        | 0001  |  |  |
| OWNER   | NAME:                         | Mark Yackow   |                            | NAME: Robert B | Bookman  | , Esq.  |  |  |
| (Attach a list of all<br>the people that will<br>be associated/listed | PHONE:                        | 212-245-0002  | ATTORNEY/<br>REPRESENTAIVE | PHONE: 212-513 | 3-1988   |   |  |  |
| with the license)   | emaii<br>ms                   | sy@executiveclub.nyc  |                            | EMAIL: rbookm  | an@pan   | dblegal.com   |  |  |
| ·   | NAME                          | Djalma Baptista   | •                          | NAME: Westsid  | e Realty | of New York   |  |  |
| MANAGER   | PHONE:                        | 212-868-4900  | LANDLORD                   | PHONE: 212-24  | 6-9090   |   |  |  |
|   |                               | niorbaptista11@yahoo.com  |                            | EMAIL: howard@ | pecnyc.  | com   |  |  |
| APPLICATION   | ON TYP                        | E/ (Check One)  |                            |                |          |   |  |  |
|   | Has applicant                 | owned or managed a similar business?  |                            | YES            | NO.      |   |  |  |
| O New   | What le/wee to                | ne name and address of establishment?   |                            |                |          |   |  |  |
|   | What were the                 | e dates applicant was involved with this former prem  | 188 <sup>2</sup>           |                |          |   |  |  |
|   | What is the pr                | ior license # and expiration date?  |                            | Seria# 1215    | 029 Exp  | ires on 3-31-2017                                       |  |  |
| Transfer  | ts applicant m                | aking any alterations or operational changes?   |                            | YES            | NO V     |   |  |  |
|   | If aherations o               | n operational changes ere being made, please desc   | ribelist all changes.      |                |          |   |  |  |
| ∧ Manuallara  | What is the cu                | ment floense # and expiration date?   |                            |                |          |   |  |  |
| Alteration  | Please list/de                | scribe the nature of ell the changes and attach the p   | lans:                      |                |          |   |  |  |
| METHOD O  | F OPER                        | ATION   |                            |                |          |   |  |  |
| TYPE OF ALCOI   | IOL                           | Llquor/Wine/Beer  | O Bear                     |                | O Wine   | & Beer  |  |  |
| ESTABLISHMEN  | т туре                        | Restaurent Cebaret C  |                            |                | _        | atering Eslablishment<br>nal Organization Members Only) |  |  |
| Has applicant/owne  | r filed with t                | he SLA? If yes, when? If no, when do  | YES N                      | <u> </u>       |          |   |  |  |
| Is the 500 Foot Rul<br>On-Premise liquor<br>establishment and         | icense estat<br>the Public in | ? If yes, please attach a diagram of the<br>plishments within a 500 ft. radius of your<br>terest Statement.<br>? If yes, please attach a diagram of the |                            | ~              |          |   |  |  |
|   |                               | Til yea, please attach a diagram of the<br>that trigger the rule.   | YES 🔻                      |                |          |   |  |  |
| Has applicant/owned Location of Alcohol                               | r(s) read Mi<br>ic-Serving E  | CB4 Policy Regarding Concentration and<br>stablishments?  | NO NO                      |                |          |   |  |  |

