

Manhattan Community Board 4

(All Fields Must Be Completed)

Liquor License Stipulations Application

CORPORATION NAME		DOING BUSINESS AS (DBA)	
Chalait Chelsea, LLC		Chalait	
STREET ADDRESS		CROSS STREETS	ZIP CODE
75 9th Avenue		9th Avenue and 15th Street	10011
OWNER <i>(Attach a list of all the people that will be associated listed with the license)</i>	NAME: Michelle Puyane	ATTORNEY/ REPRESENTATIVE	NAME: Elke Hofmann
	PHONE: 203-252-6859		PHONE: 212-487-9100
	EMAIL: michelle.puyane@chalait.com		EMAIL: elke@eahlaw.com
MANAGER	NAME: John Shin	LANDLORD	NAME: Jamestown Premier Chelsea Market, L.P.
	PHONE: 646-785-9416		PHONE: 212-652-2111
	EMAIL: john.shin@chalait.com		EMAIL: Kevin.Hussey@JamestownLP.com
APPLICATION TYPE (Check One)			
<input checked="" type="radio"/> New	Has applicant owned or managed a similar business?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
	What is/was the name and address of establishment?	Chalait, 224 W 4th Street, New York, NY 10014	
	What were the dates applicant was involved with this former premise?	Dec 2014 to Present	
<input type="radio"/> Transfer	What is the prior license # and expiration date?		
	Is applicant making any alterations or operational changes?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
	<i>If alterations or operational changes are being made, please describe/list all changes.</i>		
<input type="radio"/> Alteration	What is the current license # and expiration date?		
	<i>Please list/describe the nature of all the changes and attach the plans:</i>		
METHOD OF OPERATION			
TYPE OF ALCOHOL	<input type="radio"/> Liquor/Wine/Beer <input type="radio"/> Beer <input checked="" type="radio"/> Wine & Beer		
ESTABLISHMENT TYPE	<input type="radio"/> Restaurant <input type="radio"/> Cabaret <input type="radio"/> Night Club <input type="radio"/> Hotel <input checked="" type="radio"/> Bar/Tavern <input type="radio"/> Catering Establishment <input type="radio"/> Adult Entertainment <input type="radio"/> Wine Bar <input type="radio"/> Dance Club <input type="radio"/> Sports Bar <input type="radio"/> Club (Fraternal Organization – Members Only)		
Has applicant/owner filed with the SLA? If yes, when? If no, when do you plan to file?	YES	<input checked="" type="checkbox"/>	June 30th, 2016
Is the 500 Foot Rule applicable? If yes, please attach a diagram of the On-Premise liquor license establishments within a 500 ft. radius of your establishment and the Public Interest Statement.	YES	<input checked="" type="checkbox"/>	
Is the 200 Foot Rule applicable? If yes, please attach a diagram of the schools and houses of worship that trigger the rule.	YES	<input checked="" type="checkbox"/>	
Has applicant/owner(s) read MCB4 Policy Regarding Concentration and Location of Alcoholic-Serving Establishments?	<input checked="" type="checkbox"/>	NO	

OPERATIONAL DETAILS (*Closing time will be when establishment is vacated of all patrons)									
HOURS* <i>(Indoor Only)</i>		MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY	
	Operation	8am-9pm	8am-9pm	8am-9pm	8am-9pm	8am-9pm	8am-9pm	8am-9pm	8am-9pm
	Kitchen	8am-9pm	8am-9pm	8am-9pm	8am-9pm	8am-9pm	8am-9pm	8am-9pm	8am-9pm
	Music								
If you plan to have music, what type(s)? (Circle all that apply)			BACKGROUND	LIVE MUSIC	DJ	JUKE BOX	KARAOKE		
OCCUPANCY									
	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 Stand-Up Bar		
INSIDE	16 (25sq / pp)	10-15	2	4	0	1	4		
OUTSIDE <i>(Other than sidewalk café)</i>	n/a								
SIDEWALK CAFE	n/a								
How many floors are there? What is the capacity for each floor?					1				
How frequently will the owner(s) be at the establishment?					Weekly				
Will you be applying or intending to apply for a cabaret license with DCA? If yes, will there be dancing?					YES	<input checked="" type="checkbox"/>			
Will applicant have bottle or table service for beverage alcohol?					YES	<input checked="" type="checkbox"/>			
Will you be hosting private, promotional or corporate events?					YES	<input checked="" type="checkbox"/>			
Will outside promoters be used on a regular basis? If yes please describe.					YES	<input checked="" type="checkbox"/>			
Will you have a security plan? If, yes please attach.					YES	<input checked="" type="checkbox"/>			
Will security plan be implemented?					YES	<input checked="" type="checkbox"/>			
Will State certified security personnel be used?					YES	<input checked="" type="checkbox"/>			
Will New York Nightlife Association and NYPD Best Practices be followed?					<input checked="" type="checkbox"/>	NO	Not going to be open during latenights		
Will applicant be using delivery bicycles? If yes, how many?					YES	<input checked="" type="checkbox"/>			
Will delivery bicycles be clearly marked with the name of the restaurant and will staff wear attire clearly noting name as described by NYC Law?					YES	NO	n/a		
Where will delivery bicycles be stored during the day when not in use?					n/a				

