THE CITY OF NEW YORK
MANHATTAN COMMUNITY BOARD 3

59 East 4th Street - New York, NY 10003
Phone (212) 533-5300 - Fax (212) 533-3659
www.cb3manhattan.org - info@cb3manhattan.org

Gigi Li, Board Chair

Susan Stetzer, District Manager

Community Board 3 Liquor License Stipulations

I, Lamia Funti, as a qualified representative of East Coast Fish Market Inc.,
located at 45 Avenue B, New York, New York 10009, New York, NY agree to the following stipulations:

1. ☒ I will operate a full-service restaurant, specifically a (type of restaurant) Fish restaurant,
   ☒ Kitchen open and serving food every night during all hours of operation.
2. My hours of operation will be 4:00 p.m. to 12:00 a.m. MONDAY - Friday
   11:00 AM to 12:00 A.M. Saturday & Sunday
   (I understand opening is "no later than" specified opening hour, and all patrons are to be cleared from business at specified closing hour.)
3. ☒ I will not use outdoor space for commercial use.
4. ☐ I will operate my sidewalk café no later than _____
5. ☐ I will employ a doorman/security personnel on the following days: _____
6. ☐ I will install soundproofing, _____
7. ☒ I will close any front or rear façade doors and windows at 10:00 P.M. every night or when amplified sound is playing, including but not limited to DJs, live music and live nonmusical performances.
   ☐ I will have a closed fixed façade with no open doors or windows except my entrance door will close by 10:00 P.M. or when amplified sound is playing, including but not limited to DJs, live music and live nonmusical performances.
8. I will not have ☒ DJs, ☒ live music, ☒ promoted events, ☒ any event at which a cover fee is charged, ☒ scheduled performances, ☐ more than _____ DJs/ promoted events per _____, ☐ more than _____ private parties per _____
9. ☒ I will play ambient recorded background music only.
10. ☒ I will not apply for an alteration to the method of operation agreed to by this stipulation without first coming before CB 3.
11. ☒ I will not seek a change in class to a full on-premise liquor license without first obtaining approval from CB 3.
12. ☒ I will not participate in pub crawls or have party buses come to my establishment.
13. ☒ I will not have unlimited drink specials with food.
14. ☐ I will not have a happy hour. ☒ I will have happy hour and it will end by 7:00 PM
15. ☒ I will not have wait lines outside. ☐ I will have a staff person responsible for ensuring no loitering, noise or crowds outside.
16. ☒ I will conspicuously post this stipulation form beside my liquor license inside of my business.
17. ☒ Residents may contact the manager/owner at the number below. Any complaints will be addressed immediately. I will revisit the above-stated method of operation if necessary in order to minimize my establishment's impact on my neighbors.

Name: Lamia Funti Phone Number: 917-592-3150

18. ☐ I will: _____

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

Signed Lamia Funti

Dated Feb. 22, 2016

Sworn to this 22nd day of Feb 2016

ANTHONY L. CARBELLO
Notary Public, State of New York
No. 24-4880989
Qualified in Kings County
Commission Expires December 22, 2018

Notary Public

Community Board 3 requests that the SLA add this stipulation to the license of the above-mentioned applicant.

Rev. 01/2016

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Community Board 3 Liquor License Application Questionnaire

Please bring the following items to the meeting:

NOTE: ALL ITEMS MUST BE SUBMITTED FOR APPLICATION TO BE CONSIDERED.

- ☐ Photographs of the inside and outside of the premise.
- ☐ Schematics, floor plans or architectural drawings of the inside of the premise.
- ☐ A proposed food and or drink menu.
- ☐ 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: http://www.nyc.gov/html/mancb3/html/communitygroups/community_group_listings.shtml
- ☐ Photographs of proof of conspicuous posting of meeting with newspaper showing date.
- ☐ If applicant has been or is licensed anywhere in City, letter from applicable community board indicating history of complaints and other comments.

Check which you are applying for:
☑ new liquor license ☐ alteration of an existing liquor license ☐ corporate change

Check if either of these apply:
☐ sale of assets ☐ upgrade (change of class) of an existing liquor license

Today's Date: February 10, 2016

If applying for sale of assets, you must bring letter from current owner confirming that you are buying business or have the seller come with you to the meeting.

