

THE CITY OF NEW YORK MANHATTAN COMMUNITY BOARD 3

59 East 4th Street - New York, NY 10003 Phone (212) 533-5300 www.cb3manhattan.org - mn03@cb.nyc.gov

Tareake Dorill, Board Chair

Susan Stetzer, District Manager

Community Board 3 Liquor License Application Questionnaire

NOTE: ALL ITEMS MUST BE SUBMITTED FOR APPLICATION TO BE CONSIDERED. The following items and questionnaire nackage are due by date listed in small invite.								
The following items and questionnaire package are due by date listed in email invite: Schematics, floor plans or architectural drawings of the inside of the premise.								
A proposed food and or drink menu.								
The following items are due by noon Friday before the meeting:								
Petition in support of proposed business or change in business with signatures from residential tenants at location and in buildings adjacent to, across the street from and behind proposed								
location. Petition must give proposed hours and method of operation. For example: restaurant,								
sports bar, combination restaurant/bar. (petition provided)								
Notice of proposed business to block or tenant association if one exists. You can find community groups and contact information on the CB 3 website:								
https://www1.nyc.gov/site/manhattancb3/resources/community-groups.page								
(this is not required but strongly suggested if a relevant group exists)								
Proof of conspicuous posting of notices at the site for 7 days prior to the meeting (please include newspaper with date in photo or a timestamped photo).								
Check which you are applying for: ☐ new liquor license ☐ alteration of an existing liquor license ☐ corporate change								
The wind and include an arrangement and exportante change								
Check if either of these apply:								
□ sale of assets □ upgrade (change of class) of an existing liquor license								
Today's Date:								
Is location currently licensed? ■ Yes ■ No Type of license: Tavern Wine								
If alteration, describe nature of alteration:								
Previous or current use of the location: Darkhorse Concepts LLC								
Corporation and trade name of current license: Darkhorse Concepts LLC dba The House of Machine								
APPLICANT:								
Premise address: 49 Monroe Street								
Cross streets: b/n Market & Pike Streets								
Name of applicant and all principals: Darkhorse Concepts LLC; Jimmy Stephen Pierce and Stephen Hill								
Trade name (DBA): The House of Machines								