LOCATION & ZONING			
Is this a Special District? If yes, is it Clinton, West Chelsea or Hudson Yards?	YES	<input checked="" type="checkbox"/> NO	
Does the building have a Certificate of Occupancy ("C of O") or a letter of no objection?	<input checked="" type="checkbox"/> YES	NO	
Is a Public Assembly permit required?	YES	<input checked="" type="checkbox"/> NO	
Are your plans filed with DOB?	YES	<input checked="" type="checkbox"/> NO	Filing at the beginning of July

Community Notification/Relations			
NOTIFICATION: List all block associations; tenant associations, co-op boards or condo boards of residential buildings; and community groups that applicant has notified regarding its application. For each please list both the organization and individual you contacted	# 1	100/200 West 15 St. Block Association: Stanley Bulbach at letters@bulbach.com	
	# 2	100/200 West 15 St. Block Association: Robert Boddington at rboddington@gmail.com	
	# 3	300 West 15 St. Block Association: Jim Jasper at jjasper@gc.cuny.edu	
	# 4	100 West 16 St. Block Association: Paul Groncki at paul@groncki.com or pgroncki@gmail.com	
	# 5	100 West 16 St. Block Association: Eric Bomze at eric.bomze@gmail.com	
Please provide dates when applicant met with the groups listed above.		June 20 - June 30, 2016	
Who was your contact person at each group you met with?		see above	
When did applicant post the notice that was provided?		July 1st, 2016	
Where did applicant post the notice that was provided?		Glass door by the entrance	
Will applicant provide owner cell phone number to neighbors and respond to complaints that arise? Please provide number in space provided.		<input checked="" type="checkbox"/> YES	NO 203-252-6859
Will applicant inform the Community Board office of its job openings and/or provide a hyperlink to applicants jobs webpage?		YES	<input checked="" type="checkbox"/> NO

BUILDING DESIGN			
State the name and type of business previously located in the space.	Kingdom of Herbs - shop selling specialty items (hats, books, etc)		
Has a liquor-licensed establishment previously occupied this space at any time? If yes, please provide the name of the business.	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>	
Do you plan any changes to the existing façade? If yes, please describe.	YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>	
Will applicant have a vestibule within the establishment?	YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>	
Will applicant use a storm enclosure?	YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>	
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?	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>	
Will applicant comply with the NYC noise code?	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>	
Will the establishment have any of the following: (circle all that apply)	FRENCH DOORS	GARAGE DOORS	WINDOWS THAT CAN BE OPENED
Will applicant close all windows, French doors, garage doors when any music or amplified sound (including televisions) is played inside the establishment?	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>	
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?	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>	
Has applicant obtained an acoustical report from a certified sound engineer to assess potential noise disturbance to the neighboring residents and buildings?	YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>	
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 <input checked="" type="checkbox"/>	NO <input type="checkbox"/>	
Will the kitchen exhaust system extend to the roof?	YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>	
Will the establishment have an illuminated sign?	YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>	
Will the establishment have a canopy extending over the sidewalk?	YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>	
Where will the air conditioner be located? What type is it?	Yes, HVAC as part of the larger food hall		
When was the air conditioner installed?	Not sure		