|   |                                    | MOND                    | Α¥      | TOESDA'   | ¥            | w                                       | EDNESDAY           | THU  | RSDAY       |        | FRIDAY               | SA                                      | TURDAY                                  | . 6              | UNDAY  |
|---|------------------------------------|-------------------------|---------|---|--------------|---|--------------------|--|-------------|--------|----------------------|---|---|------------------|--------|
| HOURS*  | URS* Operation 7pm-4am 7pm-4am 7p  |                         | 7pr     | pm-4am 7pm-4am  |              | 7                                       | 7pm-4am            |  | 8pm-4am 8pn |        | 1-4am                |   |   |                  |        |
| (Indoor<br>Only)                                      | Kitchen                            | 7pm-4a                  | am      | 7pm-4am   |              | 7p                                      | m-4am              | 7pm  | -4am        | 7      | pm-4am               | 8pm-4am 8pm                             |   | 8pn              | n-4am  |
|   | Music                              | 7pm-4                   | am      | 7pm-4am   |              | 7pm-4am                                 |                    | 7pm  | ı-4am       | 7      | pm-4am               | 8pm-4am 8am-                            |   | 1-4am            |        |
| If you plan to ha<br>(Circle all that a               |                                    | type(s)?                |         | BACKGRO   | UND          | L                                       | IVE MUSIC          | <del>                                     </del> | DJ          |        | лике вох             |   | KA                                      | RAOK             | Ø      |
|   | T T                                | \$ 55°                  |         |   |              |   | OCCUP              | ANCY   |             |        |                      |   |   | 11-14<br>1-14-15 |        |
|   | Capaci<br>(Certifi<br>vf<br>Occupa | ate                     | Prem    | aximum # of<br>ersons You<br>Anticipate<br>Occupying<br>data (Including<br>Employees) | Num<br>of Ta |   | Number<br>of Scals |  | or of Servi |        | Number<br>Stand-Up I | o <b>t</b>                              | Number of<br>at Stand-U                 | Seats            |        |
| INSIDE  | 640                                |                         |         | 300   | 4            | 7                                       | 152                | 0  |             |        | 2                    |   | 8                                       |                  |        |
| OUTSIDE   |                                    |                         | Ţ       |   |              |   |                    |  |             |        |                      |   |   |                  |        |
| (Other than<br>zidewalk café)                         | NA                                 |                         |         | NA  | N            | Α                                       | NA                 |  | NA NA NA    |        | NA                   |   | ١                                       |                  |        |
| SIDEWALK<br>CAFÉ                                      | NA                                 |                         |         | NA  | ħ            | ۱A                                      | NA                 |  |             |        |                      |   |   |                  |        |
| How many floors                                       | are there? Wh                      | at is the c             | apacity | for each floor  | •            |   |                    | 1st F  | loor - :    | 500    | 2nd F                | loor                                    | - 140                                   |                  |        |
| How frequently w                                      | vill the owner(s)                  | be at the               | establ  | ishment?  |              |   |                    | D  | aily        | ****** | •                    |   |   |                  | ······ |
| Will you be apply<br>there be dancing                 |                                    | to apply                | for a c | abaret license v  | vith DC      | A? If                                   | yes, will          | ₩  | NO          |        |                      |   |   |                  |        |
| Will applicant hav                                    | ve bottle or tab                   | e service t             | for bev | rerage alcohol?   |              | *************************************** |                    | ₩s   | NO          | ****** |                      | *************************************** | *************************************** |                  |        |
| Will you be hostin                                    | ng private; pron                   | notional or             | согра   | rate events?  |              |   |                    | 16   | NO          |        |                      |   |   |                  |        |
| Will outside prom                                     | oters be used                      | on a reguli             | er bas  | is? If yes pleas  | e desci      | ibe.                                    |                    | YES ·  | *           |        |                      |   |   |                  |        |
| Will you have a security plan? If, yes please attach. |                                    |                         |         |   |              | W                                       | NO                 |  |             |        |                      |   |   |                  |        |
| Will security plan be implemented?                    |                                    |                         |         |   |              | <b>*D</b> 8                             | NO                 |  |             |        |                      |   |   |                  |        |
| VIII State certifle                                   | d security pers                    | onn <del>e</del> ) be u | sed?    |   |              |   |                    | *  | טא          |        |                      |   |   |                  |        |
| VIII New York N                                       | ghtlife Associat                   | ion and N               | YPD B   | lest Practices b  | e follow     | ved?                                    |                    | WS   | NO          |        |                      |   |   |                  |        |
| Vill applicant be                                     | using delivery i                   | olcycles? I             | fyes,   | how many?   |              |   |                    | YES  | 1           |        |                      |   |   |                  |        |
| Vill delivery bicy<br>vear attire clearly             |                                    |                         |         |   | stauran      | t and                                   | will staff         | YES  | NO          |        | NA                   |   |   |                  |        |
|   |                                    |                         |         | day when not i  |              |   | <del></del>        |  |             |        | 147 (                | ····                                    |   |                  |        |

| LOCATION & ZONING   |          |    |              |
|---|----------|----|--------------|
| is this a Special District? If yes, is it Clinton, West Chelsea or Hudson Yards?          | ₩.       | NO | West Chelsea |
| Does the building have a Certificate of Occupancy ('C of O') or a letter of no objection? | <b>*</b> | NO | See Attached |
| Is a Public Assembly permit required?   | YES      | 4  |              |
| Are your plans filed with DOB?  | W        | NO |              |