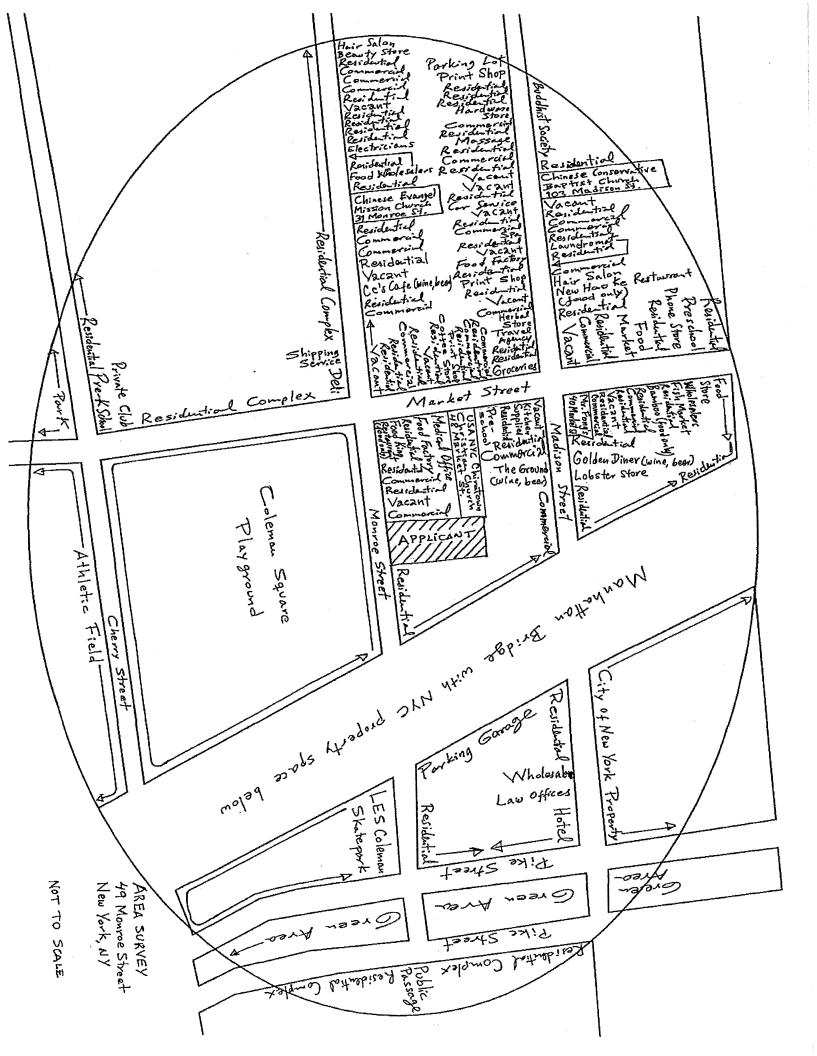
PREMISE:							
Type of building and number of floors: 4 story brick							
Does premise have a valid Certificate of Occupancy, including for any back/side yard or roof use?							
☑ Yes □ No What is maximum NUMBER of people permitted 74							
What is the zoning designation (check zoning using map: http://gis.nyc.gov/doitt/nycitymap/ - please							
give specific zoning designation, such as R8 or C2): R 7-2							
PROPOSED METHOD OF OPERATION:							
What are the proposed days/hours of operation? (Specify days and hours each day and hours of outdoor							
space, if applicable) 7 days per week 12:00 pm - 2:00 am							
Will any other business besides food or alcohol service be conducted at premise, i.e., retail? ☐ Yes ☒ No							
If yes, please describe what type:							
Number of indoor tables? S Total number of indoor seats? 1/5							
How many stand-up bars/bar seats are located on the premise (number, length, and location) $\frac{1/8}{4\rho\rho\sigma}$							
(A stand-up bar is any bar or counter -with seating or not- where you can order, pay for, and receive alcohol)							
Does premise have a full kitchen? □ Yes ☑ No							
Does it have a food preparation area? 🗷 Yes 🗖 No (If any, show on diagram)							
Is food available for sale? 🗷 Yes 🗖 No If yes, describe type of food and submit a menu							
What are the hours the kitchen will be open? All hours of operation							
Will a manager or principal always be on site? ☑ Yes ☐ No If yes, which?							
How many employees will there be? 5-7							
Do you have or plan to install ☐ French doors ☐ accordion doors or ☐ windows?							
Will there be TVs/monitors? □ Yes 図 No (If Yes, how many?)							
Will premise have music? Yes □ No							
If Yes, what type of music? 🗷 Live musician 🗖 DJs 🗷 Streaming services/playlists							
If other type, please describe							
What will be the music volume? 🗷 Background (conversational) 🗖 Entertainment (live music venue							
level) Please describe your sound system: Computer generated small speakers							
Will you host any promoted events, scheduled performances, or any event at which a cover fee is							
charged? If Yes, what type of events or performances are proposed and how often? No							

outside promoters?							
How do you plan to manage vehicular traffic and crowds on the sidewalk caused by your establishment? Please attach plans. (Please do not answer "we do not anticipate congestion.")							
One employee will be designated to monitor the sidewalk and street to ensure that or neighbors are not Will there be security personnel? Yes No (If Yes, how many and when)							
How do you plan to manage noise inside and outside your business so neighbors will not be affected? Please attach plans. One employee will be designated to monitor the sidewalk and street to ensure that our neighbors are not affected by our bosiness.							
Is sound proofing installed? \(\sigma \) Yes \(\sigma \) No No No No No No No No							
Are there current plans to use the Open Restaurants program for the sale or consumption of alcoholic beverages outdoors? (includes roof & yard) Yes No If Yes, describe and show on diagram:							
APPLICANT HISTORY: Has this corporation or any principal been licensed for sale of alcohol previously? Yes No If yes, please indicate name of establishment: Darkhorse Concepts LLC dba Twe Horse of Machines Address: Community Board #3 Dates of operation: 2022-Present							
Dates of operation: 2022-Present							
Has any principal had work experience similar to the proposed business? Yes No If Yes, please attach explanation of experience or resume. Note: failure to disclose previous experience or information hampers the ability to evaluate this application. Does any principal have other businesses in this area? No If Yes, please give trade name, address and describe the business							
Has any principal had SLA reports or action within the past 5 years? ☐ Yes ☒ No If Yes, attach list of violations and dates of violations and outcomes, if any.							
Attack a congrete diagram that indicates the leasting (name and address) and tatal annulum of							

Attach a separate diagram that indicates the location (name and address) and total number of establishments selling/serving beer, wine (B/W) or liquor (OP) for 2 blocks in each direction. Please indicate whether establishments have On-Premise (OP) licenses. Please label streets and avenues and identify your location. Use letters to indicate Bar, Restaurant, etc. The diagram must be submitted with the questionnaire to the Community Board before the meeting.