OUTDOOR ITEMS - OTHER THAN SIDEWALK CAFÉ			
Has the applicant/owner(s) read MCB 4 Rear Yard Rooftop Policy?	YES	NO	
Will 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)?	YES	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			
Has the applicant/owner(s) read MCB4 Sidewalk Café Policy?	YES	NO	
Will applicant be applying for a sidewalk café now or in the future?	YES	NO	
Is applicant in this application seeking to include a sidewalk café in its liquor license?	YES	NO	
If yes, has applicant submitted an application and plans to NYC Dept. of Consumer Affairs? Please attach application and plans.	YES	NO	
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 aisle running the entire length of the sidewalk cafe?	YES	NO	
Will applicant mark the perimeter of the café on the sidewalk?	YES	NO	
Will the service and consumption of alcohol in the sidewalk café only be via seated food service?	YES	NO	
Will the sidewalk café 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 21 st and March 21 st , and any other day when it rains or snows?	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 café and the closes obstruction including construction barricades?	YES	NO	

ADDITIONAL STIPULATIONS: (Office Use Only)

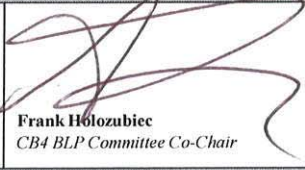

To the extent any additional stipulation on pages 7 and 8 of this application conflicts with any response on pages 1 – 6 of this application, the stipulations on pages 7 and 8 control.

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

To the extent any additional stipulation on pages 7 and 8 of this application conflicts with any response on pages 1 – 6 of this application, the stipulations on pages 7 and 8 control.



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

Nelly Gonzalez <i>CB4 Assistant District Manager</i>	 Frank Holozubiec <i>CB4 BLP Committee Co-Chair</i>	 Burt Lazarin <i>CB4 BLP Committee Co-Chair</i>
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APPLICANT AGREEMENT WITH THE COMMUNITY

Applicant agrees to these stipulations as the basis for the community support of this application and acknowledges that all of these stipulations are essential prerequisites to the MCB4 recommendation regarding this application. Applicant agrees to have these stipulations incorporated in the method of operation of its liquor license. The stipulations in this application constitute the entire agreement between MCB4 and applicant and may only be altered in writing signed by MCB4 and applicant. These stipulations supersede any oral statements or representations in connection with this application.

SIGN HERE →	 Michelle Puyane <small>PRINT NAME OF APPLICANT</small>	 <small>SIGNATURE OF APPLICANT</small>	07/12/16 <small>DATE</small>
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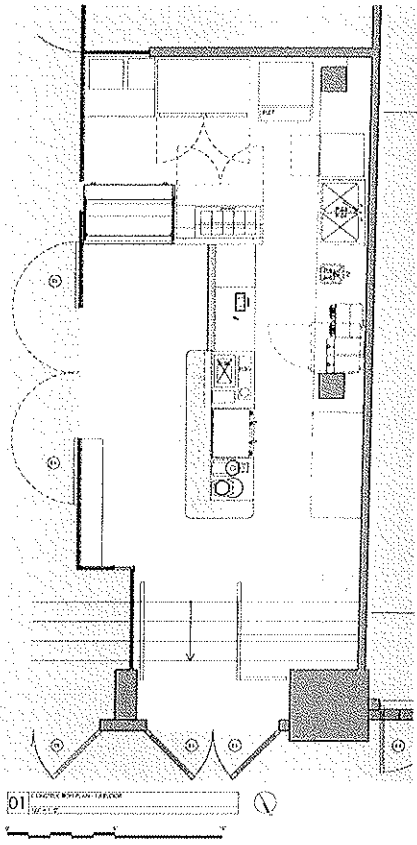
LEGEND

[Symbol]	DESCRIPTION
[Symbol]	INTERIOR FINISH
[Symbol]	EXTERIOR FINISH
[Symbol]	MECHANICAL
[Symbol]	ELECTRICAL
[Symbol]	PLUMBING
[Symbol]	PAINT
[Symbol]	GLASS
[Symbol]	WOODWORK
[Symbol]	ROOFING
[Symbol]	FOUNDATION
[Symbol]	STRUCTURE