| Community Notification/Rela  | ions        |                     |   |  |          |  |  |
|--|-------------|---------------------|---|--|----------|--|--|
| NOTIFICATION:  | #1          |                     | 4                                       |  |          |  |  |
| List all block associations; fenant associations, co-op boards or condo boards of residential buildings; and | #2          |                     |   |  |          |  |  |
| community groups that applicant has notified regarding its application. For                                  | #3          |                     |   |  |          |  |  |
| each please list both the organization<br>and individual you contacted                                       | # 4         |                     |   |  | -        |  |  |
|  | #5          |                     |   |  |          |  |  |
| Please provide dates when applicant met w  | ith the gro | ups listed above.   | *************************************** |  |          |  |  |
| Who was your contact person at each grou   | p you met t | with?               |   |  |          |  |  |
| When did applicant post the notice that was  | provided?   | ,                   | Toda                                    | ······································ |          |  |  |
| Where did applicant post the notice that was provided?   |             |                     | Front door of the premises              |  |          |  |  |
| Will applicant provide owner cell phone num complaints that arise? Please provide number                     |             |                     | l                                       |  | NO       |  |  |
| Will applicant inform the Community Board provide a hyperlink to applicants jobs webp                        |             | job openings and/or |   | YES                                    | <b>V</b> |  |  |

| BUILDING DESIGN   |             |  |                  |                               |
|---|-------------|--|------------------|-------------------------------|
| State the name and type of business previously located in the space.  | Sco         | res - l                                | Restaurant, Adul | t Entertainment               |
| Has a liquor-licensed establishment previously occupied this space at any time? If yes, please provide the name of the business.  | ×           | NO                                     | Scores           |                               |
| Do you plan any changes to the existing façade? If yes, please describe.  | YES         | N                                      |                  |                               |
| Will applicant have a vestibule within the establishment?   | Ys          | NO                                     |                  |                               |
| Will applicant use a storm enclosure?   | YES         | 76                                     |                  |                               |
| Will applicant not place any items or obstructions on the sidewalk, for example, sandwich boards, sidewalk signs, freestanding menus and plants, as per the law?  | 1           | NO                                     |                  |                               |
| Will applicant comply with the NYC noise code?  | T/S         | NO                                     |                  |                               |
| Will the establishment have any of the following: (circle all that apply)   | FREN        | Си роок                                | RS GARAGE DOORS  | WINDOWS THAT CAN BE<br>OPENED |
| Will applicant close all windows, French doors, garage doors when any music or amplified sound (including televisions) is played inside the establishment?  | <b>W</b>    | NO                                     |                  |                               |
| Will applicant close all windows, French doors, garage doors by 11 PM Friday and Saturday and 10 PM on all other days even if no music or amplified sound is played inside the establishment?                             | <b>\</b> \$ | NO                                     |                  |                               |
| Has applicant obtained an acoustical report from a certified sound engineer to assess potential noise disturbance to the neighboring residents and buildings?   | YES         | <b>N</b>                               |                  |                               |
| 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? | YE8         | <b>V</b>                               |                  |                               |
| Will the kitchen exhaust system extend to the roof?   | N/s         | МО                                     |                  |                               |
| Will the establishment have an illuminated sign?  | YES         | N                                      |                  |                               |
| Will the establishment have a canopy extending over the sidewalk?   | YES         | 1                                      |                  |                               |
| Where will the air conditioner be located? What type is it?   | Ro          | of                                     |                  | ,                             |
| When was the air conditioner installed?   | 200         | 9                                      |                  |                               |
|   |             | ······································ | <del></del>      |                               |

| OUTDOOR ITEMS - OTHER THEN SIDEWALK CAFÉ   | NO  | TAP  | PLICABLE |
|--|-----|------|----------|
| Has the applicant/owner(s) read MCB 4 Rear Yard Rooftop Policy?  | YES | NO   |          |
| Wili applicant use any outdoor spaces: rooftop, rear yard, patio, porch, balcony, pavilion, tents, deck or gazebo? If yes, which one(s)? | YES | NO . |          |
| Are the floorplans for the outdoor space(s) Included?  | YES | NO   |          |
| Will applicant close and vacate the outdoor space(s) by 11PM on Friday & Saturday and 10 PM on all other days?                           | YES | NO   |          |
| Will the service and consumption of alcohol in any outdoor space only be via seated food service?  | YES | NO   |          |
| Will applicant not allow standing space for patrons to drink or smoke in any outdoor space(s)?   | XES | NO   |          |
| Will there be no amplified music, as per the law?  | YES | NO   |          |
| If amplified sound is played inside the establishment, will windows and doors be closed?   | YES | NO   |          |
| Will applicant agree to post signs outside asking customers to respect the neighbors'?   | YES | NO   |          |
| Will applicant agree to train staff to encourage a peaceful environment?   | YES | NO   |          |
| 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   |          |

