

Consumer Affairs Catering Establishment License

Business Name:

BAY RIDGE MANOR INC.

Business Address:

476 76TH ST FL 1

BROOKLYN, NY 11209-3204

License Number: 1303003-DCA

Expiration Date: 09/30/2016



14849-2014-RCAT

New York City Department of Consumer Affairs
42 Broadway, New York, NY 10004

NYC

Bill de Blasio
Mayor

Department of
Consumer Affairs

Julie Menin
Commissioner

To file a complaint about this
business, contact **311** or go
to **nyc.gov/consumers**

Consumer Affairs Catering Establishment License

Business Name:

BAY RIDGE MANOR INC.

DBA/Trade Name:

Business Address:

476 76TH ST FL 1

BROOKLYN, NY 11209-3204

License Number: 1303003-DCA

Expiration Date: 09/30/2016

Additional Room : CELLAR

Room Capacity : 125



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42 Broadway
 New York, NY 10004
 Dial 311 (212-NEW-YORK)

Receipt Number: 1592881
 Receipt Print Date: Sep 08, 2014 1:10 PM
 Payment Processor ID: LOPILATOR

Total Fee Item(s) Paid: 2

Fee Description	Fee Amount	Payment Amount	Amount Still Owed
Catering Establishment Additional Room Renewal Fee	\$120.00	\$120.00	\$0.00
Catering Establishment Renewal Fee	\$540.00	\$540.00	\$0.00
Record ID: 14849-2014-RCAT NOH Number: License Number: 1303003-DCA			
Payor: BAY RIDGE MANOR INC.			
Premise Address: 476 76TH ST BROOKLYN, NY 11209-3204			
Subtotal:	\$660.00	\$660.00	\$0.00

Convenience Fee:

Total Paid: \$660.00

Total Payment Methods: 1

Payment Method	Payment Amount
Check 19543	\$660.00

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Have you visited the Consumer Affairs Business Toolbox yet? Go to nyc.gov/BusinessToolbox which includes:

- Inspection Checklists
- Online Live Chat for businesses
- *10 Things Every Business Should Know* Guide
- Online licensing services, including paying fines



The New York City Department of Consumer Affairs
 LICENSING CENTER
 42 Broadway
 New York, NY 10004
 Renewal Unit Telephone: +1 212 487 2353
 nyc.gov/consumers

#25 Renewed - 87108114

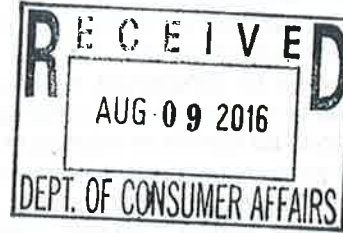
10488-2016-REAT

RENEWAL LICENSE APPLICATION
 Catering Establishment

PART 1: CONTACT INFORMATION



Mailing Address:
 BAY RIDGE MANOR INC.
 476 76TH ST FL 1
 BROOKLYN, NY 11209-3204



need form

Print Date: July 7, 2016

Premises Address:
 476 76TH ST
 BROOKLYN, NY 11209-3204

Fee: \$660.00 **Item Count:** 1
Record ID: 1303003-DCA
PIN: 32089641

License Number: 1303003-DCA
License Expiration: 09/30/2016
Telephone Number: 7187488855

Email: BAYRIDGEMANOR@AOL.COM

What is your Business's legal structure?

- Business/General Partnership
- Corporation
- Limited Liability Company
- Limited Liability Partnership
- Limited Partnership
- Non-profit
- S-Corporation
- Sole Proprietorship

If your Business's legal structure is Sole Proprietorship, Business/General Partnership, or Limited Partnership, complete **PARTS 2, 3, 4, 5, and 6**.
 All other legal structures, complete **PARTS 2, 3, and 6**.

PART 2: CHANGES TO CONTACT INFORMATION

Enter new contact information if different from above and EIN, if applicable.

