

Manhattan Community Board 4
(All Fields Must Be Completed)

Liquor License Stipulations Application

CORPORATION NAME CAMGT 510 W 42 Rest Operating LLC		DOING BUSINESS AS (DBA) Cachet Boutique and Eden Restaurant	
STREET ADDRESS 508-510 W 42ND STREET		CROSS STREETS 11TH AVENUE	ZIP CODE 10036
OWNER <i>(Attach a list of all the people that will be associated with the license)</i>	NAME: RICHARD COHN	ATTORNEY/ REPRESENTATIVE	NAME: JOSEPH LEVEY
	PHONE: 212-671-5602		PHONE: 212-219-1193
	EMAIL: RCOHN@ MERCHANTSHOSPITALITY.COM		EMAIL: JOSEPH@HELBRAUNLEVEY.COM
MANAGER	NAME: NICOLE HENDRIX	LANDLORD	NAME: WEST 42ND STREET DEVELOPEMENT
	PHONE: 703-409-5109		PHONE: PENDING
	EMAIL: NICOLE.H@ CACHETHOTELGROUP.COM		EMAIL: PENDING
APPLICATION TYPE <i>(Check One)</i>			
<input checked="" type="radio"/> New <i>Sidewalk cafe Application</i>	Has applicant owned or managed a similar business?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
	What is/are the name and address of establishment?	VARIOUS- MERCHANTS HOSPITALITY (LICENSE HOLDER ABRAHAM MERCHANTS)	
	What were the dates applicant was involved with this former premise?	still involved	
<input type="radio"/> Transfer	What is the prior license # and expiration date?		
	Is applicant making any alterations or operational changes?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
	If alterations or operational changes are being made, please describe (list all changes).	NEW OWNERSHIP AND OPERATIONS, RENOVATIONS.	
<input checked="" type="radio"/> Alteration	What is the current license # and expiration date?	1299231 - 7/31/19	
	Please list/describe the nature of all the changes and attach the plans:	to include the sidewalk cafe within the licensed premises	
METHOD OF OPERATION			
TYPE OF ALCOHOL	<input checked="" type="checkbox"/> Liquor/Wine/Beer <input type="checkbox"/> Beer <input type="checkbox"/> Wine & Beer		
ESTABLISHMENT TYPE	<input checked="" type="checkbox"/> Restaurant <input type="checkbox"/> Cabaret <input type="checkbox"/> Night Club <input checked="" type="checkbox"/> Hotel <input type="checkbox"/> Bar/Tavern <input type="checkbox"/> Catering Establishment <input type="checkbox"/> Adult Entertainment <input type="checkbox"/> Wine Bar <input type="checkbox"/> Dance Club <input type="checkbox"/> Sports Bar <input type="checkbox"/> 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"/> NO	YES - License Issued
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.	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	SEE ATTACHED
Is the 200 Foot Rule applicable? If yes, please attach a diagram of the schools and houses of worship that trigger the rule.	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	
Has applicant/owner(s) read MCB4 Policy Regarding Concentration and Location of Alcoholic-Serving Establishments?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	

Hours of Operation for the Sidewalk

8:55am - 10:45pm

8:55am - 11pm

8:55am - 10pm

OPERATIONAL DETAILS (Closing time will be when establishment is vacated of all patrons)									
HOURS* (Indoor Only)		MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY	
	Operation	8:55am - 10:45pm							→
	Kitchen	N/A							→
	Music	N/A							→
If you plan to have music, what type(s)? (Circle all that apply)			<input checked="" type="checkbox"/> BACKGROUND	<input type="checkbox"/> LIVE MUSIC	<input type="checkbox"/> DJ	<input type="checkbox"/> JUKE BOX	<input type="checkbox"/> 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	170	170	49	116	0	1	12	(Restaurant)	
OUTSIDE (Other than sidewalk cafe)	N/A	N/A	N/A	N/A	N/A	N/A	N/A		
SIDEWALK CAFE	N/A	25	8 16	16 30	N/A				
How many floors are there? What is the capacity for each floor?					FIVE (TWO OF FIVE ARE EMPLOYEE ONLY ACCESS)				
How frequently will the owner(s) be at the establishment?					AT ALL TIMES				
Will you be applying or intending to apply for a cabaret license with DCA? If yes, will there be dancing?					<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	EXISTING		
Will applicant have bottle or table service for beverage alcohol?					<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO			
Will you be hosting private, promotional or corporate events?					<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO			
Will outside promoters be used on a regular basis? If yes please describe.					<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO			
Will you have a security plan? If, yes please attach.					<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO			
Will security plan be implemented?					<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO			
Will State certified security personnel be used?					<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO			
Will New York Nightlife Association and NYPD Best Practices be followed?					<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO			
Will applicant be using delivery bicycles? If yes, how many?					<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO			
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?					<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO			
Where will delivery bicycles be stored during the day when not in use?					N/A				