Is location currently licensed? ☐ Yes ☑ No Type of license: Restaurant-Wine (Beer & Wine only)

If alteration, describe nature of alteration: _____

Previous or current use of the location: Vacant

Corporation and trade name of current license: None

APPLICANT:

Premise address: 45 Avenue B, New York, NY 10009

Cross streets: East 3rd & East 4th

Name of applicant and all principals: Lamia Funti

Trade name (DBA): Lamia's Fish Market

PREMISE:

Type of building and number of floors: 3 story mixed use

Will any outside area or sidewalk cafe be used for the sale or consumption of alcoholic beverages? *(includes roof & yard)* ☐ Yes ☑ No If Yes, describe and show on diagram: _____

Does premise have a valid Certificate of Occupancy and all appropriate permits, including for any back or side yard use? ☑ Yes ☐ No What is maximum NUMBER of people permitted? _____

Do you plan to apply for Public Assembly permit? ☑ Yes ☐ No

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 7A Commercial overlay C1-5

PROPOSED METHOD OF OPERATION:

Will any other business besides food or alcohol service be conducted at premise? ☐ Yes ☑ No

If yes, please describe what type: _____

What are the proposed days/hours of operation? (Specify days and hours each day and hours of outdoor space) Monday- Friday 4:00 PM to 12:00 AM

Sat + Sun 11:00 AM to 12:00 AM

Number of tables? 40 Total number of seats? 160

How many stand-up bars/ bar seats are located on the premise? One (1)

(A **stand up bar** is any bar or counter (whether with seating or not) over which a patron can order, pay for and receive an alcoholic beverage)

Describe all bars (length, shape and location): 18ft / rectangular / Front right

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

Fish + Seafood

What are the hours kitchen will be open? All open hours

Will a manager or principal always be on site? ☑ Yes ☐ No If yes, which? principal

How many employees will there be? 16

Do you have or plan to install ☐ French doors ☑ accordion doors or ☑ windows?

Will there be TVs/monitors? ☐ Yes ☑ No (If Yes, how many?) _____

Will premise have music? ☑ Yes ☐ No

If Yes, what type of music? ☐ Live musician ☐ DJ ☐ Juke box ☑ Tapes/CDs/iPod

If other type, please describe _____

What will be the music volume? ☑ Background (quiet) ☐ Entertainment level

Please describe your sound system: Ipod

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? N/A

_____

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.")

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.

Do you have sound proofing installed? ☑ Yes ☐ No

If not, do you plan to install sound-proofing? ☐ Yes ☐ No

APPLICANT HISTORY:

Has this corporation or any principal been licensed previously? ☐ Yes ☑ No

If yes, please indicate name of establishment: _____

Address: _____ Community Board #_____

Dates of operation: _____

If you answered "Yes" to the above question, please provide a letter from the community board indicating history of complaints or other comments.

Has any principal had work experience similar to the proposed business? ☑ Yes ☐ No If Yes, please attach explanation of experience or resume.

Does any principal have other businesses in this area? ☐ Yes ☑ No If Yes, please give trade name and describe type of business _____

Has any principal had SLA reports or action within the past 3 years? ☐ Yes ☑ No If Yes, attach list of violations and dates of violations and outcomes, if any.

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.

LOCATION:

How many licensed establishments are within 1 block? 13

How many On-Premise (OP) liquor licenses are within 500 feet? 15

Is premise within 200 feet of any school or place of worship? ☐ Yes ☑ No

COMMUNITY OUTREACH:

Please see the Community Board website to find block associations or tenant associations in the immediate vicinity of your location for community outreach. Applicants are encouraged to reach out to community groups. Also use provided petitions, which clearly state the name, address, license for which you are applying, and the hours and method of operation of your establishment at the top of each page. (Attach additional sheets of paper as necessary).

We are including the following questions to be able to prepare stipulations and have the meeting be faster and more efficient. Please answer per your business plan; do not plan to negotiate at the meeting.

1. ☑ I agree to close any doors and windows at 10:00 P.M. every night?
2. ☑ I will not have ☐ DJs, ☐ live music, ☐ promoted events, ☐ any event at which a cover fee is charged, ☐ scheduled performances, ☐ more than ____ DJs/ promoted events per ____, ☐ more than ____ private parties per ____
3. ☑ I will play ambient recorded background music only.
4. ☑ I will not apply for an alteration to the method of operation agreed to by this stipulation without first coming before CB 3.
5. ☑ I will not seek a change in class to a full on-premise liquor license. Or ☐ my business plan is to seek an upgrade at a later date.
6. ☑ I will not participate in pub crawls or have party buses come to my establishment.
7. ☐ I will not have a happy hour. Or ☑ Happy hour will end by 7 PM.
8. ☑ I will not have wait lines outside. ☑ There will be a staff person outside to monitor sidewalk crowds and ensure no loitering.
9. ☒ Residents may contact the manager/owner at the following phone number. Any 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.