LO	CATION:								
	w many licensed establishments are within 1 block? See attached								
Ηον	How many On-Premise (OP) liquor licenses are within 500 feet? See attached								
ls t	s the premise within 200 feet on the same street of any school or place of worship? 🗖 Yes 🗷 No								
co	MMUNITY OUTREACH:								
imr cor ado	ase see the Community Board website to find block associations or tenant associations in the mediate vicinity of your location for community outreach. Applicants are encouraged to reach out to mmunity groups, but it is not required. Also use provided petitions, which clearly state the name, dress, license for which you are applying, and the hours and method of operation of your ablishment at the top of each page. (Attach additional sheets of paper as necessary)								
fas	e are including the following questions to be able to prepare stipulations and have the meeting be ter and more efficient. Please answer per your business plan; do not plan to negotiate at the seting.								
1. 2.	My license type is: □ beer & cider □ wine, beer & cider ☑ liquor, wine, beer & cider ☐ I will operate a full-service restaurant, specifically a (type of restaurant)								
	■ I will operate a Tavern								
	with a kitchen open and serving food during all hours of operation OR with less than a full-								
	service kitchen but serving food during all hours of operation OR Other								
3.	My hours of operation will be: 12:00 pm - 2:00 am								
	Mon 12:00 pm - 2:00 am ; Tue 12:00 pm - 2:00 am ; Wed 12:00 pm - 2:00 am ; Fri 12:00 pm - 2:00 am ; Sat 12:00 pm - 2:00 am								
	Sun 12:00 pm - 2:00 am ; Fri 12:00 pm - 2:00 am ; Sat 12:00 pm - 2:00 am ; Sat 12:00 pm - 2:00 am								
	hour, and all patrons are to be cleared from business at specified closing hour.)								
4.	□ I will not use outdoor space for commercial use (including Open Restaurants) OR								
	I will close all outdoor dining allowed under the temporary Open Restaurants program and any								
	other subsequent uses by 10:00 P.M. all days and not have any speakers or TV monitors outdoors								
5.	■ I will employ a doorman/security personnel:								

7.	X	I will close any front or rear façade doors	■ I will have a closed fixed façade with no				
	and	windows at 10:00 P.M. every night or	open doors or windows except my entrance				
	wh	en amplified sound is playing, including but	door, which will close by 10:00 P.M. or when				
	not	limited to DJs, live music and live	amplified sound is playing, including but not				
	nor	nmusical performances, or during	limited to DJs, live music and live nonmusical				
	una	amplified performances or televised sports.	performances, or during unamplified				
			performances or televised sports.				
8.	l wi	ill not have 🗷 DJs, 🗖 live music, 🗖 third-party pro	omoted events, 🛮 any event at which a cover				
	fee	is charged, \blacksquare scheduled performances, \blacksquare more	than DJs per, 🗖 more than <u>5-6</u>				
	priv	vate parties per					
9.		I will play ambient recorded background music o	nly.				
10.		I will not apply for an alteration to the method o	f operation or for any physical alterations of any				
11		ure without first coming before CB 3. I will not seek a change in class to a full on-prem	icas liquar licanca without first obtaining				
11.		proval from CB 3.	ises ilquoi ilcerise without first obtaining				
12.	X	I will not participate in pub crawls or have party	buses come to my establishment.				
13.	8. 🗵 I will not have unlimited drink specials, including boozy brunches, with food.						
14.		I will not have a happy hour or drink specials wit	h or without time restrictions OR 🗵 I will have				
	hap	ppy hour and it will end by $\frac{7:00 \text{ pm}}{}$.					
15.		I will not have wait lines outside. I will have a	staff person responsible for ensuring no				
	loit	ering, noise or crowds outside.					
16.	X	I will conspicuously post this stipulation form be	side my liquor license inside of my business.				
17.	X	Residents may contact the manager/owner at th	e number below. Any complaints will be				
addressed immediately. I will revisit the above-stated method of operation if necessary in order							
	minimize my establishment's impact on my neighbors. Name: Jimmy Stephen Pierce						
	Phone Number: (917) 355-7465						



Landess-Simon, Inc.