** 107 hotel guest rooms.*

LOCATION & ZONING			
Is this a Special District? If yes, is it Clinton, West Chelsea or Hudson Yards?	X YES	NO	CLINTON
Does the building have a Certificate of Occupancy ("C of O") or a letter of no objection?	X YES	NO	
Is a Public Assembly permit required?	X YES	NO	EXISTING
Are your plans filed with DOB?	YES	NO	N/A

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	see attached	
	# 2		
	# 3		
	# 4		
	# 5		
Please provide dates when applicant met with the groups listed above.	PENDING		
Who was your contact person at each group you met with?	PENDING		
When did applicant post the notice that was provided?	11/1/17		
Where did applicant post the notice that was provided?	AT THE ENTRANCE OF THE ESTABLISHMENT		
Will applicant provide owner cell phone number to neighbors and respond to complaints that arise? Please provide number in space provided.	X YES	NO	
Will applicant inform the Community Board office of its job openings and/or provide a hyperlink to applicants jobs webpage?	X YES	NO	

BUILDING DESIGN			
State the name and type of business previously located in the space.	HOTEL AND RESTAURANT		
Has a liquor-licensed establishment previously occupied this space at any time? If yes, please provide the name of the business.	X YES	NO	42ND ST HOTEL LLC & 42ND ST KITCHEN LLC
Do you plan any changes to the existing façade? If yes, please describe.	X YES	NO	NAME CHANGE
Will applicant have a vestibule within the establishment?	YES	X NO	
Will applicant use a storm enclosure?	YES	X NO	
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	X NO	
Will applicant comply with the NYC noise code?	X YES	NO	
Will the establishment have any of the following: (circle all that apply)	<input checked="" type="checkbox"/> FRENCH DOORS	<input type="checkbox"/> GARAGE DOORS	<input type="checkbox"/> 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?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	N/A
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?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	N/A
Has applicant obtained an acoustical report from a certified sound engineer to assess potential noise disturbance to the neighboring residents and buildings?	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?	X YES	NO	
Will the kitchen exhaust system extend to the roof?	YES	NO	EXISTING
Will the establishment have an illuminated sign?	X YES	NO	
Will the establishment have a canopy extending over the sidewalk?	YES	X NO	
Where will the air conditioner be located? What type is it?	EXISTING		
When was the air conditioner installed?	N/A - IN GOOD CONDITION		

N/A

OUTDOOR ITEMS - OTHER THAN SIDEWALK CAFE		
Has the applicant/owner(s) read MCB 4 Rear Yard Rooftop Policy?	<input checked="" type="radio"/> YES	<input type="radio"/> NO
Will applicant use any outdoor spaces: rooftop, rear yard, patio, porch, balcony, pavilion, tents, deck or gazebo? If yes, which one(s)?	<input type="radio"/> YES	<input checked="" type="radio"/> NO
Are the floorplans for the outdoor space(s) included?	<input checked="" type="radio"/> YES	<input type="radio"/> NO
Will applicant close and vacate the outdoor space(s) by 11PM on Friday & Saturday and 10 PM on all other days?	<input type="radio"/> YES	<input checked="" type="radio"/> NO
Will the service and consumption of alcohol in any outdoor space only be via seated food service?	<input type="radio"/> YES	<input type="radio"/> NO
Will applicant not allow standing space for patrons to drink or smoke in any outdoor space(s)?	<input checked="" type="radio"/> YES	<input type="radio"/> NO
Will there be no amplified music, as per the law?	<input type="radio"/> YES	<input type="radio"/> NO
If amplified sound is played inside the establishment, will windows and doors be closed?	<input checked="" type="radio"/> YES	<input type="radio"/> NO
Will applicant agree to post signs outside asking customers to respect the neighbors?	<input checked="" type="radio"/> YES	<input type="radio"/> NO
Will applicant agree to train staff to encourage a peaceful environment?	<input checked="" type="radio"/> YES	<input type="radio"/> NO
Will applicant provide effective sound control (landscaping enclosure, soundproofing tenants apartments)	<input checked="" type="radio"/> YES	<input type="radio"/> NO
Will there be a lighting plan that allows safe usage of the outdoor space without disrupting neighbors?	<input checked="" type="radio"/> YES	<input type="radio"/> NO