- GENERAL NOTES**
1. REFER TO SPECIFICATIONS AND DRAWINGS FOR MATERIALS AND FINISHES. ALL MATERIALS SHALL BE OF THE HIGHEST QUALITY AVAILABLE.
 2. ALL WORK SHALL BE IN ACCORDANCE WITH THE LATEST EDITIONS OF THE NATIONAL BUILDING CODES AND ALL APPLICABLE REGULATIONS.
 3. PROVIDE ADEQUATE DRAINAGE SYSTEMS TO PREVENT WATER INTRUSION AND PROTECT THE STRUCTURE FROM DAMAGE.
 4. PROVIDE ADEQUATE VENTILATION SYSTEMS TO MAINTAIN AIR QUALITY AND PREVENT CONDENSATION.
 5. PROVIDE ADEQUATE LIGHTING SYSTEMS TO ILLUMINATE THE INTERIOR SPACES AND EXTERIOR AREAS.
 6. PROVIDE ADEQUATE SOUND INSULATION TO PREVENT NOISE TRANSMISSION BETWEEN SPACES.
 7. PROVIDE ADEQUATE FIRE PROTECTION SYSTEMS TO PROTECT THE BUILDING AND ITS OCCUPANTS.
 8. PROVIDE ADEQUATE SECURITY SYSTEMS TO PROTECT THE BUILDING AND ITS ASSETS.

Material Schedule

NO.	DESCRIPTION	QUANTITY	UNIT	REMARKS
01	CEILING ROOFING SYSTEM			
02	...			
03	...			
04	...			
05	...			
06	...			
07	...			
08	...			
09	...			
10	...			
11	...			
12	...			
13	...			
14	...			
15	...			
16	...			
17	...			
18	...			
19	...			
20	...			



Project Information

Client: CHINAAT CAFE - CHELSEA MARKET

Location: 75 W 4th Ave, New York, NY 10011

Contractor: CHINAAT CHELSEA LLC

Architect: CONSTRUCTION PLAN & PARTNER

Scale: 1/8" = 1'-0"

Sheet: A-200.00

Date: 04/12/2014

Project No.: 1400150

MATCHA

Shot of Everyday Grade

\$3.75

Shot of Top Grade

\$5.75

Matcha Americano

matcha green tea topped up with hot water

\$4.00

Matcha Cortado

matcha shot cut with a small amount of steamed milk

\$4.25

Matcha Latte

matcha shot and steamed milk

\$4.75

Chaihot Hot Chocolate

matcha latte with chocolate sauce

\$5.25

Matcha Iced Tea

\$4.25

Iced Matcha Seasonal Fizz

iced matcha tea with seasonal cordial

\$4.50

Iced Matcha Latte

\$5.25

TEA

Black Tea

breakfast, earl grey

\$3.50

Green Tea

sencha, genmaicha

\$3.50

Herbal Tea

mint, chamomile, rooibos

\$3.25

Iced Tea

scarlet glow

\$3.50

Oolong Tea

nantou four season, wood dragon

\$3.50

White Tea

white moonlight

\$4.00

Chai Latte

\$4.50

Hot Chocolate

\$4.00

COFFEE

Drip

\$2.75

Espresso

\$3.00

Latte

\$4.50

Cold Brew

\$3.75

Pour Over

MKT

TARTINE

Muesli Toast

greek yogurt, seasonal fruit, nuts, honey

\$9

Classic Avocado Toast

avocado smash, radish, hard-boiled egg, house vinaigrette

\$10

Miso Butter Toast

soft-boiled egg, miso butter, avocado, sesame, arugula salad

\$8

Smoked Salmon Benedict

ricotta, pea shoots, poppy seed vinaigrette, poached egg

\$11

SANDWICHES

Chalait Egg Sandwich

smoked salmon, egg salad, cucumber, dill butter

\$12

Ultimate Breakfast Sandwich

over easy egg, country ham, arugula, house made espresso aioli on a
croissant

\$9

The Greenwich

black bean mash, avocado, pickled red onions, radish, tomato,
cilantro, feta cheese, sriracha mayo

\$11

Farmhouse Crunch

country ham, cheddar, sweet pickled onions, kettle chips, arugula,
lemon aioli

\$11.50

SALADS

Warm Cauliflower + Squash Quinoa Bowl

cauliflower, butternut squash, quinoa, black beans, red onion, tomato,
arugula, avocado, chives, cilantro, sesame seeds, fried egg, sriracha
tahini dressing