| OUTDOOR ITEMS - SIDEWALK CAFÉ NOT APPI   | _lCA | BLE  |   |
|--|------|------|---|
| Has the applicant/owner(a) read MCB4 Sidewalk Café Policy?   | YES  | NO   |   |
| Will applicant be applying for a sidewalk cafe now or in the future?   | YÉS  | NO   |   |
| is applicant in this application seeking to include a sidewalk café in its liquor icense?  | YES  | NO   |   |
| If yes, has applicant submitted an application and plans to NYC Dept. of Consumer Affairs? Please attach application and plans.  | YES  | NO   | ı |
| Will applicant close and vacate the sidewalk café by 11 PM on Friday & Saturday and 10 PM on all other days?   | YES  | , NO |   |
| Will applicant be serving alcohol in the sidewalk café? If so, will you have waiter service?   | YES  | NO   |   |
| Will the café have a 3 ft. wide serving alsle running the entire length of the stdewalk cafe?  | YES  | NO   |   |
| Will applicant mark the perimeter of the café on the sidewalk?   | Y)ES | NO   |   |
| Will the service and consumption of alcohol in the sidewalk café only be via seated food service?  | YES  | NO   | , |
| Will the sidewalk cate not provide standing space for drinking or smoking?   | YES  | NO   |   |
| Will applicant use any portable natural gas heaters? If so, do you have the requisite approvals from DOB & the Fire Department?  | YES  | NO   |   |
| Will applicant have a lighting plan that will allow safe usage of the outdoor space without disrupting neighbors?  | YES  | NO   |   |
| Will all furniture, plants and barricades be stored inside between the evening closing hours and the morning opening hours?  | YES  | NO . |   |
| Will all furniture be stored inside between December 21st and March 21st, and any other day when it rains or snowe?  | YES  | NO   |   |
| Will applicant use umbrellas?  | YES  | 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 cafe and the closes obstruction including construction barricades? | YES  | NO   |   |

| ODITIONAL STIPULATIONS: (Office Use Only) |  |  |
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|      | LATIONS: (Office Use Only), Continu |   |  |

| Water Control of the  |  |
|--|--|
| Manhattan Community Board 4 (MCB4) recommends:   | Denial unless all slipulations agreed to by applicant/owner are part of the method of operation  Denial O Approval   |
| CB4 REPRESENTATIVES  | 2/34/2017  |
| Nelly Genzales CB4 Assistant District Manager Frank Holozubice CB4 BLB Committee Co-Chair  | Burt Lazarin CB4 BLP Committee Co-Chair  |
| APPLICANT AGREEMENT WITH THE COMMUNIT  | <b>TY</b>  |
| Applicant agrees to these stipulations as the basis for the communications are essential prerequisites to the MCB4 recommendate stipulations incorporated in the method of operation of its liquor lical agreement between MCB4 and applicant and may only be altered supersede any oral statements or representations in connection we  | tion regarding this application. Applicant agrees to have these ense. The stipulations in this application constitute the entire in writing signed by MCB4 and applicant. These stipulations |
| SIGN HERE A PRINT NAME OF APPLICAN   |  |
| THE THE PARTY OF T | 20/1   |

