

MANHATTAN COMMUNITY BOARD 1
Liquor License Application Questionnaire
Summary Revised 3/2024

1- Applicant Name

102-110 John Mazal LLC

2- Establishment Name (Corporate & DBA)

102-110 John Mazal LLC

3- Address for Proposed License

5 Platt Street, New York, NY 10038

4- Type of License (Full liquor/OP, beer and wine, etc.) **OP HOTEL LIQUOR**

7.1 Type of application

☒ New ☐ Alteration ☐ Change in Method of Operation, ☐ Corporate Change,
☐ Class Change

5- Proposed Days/Hours of Operation

* Mon - Thurs **11am-2am** Fri - Sat **11am-2am** Sun **11am-2am**

*Hotel 24/7

4.1 What floor(s) is the establishment on? **Cellar, 1st - 6th Floors**

6- Square Footage of Location **50,723 sq ft**

7- Method of Operations (bar restaurant, Catering, etc)

HOTEL with Restaurant

8- Outdoor Seating? ☐ Sidewalk ☐ Roadbed ☐ Rooftop, ☒ Terrace, or ☐ Other outside

8.1 Do you intend to apply for DOT Outdoor dining permit? ☐ Yes ☒ No

9- Type of Music? ☒ Live ☒ Recorded ☐ DJ

10- Volume of Music? ☒ Background ☐ Other

(no sound from events, performances or music will be heard outside the premises or by neighbors)

11- Where will the kitchen exhaust system vent to? **ventless oven; tri heat technology**

12- Applicant's Previous Licensed Establishments and Addresses

- see attached-

Manhattan Community Board 1 Liquor License Stipulations

I, Scott Gericke, as a qualified representative of 102-110 John Mazal LLC, located at 5 Platt St, New York, NY 10038, New York, New York, agree to the following stipulations for the applicant's Method of Operation for their OP Hotel Liquor license

(1) My requested hours of operation are 11am - 2am Monday – Thursday, 11am - 2am Friday – Saturday, 11am - 2am Sunday

(1.a) CB approved hours of operation 11am-2am Monday – Thursday, 11am-2am Friday – Saturday, 11am-2am Sunday and
(I understand this to mean that all patrons will be cleared from the establishment at the specified hour). 2nd floor terrace hours of operation 7am-10pm daily

(2) I will operate a full-service, (please describe type of establishment):

Hotel with Restaurant with full food service until _____ hour(s) before closing.

(3) I will install soundproofing (please describe type) Curtain wall facade with Termofiber safing

(please describe location) _____

(4) I will have: DJs ☐ Yes ☐ No Live Music ☐ Yes ☐ No Recorded Music ☐ Yes ☐ No Dancing ☐ Yes ☐ No
Promoted events ☐ Yes ☐ No Cover events ☐ Yes ☐ No Scheduled performances ☐ Yes ☐ No

(5) Volume of music, events, performances will be at background levels only. If it can be heard outside, or by neighbors, it is not background music. ☒

(6) I will close all doors and windows by _____ Mon- Thur, _____ Fri - Sat _____ Sun.

☒ I will not have open doors or windows.

(7) I will have delivery of regular supplies, goods and services during the hours of 7am - 6pm

(8) I will have garbage collected during the hours of 7am - 6pm

(9) I will employ a doorman/security personnel on the following days and hours: N/A

(10) I will actively manage crowds congregating on the street at night, to minimize disturbances to residents. ☒

(11) I will not apply to the SLA for an alteration to the method of operation agreed to by this stipulation without first notifying Community Board 1. ☒

(12) I will not apply for a sidewalk café license until at least a year after beginning operation. ☐ Yes ☐ No

(13) I will conspicuously post this stipulation form beside my liquor license inside of my business. ☒

(14) I confirm that I have _____ violations from previous establishments for which I have served as a principal.

(15) I will (additionally):

The restaurant and bar will be closed to non-guest patrons at 12:00AM on Sundays. The restaurant has agreed to 12 buyouts per year. Applicant has agreed to coordinate with local businesses for containerized garbage pickup before midnight.

(16) Residents may contact the manager/owner at the below number. Complaints will be addressed immediately and I will revisit the above-stated method of operation if necessary in order to minimize my establishment's impact on my neighbors.

Name: Scott Gericke Phone Number: 212-808-4000. ext 2258

Alternate Contact: _____ Phone Number: _____

I hereby certify that the information provided above is truthful and accurate based upon my personal belief.

Signed

Sworn to this 7th day of April

Dated

Notary Public

Michael Zarifpoor
Notary Public, State of New York
Registration No. 02ZA0026974
Qualified in Nassau County
Commission Expires July 18, 2021

Community Board 1 requests that the SLA add these stipulations to the license of the above-mentioned applicant. These stipulations and board resolution shall supersede all other documents.

Manhattan Community Board 1 Liquor License Stipulations for Large Venue Establishments

A "large venue" as defined by the NYC Department of Building designation on public assembly is an establishment designed to hold 75 persons or more

Name of Establishment: 102-110 John Mazal LLC

Address: 5 Platt St, New York, NY 10038

(1) I will follow the recommendations made by the sound engineer and outlined in the acoustical testing report. I will make sure that noise including sound and bass vibrations cannot be heard outside of the premises of my establishment.

(2) I will take the steps outlined in the resolution and in the traffic plan to manage vehicular and pedestrian activity.

(3) I will follow and abide by the conditions set forth in the resolution regarding garbage disposal and collection. Garbage will be collected on the follows days and hours: **Not yet contracted Days TBD, pick-up evening time TBD**

(4) I will have delivery of any event supplies, goods and services during the hours of **7:00 am - 6:00 pm**

(5) Lighting that affects the security of the community and quality of life of nearby residents must be considered, and must be appropriately lit while not attracting unsavory elements (e.g. rodents, flies, mold, hazardous substances, etc.)

(6) I understand that I must submit a notice to the community board for a street activity permit for my licensed establishment at least 45 days in advance

(7) I understand that I must appear before the Licensing & Permits Committee if I am applying for an expansion onto municipal property and provide proof of receipt of the 30-day Standardized Notice form, a block plot diagram detailing the municipal space I am expanding to, and documentation confirming the municipal's approval to use the space. I also agree that I must sign the stipulations sheet outlining the conditions that must be adhered to for the roadbed/sidewalk seating.

(8) Cameras will be used for viewing the entrance and egress.

(9) I agree to follow the conditions outlined in the resolution on security oversight of the establishment to prevent noise, congestion and unruly patrons.

(10) I will (additionally):

(15) Residents may contact the manager/owner at the below number. Complaints will be addressed immediately and I will revisit the above-stated method of operation if necessary in order to minimize my establishment's impact on my neighbors.

Name: Scott Gericke Phone Number: 212-808-4000, ext 2258

Alternate Contact: _____ Phone Number: _____

I hereby certify that the information provided above is truthful and accurate based upon my personal belief.

Signed

Dated

Sworn to this 7th day of April

Notary Public

Michael Zarifpoor
Notary Public, State of New York
Registration No. 02ZA002604
Qualified in Nassau County
Commission Expires July 18, 2023

Community Board I requests that the SLA add these stipulations to the license of the above-mentioned applicant. These stipulations and board resolution shall supersede all other documents.