Butternut Arugula Salad

arugula, butternut squash, granny smith apple, cranberries, walnuts,
red onion, goat cheese, balsamic vinaigrette

PASTRIES

Plain Croissant

Almond Croissant

Pain au Chocolat

Banana Walnut Bread

Cookies

GRAB-N-GO

Bircher Muesli

Matcha Granola and Yogurt

Chia Yogurt Parfait

Kombucha

Cold Pressed Juices

Matcha Bark

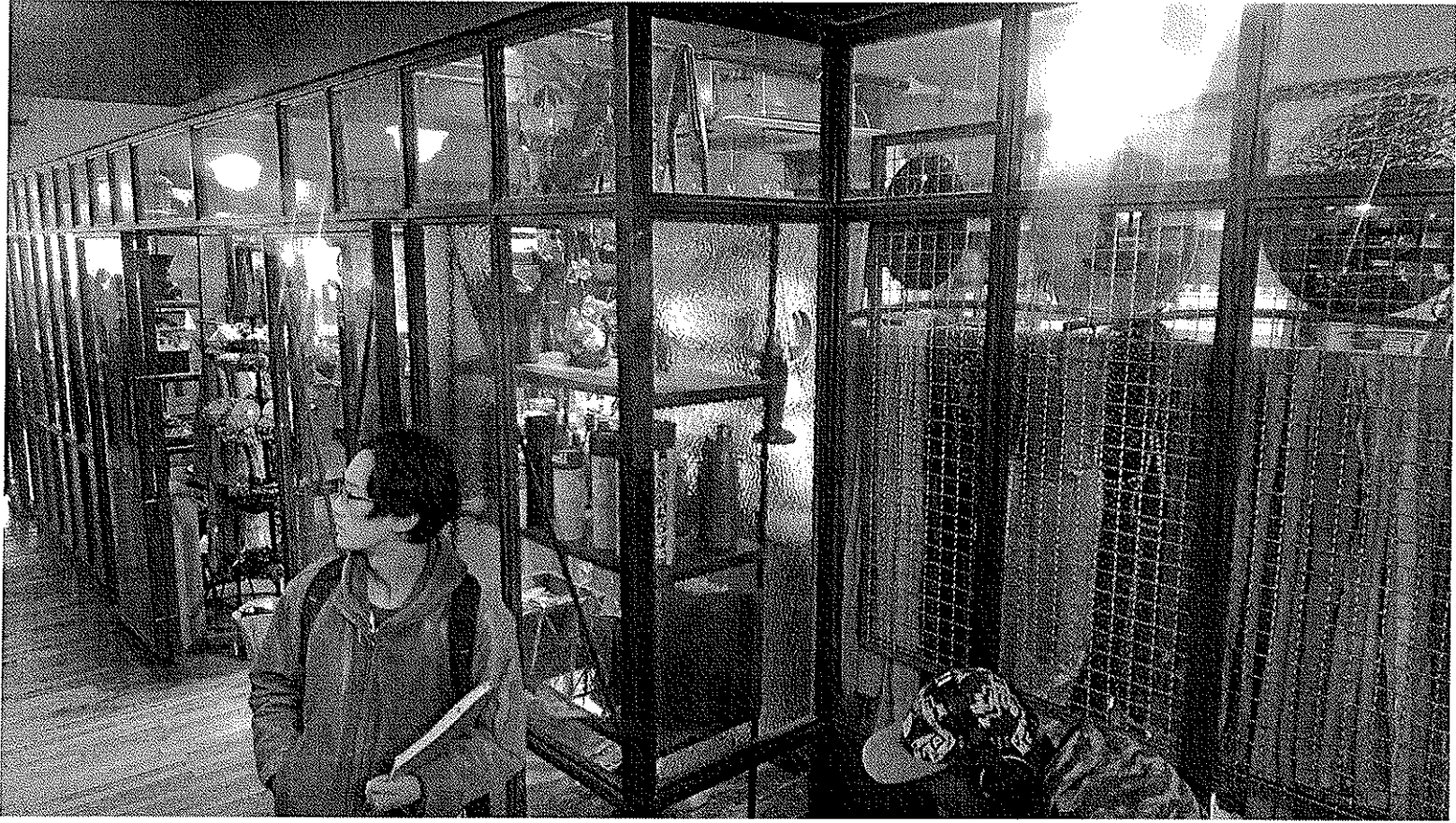
Still and Sparkling Water

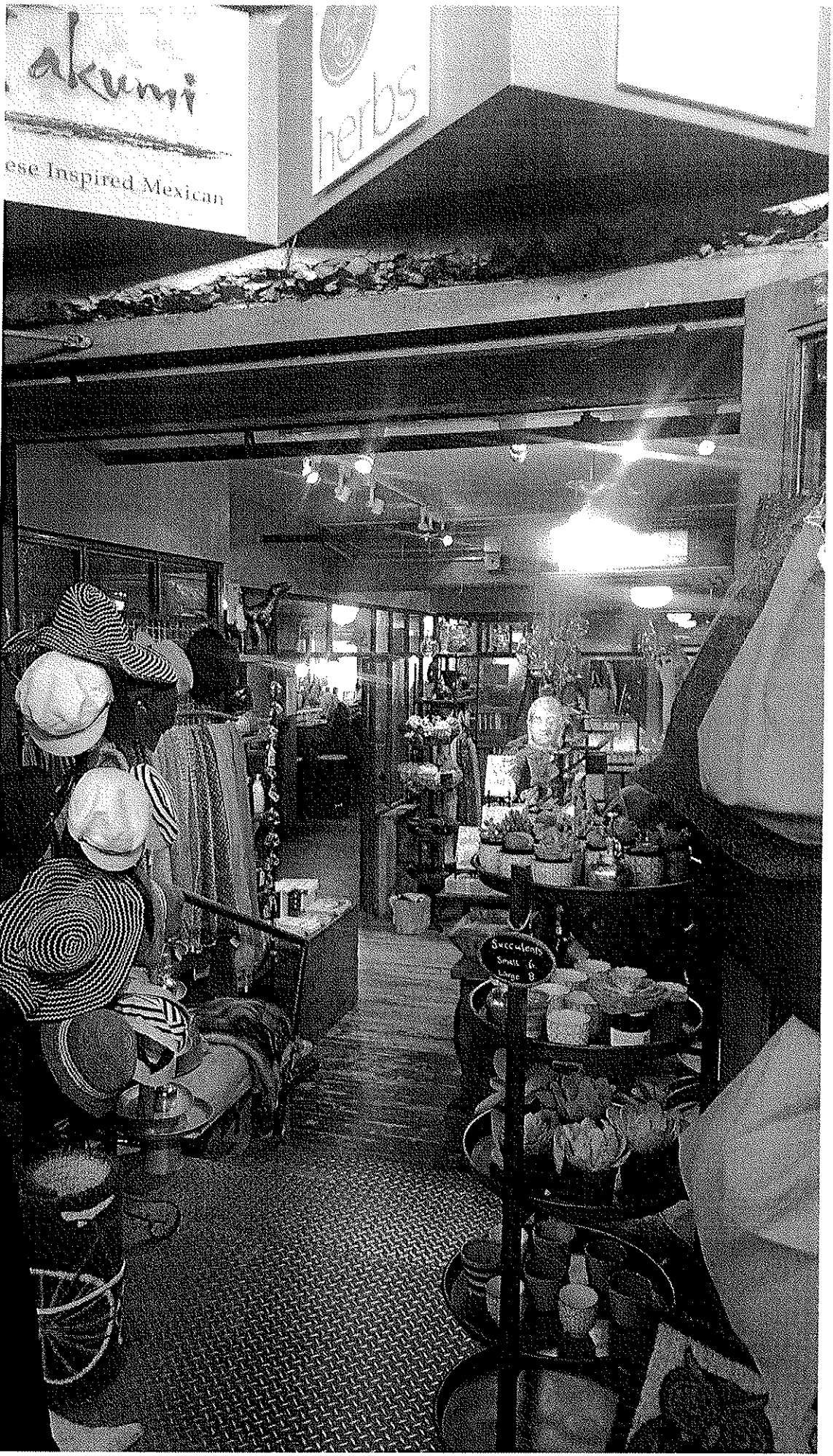
Superfood Bar

Energy Bites

Matcha Iced Tea







akumi

Herbs

ese Inspired Mexican

Successions
Small 6
Large 8