

# Manhattan Community Board 4

(All Fields Must Be Completed)

## Liquor License Stipulations Application

<b>CORPORATION NAME</b> 667 Tenth Avenue. Corp		<b>DOING BUSINESS AS (DBA)</b> Fast Eddies			
<b>STREET ADDRESS</b> 667 10th Ave		<b>CROSS STREETS</b> W 47th St.	<b>ZIP CODE</b> 10036		
<b>OWNER</b> <i>(Attach a list of all the people that will be associated/listed with the license)</i>	<b>NAME:</b> Scott Sternick	<b>ATTORNEY/ REPRESENTAIVE</b>	<b>NAME:</b>		
	<b>PHONE:</b> (212)920-9370		<b>PHONE:</b>		
	<b>EMAIL:</b> scottsternick@aol.com		<b>EMAIL:</b>		
<b>MANAGER</b>	<b>NAME:</b> Kurt Kalm	<b>LANDLORD</b>	<b>NAME:</b>		
	<b>PHONE:</b>		<b>PHONE:</b>		
	<b>EMAIL:</b>		<b>EMAIL:</b>		
<b>APPLICATION TYPE (Check One)</b>					
<input type="radio"/> <b>New</b>	Has applicant owned or managed a similar business?		<b>YES</b>	<b>NO</b>	
	What is/was the name and address of establishment?				
	What were the dates applicant was involved with this former premise?				
<input type="radio"/> <b>Transfer</b>	What is the prior license # and expiration date?				
	Is applicant making any alterations or operational changes?		<b>YES</b>	<b>NO</b>	
	<i>If alterations or operational changes are being made, please describe/list all changes.</i>				
<input checked="" type="radio"/> <b>Alteration</b>	What is the current license # and expiration date?		Sidewalk Cafe License #: 1424351		
	<i>Please list/describe the nature of all the changes and attach the plans:</i> Changing Layout of Sidewalk Cafe				
<b>METHOD OF OPERATION</b>					
<b>TYPE OF ALCOHOL</b>	<input checked="" type="checkbox"/> Liquor/Wine/Beer <input type="checkbox"/> Beer <input type="checkbox"/> Wine & Beer				
<b>ESTABLISHMENT TYPE</b>	<input type="checkbox"/> Restaurant <input type="checkbox"/> Cabaret <input checked="" type="checkbox"/> Night Club <input 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?		<b>YES</b>	<b>NO</b>		
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.		<b>YES</b>	<b>NO</b>		
Is the 200 Foot Rule applicable? If yes, please attach a diagram of the schools and houses of worship that trigger the rule.		<b>YES</b>	<b>NO</b>		
Has applicant/owner(s) read MCB4 Policy Regarding Concentration and Location of Alcoholic-Serving Establishments?		<b>YES</b>	<b>NO</b>		

**OPERATIONAL DETAILS (\*Closing time will be when establishment is vacated of all patrons)**

		MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY
<b>HOURS*</b> <i>(Indoor Only)</i>	<b>Operation</b>	11AM - 4AM	11AM - 4AM	11AM - 4AM	11AM - 4AM	11AM - 4AM	11AM - 4AM	11AM - 4AM
	<b>Kitchen</b>							
	<b>Music</b>							

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
<b>INSIDE</b>	Under 75	Under 75	0	30	1		
<b>OUTSIDE</b> <i>(Other than sidewalk café)</i>							
<b>SIDEWALK CAFÉ</b>			8	29			

How many floors are there? What is the capacity for each floor? 1 floor

How frequently will the owner(s) be at the establishment? Multiple times a day

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.	<input checked="" type="checkbox"/>	NO	1 front door and 1 side door
Will security plan be implemented?	<input checked="" type="checkbox"/>	NO	
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	
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	<input checked="" type="checkbox"/>	

Where will delivery bicycles be stored during the day when not in use?

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

<b>Community Notification/Relations</b>			
<b>NOTIFICATION:</b> 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	West 46th Street Block Association: Steve Fanto at <a href="mailto:stephenfanto@gmail.com">stephenfanto@gmail.com</a>	
	# 2	- West 46th Street Block Association: Allison Tupper at <a href="mailto:atallisontupper@verizon.net">atallisontupper@verizon.net</a>	
	# 3	West 47th/48th Streets Block Association: Elke Fears at <a href="mailto:aefearshk@earthlink.net">aefearshk@earthlink.net</a>	
	# 4	West 47th/48th Streets Block Association: Larry Roberts at <a href="mailto:larrymichaelroberts@gmail.com">larrymichaelroberts@gmail.com</a>	
	# 5	West 47th/48th Streets Block Association: Steven Riedl at <a href="mailto:chluderemyc@yahoo.com">chluderemyc@yahoo.com</a>	
Please provide dates when applicant met with the groups listed above.		12/12/2016	
Who was your contact person at each group you met with?		Please see above	
When did applicant post the notice that was provided?		Yes	
Where did applicant post the notice that was provided?			
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"/>	NO (212)920-9370
Will applicant inform the Community Board office of its job openings and/or provide a hyperlink to applicants jobs webpage?		<input checked="" type="checkbox"/>	NO