OUTDOOR ITEMS – SIDEWALK CAFÉ			
Has the applicant/owner(s) read MCB4 Sidewalk Café Policy?	YES	NO	Yes
Will applicant be applying for a sidewalk café now or in the future?	YES	NO	Now
Is applicant in this application seeking to include a sidewalk café in its liquor license?	YES	NO	Yes
If yes, has applicant submitted an application and plans to NYC Dept. of Consumer Affairs? Please attach application and plans.	YES	NO	Yes
Will applicant close and vacate the sidewalk café by 11 PM on Friday & Saturday and 10 PM on all other days?	YES	NO	NO YES
Will applicant be serving alcohol in the sidewalk café? If so, will you have waiter service?	YES	NO	Yes, Yes
Will the café have a 3 ft. wide serving aisle running the entire length of the sidewalk café?	YES	NO	Yes
Will applicant mark the perimeter of the café on the sidewalk?	YES	NO	Yes
Will the service and consumption of alcohol in the sidewalk café only be via seated food service?	YES	NO	Yes
Will the sidewalk café not provide standing space for drinking or smoking?	YES	NO	Yes
Will applicant use any portable natural gas heaters? If so, do you have the requisite approvals from DOB & the Fire Department?	YES	NO	TBD, will have all proper permitting
Will applicant have a lighting plan that will allow safe usage of the outdoor space without disrupting neighbors?	YES	NO	Yes
Will all furniture, plants and barricades be stored inside between the evening closing hours and the morning opening hours?	YES	NO	Yes
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	Yes
Will applicant use umbrellas?	YES	NO	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	Yes

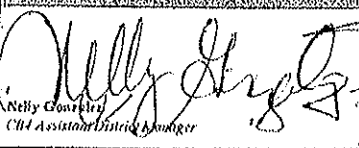

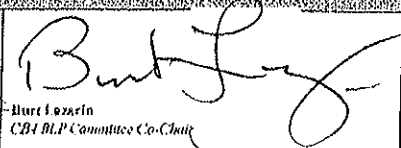
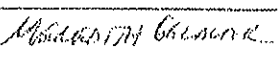

ADDITIONAL STIPULATIONS: (Office Use Only)

- Sidewalk Cafe will be closed and vacated no later than 10 p.m. Sunday - Thursday and 11 p.m. Friday & Saturday
- Two tables and four seats on eastern end of sidewalk cafe will be eliminated per diagram
- Remaining 8 tables will be placed against building facade per diagram
- There will be no divider/barriers/planters enclosing sidewalk cafe
- Sidewalk cafe tables & chairs will be removed from the sidewalk when not in use
- Applicant will pursue petition with Department of Transportation to extend hotel loading zone to hotel property line

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: MCB4's recommendation is based on a vote taken at its 12/6/17 full board meeting, with 45 members voting in favor of the recommendation, 0 members opposed, 0 members abstaining and 0 present but not eligible)		<input checked="" type="checkbox"/> Denial unless all stipulations agreed to by applicant/owner are part of the method of operation <input type="checkbox"/> Denial <input type="checkbox"/> Approval
CB4 REPRESENTATIVES		
 Kelly Grady CB4 Assistant District Manager	 Frank Ippolito CB4 BLP Committee Co-Chair	 Marc Luzzati CB4 BLP Committee Co-Chair
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 →	 KEVIN FEATON PRINT NAME OF APPLICANT	 SIGNATURE OF APPLICANT
		11/3/17, DATE