New Mailing Address:	Employer Identification Number (EIN): <i>Required for sole proprietorships with paid employees, corporations, and partnerships.</i> <div style="border: 1px solid black; padding: 5px; display: inline-block;"> 1 1 - 2 5 8 1 2 8 0 </div>
New Telephone Number:	E-mail: <i>By providing your e-mail address, you consent to receive communications electronically from DCA, and you affirm that the e-mail listed is a reliable form of communication for you.</i>

PART 3: BACKGROUND QUESTIONS

Since you originally applied for this license or last completed a renewal application:

Please answer Background Questions on behalf of all individuals named on the application. "Individual" refers to sole proprietor; general partner; corporate officer; shareholder owning 10% or more of the business; member; officer; Board of Directors member.

- Some background questions inquire about criminal and/or civil charges. A conviction does not, by itself, mean you will not get a license. Factors such as the nature and seriousness of the offense, the amount of time that has passed since the conviction, and your age at the time of the conviction will be considered. However, your license may be denied if you fail to disclose a conviction in response to the questions.
- Descriptions for questions relating to charges should include date of conviction, nature of the incident, persons involved, and the outcome. Please include convictions for which you might have been imprisoned or fined even if, in fact, you only had to perform community service or were put on probation. You may omit parking violations and offenses that resulted in a finding of juvenile delinquency, youthful offender, wayward minor, or person in need of supervision.

1. Has individual had ANY government-issued license/permit denied, suspended, or revoked?

Yes No

If Yes, provide the following information:

License/Permit Type:

Government License/Permit Number:

Business/Individual Name:

2. Are there any pending charges against individual?

Yes No

If Yes, provide the following information:

Type:

Civil (Court or Government Agency)
 Criminal

Please explain.

--

3. Has individual ever pled guilty or been convicted of ANY crime or offense?

Yes No

If Yes, please explain.

--

4. Is there any court judgment against individual or individual's business?

Yes No

If Yes, please explain and state if any judgment has not been paid in full for 30 days or more.

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5. Has there been any change in the address(es) of the licensee?

Yes No

If Yes, please explain.

Reminder: You must make any changes to PART 1 information in PART 2 on page 1. Use the space at right to explain changes to contact information for any other individual named on the application.

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6. Does licensee have any employee who has been convicted of an offense that occurred in the course of the licensee's business? Yes No

If Yes, please explain.

7. Does individual prefer that business inspections be in a language other than English? Yes No

If Yes, select one.

- | | | | | |
|------------------------------------|---|-----------------------------------|----------------------------------|---|
| <input type="checkbox"/> Arabic | <input type="checkbox"/> French | <input type="checkbox"/> Hindi | <input type="checkbox"/> Polish | <input type="checkbox"/> Vietnamese |
| <input type="checkbox"/> Bengali | <input type="checkbox"/> French-Creole | <input type="checkbox"/> Italian | <input type="checkbox"/> Russian | <input type="checkbox"/> Other. Please specify: |
| <input type="checkbox"/> Cantonese | <input type="checkbox"/> Haitian Creole | <input type="checkbox"/> Korean | <input type="checkbox"/> Spanish | _____ |
| <input type="checkbox"/> Farsi | <input type="checkbox"/> Hebrew | <input type="checkbox"/> Mandarin | <input type="checkbox"/> Urdu | |

PART 4: CHILD SUPPORT CERTIFICATION (Sole Proprietors and Individual General Partners)

Important: If you do not provide required information in PART 4, DCA cannot renew your license.

- A. You must provide the Social Security number or Individual Taxpayer Identification Number and Birth Date of each sole proprietor or individual general partner in your business so the City of New York can confirm that the individuals have no outstanding child support obligations.

Individual #1 (Sole Proprietor or Individual General Partner #1)

Last Name GOLDEN	Suffix <i>(Jr., Sr., Esq.)(optional)</i>	First Name PATRICK	Middle Name <i>(optional)</i>
Social Security Number or Individual Taxpayer Identification Number <div style="background-color: black; height: 20px; width: 100%;"></div>		Birth Date (MM-DD-YYYY) <div style="background-color: black; height: 20px; width: 100%;"></div>	

- B. Is Individual #1 under an obligation to pay child support? Yes No

If Yes, Individual #1 must answer **ALL** questions below.