Legal & Commercial Photography 45 Lawlins Park Wyckoff, NJ 07481 Phone; (201) 848-5652 E-mail; landess@att.net

Re: 49 Monroe Street

1. Mr. Fong's - 40 Market Street (2881) 2. Craft Cooking Inc 41 monroe st (2341)

Schools & Churches

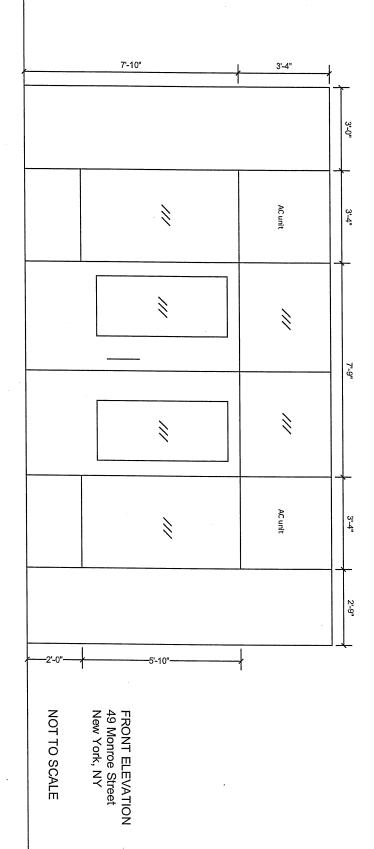
(Non-exclusive 1. USA NYC Chinatown Christian Church - 48 Market Street - (1481) Mixed Residential 2. Chinese Evangel Mission Church - 31 Monroe Street - (341) & Commercial)

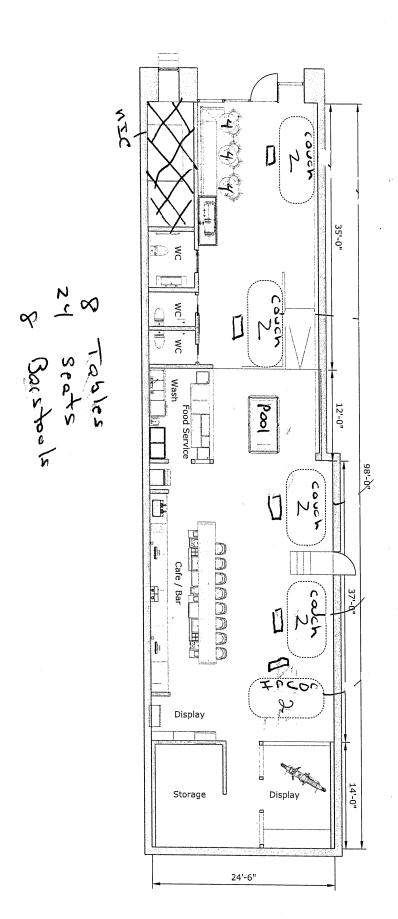
3. Chinese Conservative Baptist Church-103 Madison Street-(454)

Market Street

Not to Scal	BLOCK PLOT 49 Monroe Street New York, NY	← Coleman Square -	Monroe Street	Resident P. Resident	tial
S P P	c Plot oe Street k, Ny		†	dential	

Manhattan Bridge







Sandwiches:

On baguette \$8, On croissant \$6
-Turkey, baby arugula, brie, green apple, balsamic/olive oil
-Roma Tomato, S&P, fresh basil, Mozzarella
-Ham and Brie

Soup du jour & demi-baguette: Cup \$4, bowl \$6

Baked Goods:
Cookie \$3
Croissant \$3
Choc Croissant \$3
Baguette \$4
Sourdough \$5

Charcuterie \$9
Olive Medley
Baguette
Sliced Cheese
Apple
2x Stuffed grape leaves

Salads \$7
Baby Arugula, crumbled feta,
Green apple, balsamic & xvo

Chiffonade basil, Roma wedges, S&P, crumbled feta, xvo over mixed greens