Kevin Featon *KFA* 11/14/17

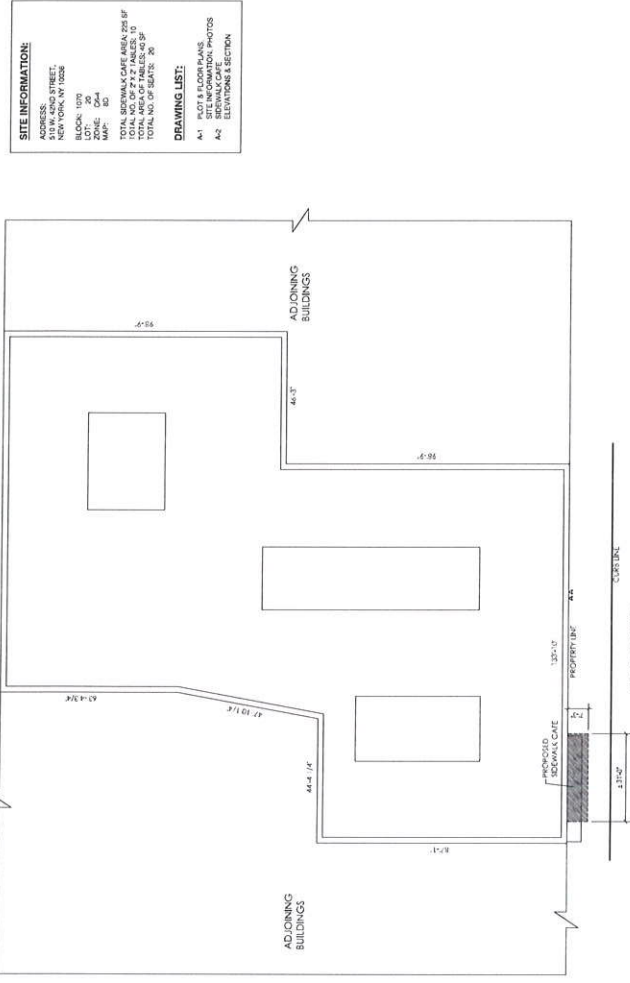


3 PHOTO LOOKING WEST

4 PHOTO LOOKING SOUTH (FRONT VIEW)

5 PHOTO LOOKING EAST

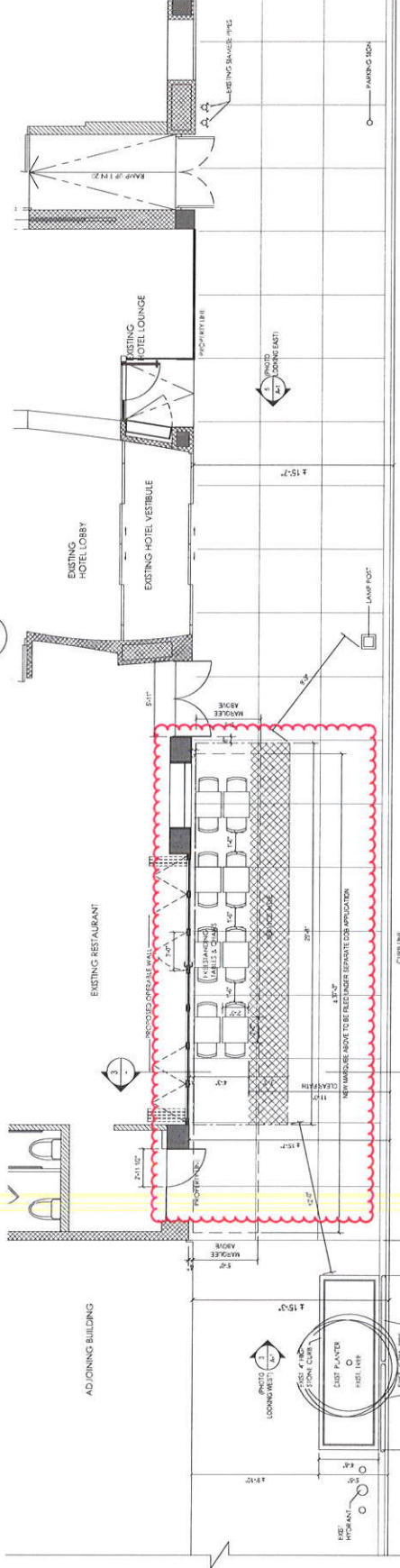
41 ST STREET
128'-0"



SITE INFORMATION:
 ADDRESS: 41ST STREET
 CITY: NEW YORK, NY 10018
 BLOCK: 1070
 ZONING: C6
 MAP: 60
 TOTAL SIDEWALK CAFE AREA: 205 SF
 TOTAL SIDEWALK CAFE SEATING: 10
 TOTAL AREA OF TABLES: 50 SF
 TOTAL NO. OF SEATS: 20

DRAWING LIST:
 A1 SITE INFORMATION, SITE INFORMATION, PHOTOS
 A2 SIDEWALK CAFE SEATING & SECTION

1 PLOT PLAN NOT TO SCALE



2 PROPOSED SIDEWALK CAFE PLAN SCALE: 1/4" = 1'-0"

CACHET BOUTIQUE HOTEL
 510 West 42nd Street
 NEW YORK, NY 10036

CLIENT:
 Cachet Hotel Group
 87 M. Truitt Street, 8th Floor, Unit 2A,
 New York, NY 10011
 Phone: (212) 486-4000 Fax: (212) 486-4077
 Website: www.cachethotel.com

ARCHITECT:
 ACHESON DOYLE PARTNERS
 ARCHITECTS, P.C.
 212 E. 41st Street, 10th Floor, Unit 10011
 New York, NY 10017
 Phone: (212) 486-4000 Fax: (212) 486-4077
 Website: www.achsondoyle.com

ENGINEER:
 Archibler Architecture
 140 Broadway, 20th Floor, New York, NY 10005
 Phone: (212) 332-2211 Fax: (212) 481-5108
 Website: www.archibler.com

GENERAL CONTRACTOR:
 William Vitacco Associates LTD
 700 Columbus Avenue, 10th Floor,
 New York, NY 10027
 Phone: (212) 486-4000 Fax: (212) 486-4077
 Website: www.wva.com

**SIDEWALK CAFE
 PLOT & FLOOR
 PLANS, SITE
 INFORMATION**

PROJECT NAME	DATE	SCALE
PROJECT NUMBER	DATE	SCALE
DRAWN BY	DATE	SCALE
CHECKED BY	DATE	SCALE
DATE	SCALE	SCALE

A-1