- | | |
|--|---|
| a. Does the individual owe four or more months of child support payments? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| b. Is the individual making child support payments by income execution or court approved payment plan or by a plan agreed to by the parties? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| c. Are the individual's child support obligations the subject of a pending proceeding? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| d. Did the individual receive public assistance or Supplemental Security Income? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

If your business has two or more individual general partners, please submit a completed, signed Child Support Certification Form for each additional general partner. To get the form, visit nyc.gov/BusinessToolbox OR call DCA's Renewal Unit at (212) 487-4060 to request a copy.

PART 5: PERMISSION (Sole Proprietors and Individual General Partners)

If applicable, Individual #1 can answer on behalf of all Individual General Partners.

Under the NYC Charter and Administrative Code, the City requests Social Security number (SSN) or Individual Taxpayer Identification Number (ITIN) to maintain and update City databases, to carry out the powers and duties of the Department, and for other purposes necessary to promote the general welfare.

Note: If PART 4 individuals voluntarily gave SSN or ITIN in an earlier license application, you do not need to check a box for Part 5. The City will continue to rely on prior permission.

Do PART 4 individuals give the City of New York permission to use SSN or ITIN for the purposes described above?

Yes No

PART 6: AFFIRMATION AND SIGNATURE

I am authorized to complete and submit this application and all attachments (together, the "Application"). I have reviewed the entire Application. To the best of my knowledge, this Application is true, correct, and complete.

If any of the information in this Application changes, the applicant must inform the Department of Consumer Affairs of those changes. I also understand that the applicant must comply with all relevant laws and rules relating to the license which I am renewing.

I understand that the submission of this Application does not mean that my license has been renewed and that any operation of my business after the expiration of my current license and before the issuance of a new license may subject me to penalties. This affirmation shall be deemed executed in the City and State of New York and shall be governed by and construed in accordance with the laws of the State of New York (notwithstanding New York choice of law or conflict of law principles) and the laws of the United States.

PENALTY FOR FALSE STATEMENTS:

It is against the law to make a statement in this Application that you know is false. If you make a statement that you know is false, you may be punished.

Under Sections 210.45 and 175.30 of the New York Penal Law, you may be:

- fined up to \$1000 and / or
- sent to jail for up to one year

Under Section 175.35 of the New York Penal Law, you may be punished if you:

- make a statement that you know is false and / or
- make the statement because you intend to mislead the Department of Consumer Affairs

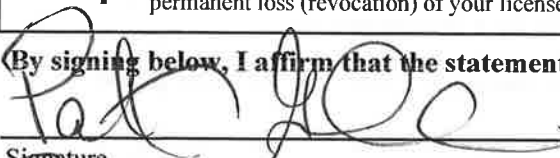
Under Section 175.35 of the New York Penal Law, you may be:

- fined up to \$5000 or
- fined an amount that is twice the amount of money you received by making the false statement and / or
- sent to jail for up to 4 years

The Department of Consumer Affairs may also punish you for making a false statement on this Application. These punishments may include:

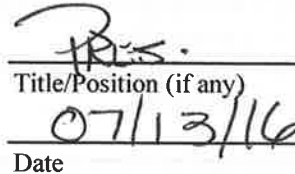
- fines or penalties of up to \$500 for each false statement
- permanent loss (revocation) of your license

By signing below, I affirm that the statements in this application are true and correct.



Signature
PATRICK GOLDEN

Print Full Name



Title/Position (if any)
07/13/16

Date

If you would like to register to vote, go to vote.nyc.ny.us

Note: Whether you apply to register to vote or not, it will not affect the assistance DCA will provide you.

BELOW SPACE FOR DEPARTMENT USE ONLY

APPROVED BY: _____

DATE: _____



Fallon Electric

8417 7th Avenue
Brooklyn, N.Y. 11228
(718) 745-3530

Established 1946

August 01, 2016

To Whom It May Concern,

This letter is to inform you that an inspection of the premises 476 76 Street, Brooklyn, N.Y. 11209 was conducted on July 29, 2016. The above listed premise complies with all current building codes.