533 W 27th St, New York, NY, 10001

\* 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 |
|---------------------------|-----------------------|------------------|
| ADB&SAB LLC               | 554 W 30TH ST         | 1155 ft          |
| NRS WINE AND LIQUOR INC   | 403 8TH AVE           | 1195 ft          |
| MEENA SAMANI CORPORATION  | 460 W 34TH ST         | 1240 ft          |
| DELAUREN WINES INC        | 332 8TH AVE           | 1475 ft          |
| ALGA WINES & SPIRITS LTD  | 221 9TH AVENUE        | . 1530 ft        |
| MWC RETAIL LLC            | 606 W 28TH ST SUITE A | 1540 ft          |
| 474 9TH AVE INC           | 474 9TH AVENUE        | 1885 ft          |
| MWC RETAIL LLC            | 606 W 28TH ST SUITE A | 700 ft           |
| ADB&SAB LLC               | 554 W 30TH ST         | 795 ft           |
| ALGA WINES & SPIRITS LTD  | 221 9TH AVENUE        | 1490 ft          |
| MEENA SAMANI CORPORATION  | 460 W 34TH ST         | 1880 ft          |
| HIGHLINE WINE MARKET CORP | 156 10TH AVE          | 1950 ft          |
| MIDTOWN SPIRITS INC       | 177 9TH AVE UNIT C    | 2100 ft          |
| DELAUREN WINES INC        | 332 8TH AVE           | 2125 ft          |

### Churches within 500 Feet

| $\square$ | ame    |      | <br>Approx.     | Distance |
|-----------|--------|------|-----------------|----------|
| L.        | W. 110 | <br> | <br>, (bb. e.c. |          |

### Schools within 500 Feet

| Name | Address | Δn   | prox. Distance |
|------|---------|------|----------------|
|      | Addiess | U.P. | prox. Distance |

### On-Premise Licenses within 750 Feet

| Name                         | Address                        | Approx. Distance |  |
|------------------------------|--------------------------------|------------------|--|
| W 27 HIGHLINE OWNER LLC      | 516 518 W 27TH ST              | 65 ft            |  |
| CAFFE PICASSO LTD            | 513 W 27TH STREET              | 75.ft            |  |
| SLEEPNOMORE NA LLC           | 530 W 27TH STREET              | 75 ft            |  |
| I M OPERATING LLC            | 533 535 W 27 ST AKA 536 W28 ST | 95 ft            |  |
| PINCH FOOD DESIGN LLC        | 537 W 27TH ST                  | 110 ft           |  |
| RHYTHMS OF CUBA LLC          | 544 W 27TH ST                  | 175 ft           |  |
| PORTENO LLC                  | 299 10TH AVE                   | 285 ft           |  |
| 287 VENUE LLC                | 287 10TH AVE                   | 325 ft           |  |
| 289 HOSPITALITY LLC          | 289 10TH AVE                   | 330 ft           |  |
| EAGLE OPEN KITCHEN LLC       | 554 WEST 28TH ST               | 345 ft           |  |
| CHELSEA CORPORATE EVENTS LLC | 545 W 25TH ST FLS 14 & 21      | 555 ft           |  |

| Name                        | Address      | Approx. Distance |
|-----------------------------|--------------|------------------|
| PORCHLIGHT WEST CHELSEA LLC | 271 11TH AVE | 630 ft           |
| PINYIN KITCHEN INC          | 254 10TH AVE | 710 ft           |

## Pending Licenses within 750 Feet

| Name                    | Address           | Approx. Distance |
|-------------------------|-------------------|------------------|
| W 27 HIGHLINE OWNER LLC | 516 518 W 27TH ST | 50 ft            |
| ONE 27 ROOF LLC         | 530 542 W 27TH ST | 160 ft           |
| SONNY LOU INC           | 253 10TH AVE      | 665 ft           |
| TRENTA LLC              | 536 W 30TH ST     | 730 ft           |

## Unmapped licenses within zlpcode of report location

| l Name | IAddress |  |  |
|--------|----------|--|--|
|        |          |  |  |
|        |          |  |  |
|        |          |  |  |



# Certificate of Occupancy

CO Number:

102343705T029

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.

| A. | Borough: Manhattan Address: 536 WEST 28 STREET   | Block Number:<br>Lot Number(s): | 00699<br>14                             | Certificate Type:  Effective Date: | Temporary<br>01/25/2012 |
|----|--|---------------------------------|---|------------------------------------|-------------------------|
|    | Building Identification Number (BIN): 1012405  |                                 |   | Expiration Date:                   | 04/24/2012              |
|    |  | Building Type:                  | Altered                                 |                                    |                         |
|    |  |                                 |   |                                    |                         |
|    | For zoning lot metes & bounds, please see BISWe  | b.                              |   |                                    | •                       |
| В. | Construction classification: OLD Co  | ODE: 1                          |   |                                    |                         |
|    | Building Occupancy Group classification: F-4   |                                 |   | •                                  |                         |
|    | Multiple Dwelling Law Classification: None   |                                 |   |                                    |                         |
|    | No. of stories: 3 Height   | in feet: 67                     |   | No. of dwelling unit               | ts: 0                   |
| C. | Fire Protection Equipment: None associated with this filling.  |                                 |   |                                    |                         |
| D. | Type and number of open spaces:<br>Parking spaces (43)   |                                 | <u>.</u>                                |                                    |                         |
| E. | This Certificate is issued with the following legal i  | imitations:                     | *************************************** | A REPORTED TO                      |                         |
|    |  |                                 |   |                                    |                         |
| -  | Outstanding requirements for obtaining Final Certi<br>There are 11 outstanding requirements. Please refer to |                                 |   |                                    |                         |
| l  | Borough Comments: None   | STOTTON TO TOTAL                |   |                                    |                         |