**BUILDING DESIGN**

**THIS IS A SIDEWALK CAFE MODIFICATION**

State the name and type of business previously located in the space.			
Has a liquor-licensed establishment previously occupied this space at any time? If yes, please provide the name of the business.	YES	NO	
Do you plan any changes to the existing façade? If yes, please describe.	YES	<input checked="" type="checkbox"/>	
Will applicant have a vestibule within the establishment?	YES	NO	
Will applicant use a storm enclosure?	YES	<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?	<input checked="" type="checkbox"/>	NO	
Will applicant comply with the NYC noise code?	<input checked="" type="checkbox"/>	NO	
Will the establishment have any of the following: (circle all that apply)	<b>FRENCH DOORS</b>	<b>GARAGE DOORS</b>	<b>WINDOWS THAT CAN BE OPENED</b>
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"/>	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?	<input checked="" type="checkbox"/>	<input checked="" 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 checked="" type="checkbox"/>	NO	
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="checkbox"/>	NO	
Will the kitchen exhaust system extend to the roof?	YES	NO	No Kitchen
Will the establishment have an illuminated sign?	YES	NO	
Will the establishment have a canopy extending over the sidewalk?	YES	<input checked="" type="checkbox"/>	
Where will the air conditioner be located? What type is it?			
When was the air conditioner installed?			

*DM*

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

OUTDOOR ITEMS – SIDEWALK CAFÉ			
Has the applicant/owner(s) read MCB4 Sidewalk Café Policy?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	
Will applicant be applying for a sidewalk café now or in the future?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	this is a sidewalk cafe modifiacaton
Is applicant in this application seeking to include a sidewalk café in its liquor license?	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	this is a sidewalk cafe modification
If yes, has applicant submitted an application and plans to NYC Dept. of Consumer Affairs? Please attach application and plans.	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	
Will applicant close and vacate the sidewalk café by 11 PM on Friday & Saturday and 10 PM on all other days?	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	
Will applicant be serving alcohol in the sidewalk café? If so, will you have waiter service?	<input checked="" type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	SM
Will the café have a 3 ft. wide serving aisle running the entire length of the sidewalk cafe?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	
Will applicant mark the perimeter of the café on the sidewalk?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	
Will the service and consumption of alcohol in the sidewalk café only be via seated food service?	<input checked="" type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	SM
Will the sidewalk café not provide standing space for drinking or smoking?	<input checked="" type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	SM
Will applicant use any portable natural gas heaters? If so, do you have the requisite approvals from DOB & the Fire Department?	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	
Will applicant have a lighting plan that will allow safe usage of the outdoor space without disrupting neighbors?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	
Will all furniture, plants and barricades be stored inside between the evening closing hours and the morning opening hours?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	
Will all furniture be stored inside between December 21 <sup>st</sup> and March 21 <sup>st</sup> , and any other day when it rains or snows?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	
Will applicant use umbrellas?	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> 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?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	

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

- Sidewalk Cafe will be closed and vacated no later than midnight Sunday through Thursday and 1a.m. Friday and Saturday

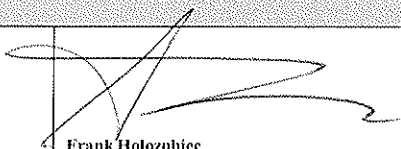

***To the extent any additional stipulation on pages 7 and 8 of this application conflicts with any response on pages 1 – 6 of this application, the stipulations on pages 7 and 8 control.***

**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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<b>CB4 REPRESENTATIVES</b>		
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>

**APPLICANT AGREEMENT WITH THE COMMUNITY**

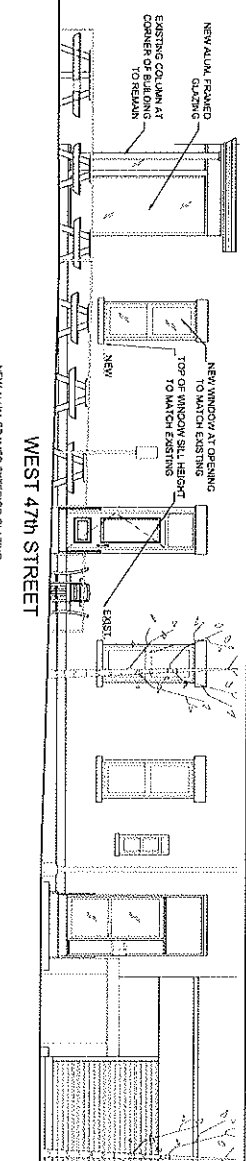
Applicant agrees to these stipulations as the basis for the community support of this application and acknowledges that all of these stipulations are essential prerequisites to the MCB4 recommendation regarding this application. Applicant agrees to have these stipulations incorporated in the method of 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.