Sincerely,

Sean Fallon





42 Broadway
New York, NY 10004
Dial 311 (212-NEW-YORK)

Receipt Number: 1753538

Receipt Print Date: Aug 09, 2016 10:47 AM

Payment Processor ID: GOTAYB

Total Fee Item(s) Paid: 2

Fee Description	Fee Amount	Payment Amount	Amount Still Owed
Catering Establishment Renewal Fee	\$540.00	\$540.00	\$0.00
Catering Establishment Additional Room Renewal Fee	\$120.00	\$120.00	\$0.00
Record ID: 10488-2016-RCAT NOH Number: License Number: 1303003-DCA			
Payor: BAY RIDGE MANOR INC.			
Premise Address: 476 76TH ST BROOKLYN, NY 11209-3204			

Subtotal: \$660.00 \$660.00 \$0.00

Convenience Fee:

Total Paid: \$660.00

Total Payment Methods: 1

Payment Method	Payment Amount
Check 0779	\$660.00

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Have you visited the Consumer Affairs Business Toolbox yet? Go to nyc.gov/BusinessToolbox which includes:

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FIRE DEPARTMENT • CITY OF NEW YORK



PLACE OF ASSEMBLY PERMIT

DO# 37	Account No. 87108114
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ISSUE DATE 01/27/2016	EXPIRATION DATE 10/07/2016	CONTROL # 871081146514
PREMISES 476 76 ST	BOROUGH BROOKLYN	
BLOCK/LOT 05951/0039	BIN # 3149255	ZIP CODE 112090000

ISSUED TO BAY RIDGE MANOR,INC 476 76 ST BROOKLYN NY 11209

CERTIFICATE OF OPERATION #	TYPE/DESCRIPTION OF USE	FLOOR(S)	NO. OF PERSONS
3000458/43B	BANQUET ROOM / HALL	1	300
3000458/43A	BANQUET ROOM / HALL	CEL	125
	OPEN FLAME PERMIT RIDER	CEL,1	
***	***	***	***
***	***	***	***
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***	***	***	***
***	***	***	***

This permit authorizes use and occupancy of the above premises as place(s) of assembly subject to the strict observance of the New York City Fire Code and other laws, rules and regulations enacted for the protection of the public in such occupancy. This permit shall remain in effect for the period specified unless revoked by the Fire Department prior to expiration.

Daniel J. Noyes
FIRE COMMISSIONER

THE NEW YORK CITY FIRE CODE (FC105.3.5) REQUIRES THAT PERMITS BE POSTED IN A CONSPICUOUS LOCATION ON THE PREMISES AT ALL TIMES AND BE READILY AVAILABLE FOR INSPECTION BY ANY REPRESENTATIVE OF THE DEPARTMENT. APPROVED SEATING PLANS MUST BE AVAILABLE AT THE PREMISES AT ALL TIME FOR INSPECTION BY THE FIRE DEPARTMENT.



April 28, 2017

BAY RIDGE MANOR INC.
476 76TH ST FL 1
BROOKLYN, NY 11209-3204

ACKNOWLEDGMENT OF APPLICATION

The Department of Consumer Affairs (DCA) received the following application for processing:

Application Number: 10488-2016-RCAT	Application Type: DCA/Premise/Catering Establishment/Renewal
License/Permit Type: Catering Establishment	License Number: 1303003-DCA
Application Submission Date: July 2, 2016	

Note:

- If your application is incomplete, i.e., you did not complete all requirements for the license, important information will appear below.
- If you owe money to the City or State, important information will appear below. You must be cleared of debts in order for DCA to complete processing of your application.
- This is an Acknowledgment of your license application only. DCA must complete our review of your application to make sure that you have met all requirements. We may contact you to provide more information.

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You can follow the status of your application online via nyc.gov/BusinessToolbox. You will need to register an account if you have not done so already. You will need the information below:

- Record ID: 10488-2016-RCAT
- PIN: 323387286

Contact Fire at (718) 999-2436 to request an inspection. You must have this completed by May 31, 2017 or your renewal will be denied





Dial 311 (212-NEW-YORK)

Receipt Number:

Receipt Print Date: Jul 28, 2017 2:22 PM

Payment Processor ID:

Total Fee Item(s) Paid: 0

Fee Description	Fee Amount	Payment Amount	Amount Still Owed
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Subtotal:

Convenience Fee:

Total Paid: **\$0.00**

Total Payment Methods: 1

Payment Method	Payment Amount
Refund: Standard Refund	(\$440.00)

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