**Borough Commissioner** 

Commissioner



# Certificate of Occupancy

**CO Number:** 

102343705T029

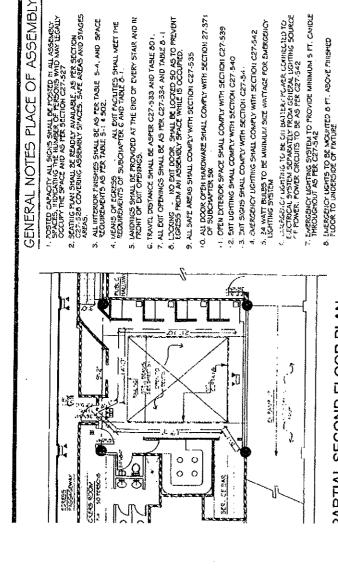
|  | Permissible Use and Occupancy   |         |  |  |                     |  |
|--|---------------------------------|---------|--|--|---------------------|--|
| All Building Code occupancy group designations are 1968 designations, except RES, COM, or PUB which are 1938 Building Code occupancy group designations. |                                 |         |  |  |                     |  |
| Floor<br>From To   | Maximum<br>persons<br>permitted | lbs per | Building<br>Code<br>occupancy<br>group | Dwelling or<br>Rooming<br>Units  | Zoning<br>use group | Description of use   |
| CEL  | <del> </del>                    | 00G     | B-2                                    | With the Control of t |                     | BOILER ROOM  |
| 001  | 500                             | 120     | F-4                                    |  | 12                  | ADULT EATING AND DRINKING ESTABLISHMENT WITH ENTERTAINMENT AND A CAPACITY OF MORE THAN TWO HUNDRED(200) PERSONS WITH DANCING, BUILDING LOBBY AND RAMP TO PUBLIC PARKING GARAGE |
| 002  | 60                              | 120     | E                                      |  | 6                   | OFFICES  |
| 002  |                                 | 120     | B-1                                    |  | 12                  | STORAGE ACCESSORY TO OFFICES, RAMP<br>TO PUBLIC PARKING GARAGE   |
| 002  | 80                              | 120     | F-4                                    |  | 12                  | LOUNGE AND LOCKER ROOM ACCESSORY<br>TO THE ADULT EATING AND DRINKING<br>ESTABLISHMENT  |
|  |                                 |         |  | END OF   | SECTION             |  |

**Borough Commissioner** 

Commissioner

END OF DOCUMENT

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# EMERGENCY LIGHTING

EGRESS ANALYSIS

- 1. THE EMERCENCY LIGHTING INSTRUMTON SHALL DE DONE BY A LICENSED ELECTRICAN, IN COMPLANCE WITH THE ELECTRIC CODE AND DIRECTIVE S OF 1.979. ISSUED SY THE DEPARTMENT OF EMERISHS, FOR COMPLANCE WITH LOCAL LAW # 4.175. (IC26-801.16).
- 2. BARRGENCY UGHTING SHALL BE ON CIRCUIT THAT ARE SEPARATE RECAIRED. THE CONTROL WITHOUTS. ENTERNIED THE MAIN SHALLONG CONNECTED TO AN EMPROPER, AND BE ARRANGED TO OFFRATED AUTOMATICALLY IN THE PURITY OF ANY FAILURE IN THE NORMAL UGHTING SYSTEM, (C26-801.19)

- OPDI DXTERIOR SPACES SHALL BIT KETT LICHTED AT ALL TIMES DURNIG OCCUPANOY OF THIS ASSEMBLY SPACE AS PER CZG-801, 1,6 (9).