<b>SIGN HERE</b> →	 PRINT NAME OF APPLICANT	Scott Sternick SIGNATURE OF APPLICANT	12/13/26 DATE
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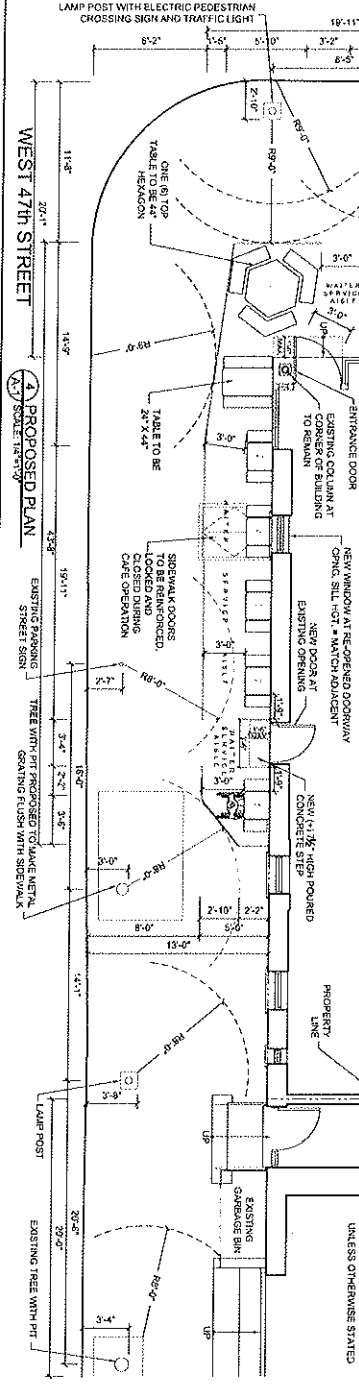
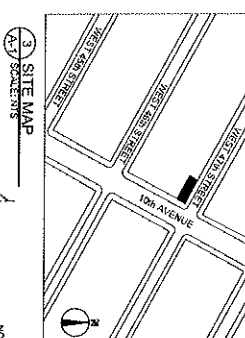
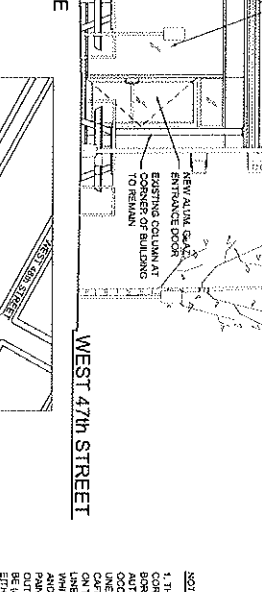




**10th AVENUE**  
**PROPOSED SIDE ELEVATION**  
 (A) SCALE 1/8" = 1'-0"



**10th AVENUE**  
**PROPOSED ELEVATION**  
 (B) SCALE 1/8" = 1'-0"



**NOTE:**  
 DIMENSIONS TO BE 24" X 24" UNLESS OTHERWISE STATED

1. NO REAR, ALCOHOL OR SPENTIOUS LIQUORS SHALL BE SERVED ON PREMISES OR AT ANY TABLE THEREON, UNDER A LICENSE ISSUED BY THE NEW YORK STATE LIQUOR AUTHORITY.

2. A SINGLE MENU NO LARGER THAN THREE (3) SQUARE FEET SHALL BE POSTED IN THE SIDEWALK CASE, SO THAT IT MAY BE SEEN FROM THE STREET.

**SCALE**  
 1" = 100'-0"

**PROPOSED PLAN, ELEVATIONS AND SITE PLAN**

**667 10th AVENUE**  
 NEW YORK, N.Y. 10019

**SWA CORP.**  
 100 EAST MAIN STREET  
 NEW YORK, N.Y. 10038

**DATE:** 10/11/11

**SCALE:** 1/8" = 1'-0"

**PROJECT NO.:** A-001.01

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**SWA**

THE OFFICE OF S. STEVE WYGODZKI  
 ARCHITECTS AND PLANNERS  
 100 EAST MAIN STREET  
 NEW YORK, N.Y. 10038  
 PHONE: 212-677-1111  
 FAX: 212-677-1112

IF IS A VIOLATION OF N.Y. STATE LAW TO REPRODUCE OR TRANSMIT IN ANY FORM OR BY ANY MEANS, WITHOUT THE WRITTEN PERMISSION OF SWA CORP.

**ISSUE DATES:**

NO. DATE DESCRIPTION

**REVISIONS:**

NO. DATE DESCRIPTION

01 10/11/11 PLANS AND ELEVATIONS REVISED TO REFLECT PERMITS

02 10/26/11 PLANS AND ELEVATIONS REVISED TO REFLECT PERMITS

03 10/26/11 PLANS AND ELEVATIONS REVISED TO REFLECT PERMITS

**DCA #:**

**ILLUSTR. #:**

**COMMUNITY BOARD #:** 104

**BLOCK #:** 1038

**LOT #:** 33

**# OF TABLES:** 8

**# OF SEATS:** 29

**CAFE AREA:** 331 SQ. FT.

**UNRECORDED SIDEWALK CASE FOR 667 10th AVENUE**

**PROPOSED PLAN, ELEVATIONS AND SITE PLAN**

**DATE:** 10/11/11

**SCALE:** 1/8" = 1'-0"

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