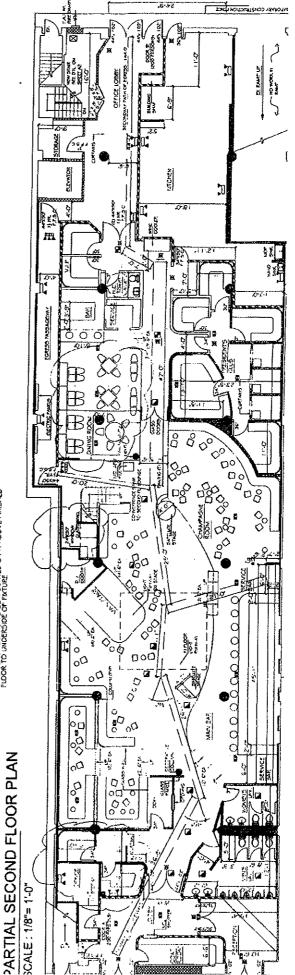
- nllamination shall be arranced so that the failure of Any Single lighting unit, sich as the burning dijt of a Electro blib, will not leave any area in darkness.
- 4. EMERGENCY LIGHTING FACULTY SHALL DE SUFFICTEUT TO PROVIDE LÉAST 5 FOOTCANDIES AT FLOOR LEVEL. 5. BMEKGENCY LIGHTING SHALL CONSIST OF APPROVED THE BATTERY PACK THE LIGHTS UNITS, AS SHOW ON PLAN 19 - O A F.F. MINRALLI, WITH 12 VOLT BATTERY PACKS AND TWO OR THREE 25 WATT. LIGHT BLASS PER UNIT, AS INDICATED ON PLAN , AS PER DIRECTIVE 5/79.
  - THE CERTIFICAL OF BECIRION, INSTECTION MASS BE IN THE FOLKWARK STAWN "THIS CERTIFICATE INCLUDES BARREDON UNITHING IN CONFORMANCE WITH THE REQUIREMENTS OF THE DEPARTMENT OF BUILDINGS AS TO CIRCUITING AND TOWER SOURCE.
- 2.-TRAVID. DISTANCES
  PRAMENT PATO DE GRESS.
  -TREST LEG. 2.10
  -SECOND LEG. 7.76.57

  TOTAL PERMARET PATO DE CRESS = 99.59

  SECONDER PATO DE GRESS.
  -FIEST LEG. 2.10
  -FIEST LEG. 2. PROPOSED MAX. OCCUPANCY :500 PERSONS -DOOR C : 44" (2 UNITS OF WIDTH) (CLASS 2) . 2UXSORU=100 FERSONS -000K B : 132" (6 UNITS OF WIDTH (CLASS 2) : 6UXSOP/U=300 PERSONS -DOOR A : B&\* = (4 UNITS OF WENTH (CLASS 1) : 4UXSO F/U=200 PERSON AS PER (TABLE 8. - DOOR CAPACITY: U.G.:12

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# Tomato, Red Onion and Mozzarella di Buffalo

Aged Balsamic and EVOO

\$16

# Sauté Maryland Crab Cake

Red Pepper Aioli and Micro Greens \$21

# Colossal Shrimp Cocktail

House Made Cocktail Sauce \$21

## "Hail Caesar" Salad

Croutons and Creamy Garlic Dressing \$8.00 - W/Chicken \$16 - W/Grilled Shrimp \$16

# Mixed Baby Greens

Fresh Herbs and Shallot Vinaigrette
\$14

# Arugula Salad

Diced tomatoes diced red onions and balsamic \$14

# Rigatoni with Spicy Sausage

Fried Eggplant, Fresh Ricotta \$22

# Chef's Nightly Pasta

\*An 18% gratuity will be applied to parties of 6 or more.



Robert's Burger with Cheese on a Ciabatta Roll House made Pickles, Everything Fries & Smoked Paprika Aioli

Chicken Tenders or Plain Grilled Chicken Breast

NY Strip Steak Red onion marmalade \$21

> Salmon \$21

Chicken Milanese
Fried or Grilled
\$16

# <u>Sides</u>

Sautéed broccoli with Garlic & Chili Flakes
Whipped Potatoes
Everything French Fries with Smoked Paprika Aioli
Beer Battered Onion Rings
Crispy Fries
\$14

Ice Cream or Sorbet
\$14
\*An 18% gratuity will be applied to parties of 6 or more.

