

TO: MAYOR J. LEHMAN, AND MEMBERS OF COUNCIL

FROM: W. COOKE, CITY CLERK/DIRECTOR OF LEGISLATIVE AND COURT SERVICES

RE: LIQUOR LICENCE APPLICATION REVIEW – THE 7 SPICE FAST CASUAL MULTI-

CUISINE

DATE: FEBRUARY 4, 2019

The purpose of this Memorandum is to advise members of Council that a Municipal Information Form and an associated City of Barrie Liquor Licence Application Questionnaire were received on Wednesday, January 31st, 2019 from an establishment named The 7 Spice Fast Casual Multi-Cuisine located at 353 Duckworth Street, Unit 16, Barrie. The documents were circulated to City Departments and community stakeholders upon receipt.

Concerns regarding zoning, non-compliance with by-laws, or general objections to the application may be directed to the Alcohol and Gaming Commission of Ontario (the issuer of liquor licences) through the City Clerk by Wednesday, February 13, 2019 as follows:

Alcohol and Gaming Commission of Ontario c/o Wendy Cooke, City Clerk/Director of Legislative and Court Services The City of Barrie P.O. Box 400 70 Collier Street Barrie ON L4M 4T5

Fax: (705) 739-4243 Email: cityclerks@barrie.ca

All comments received as of the deadline, will be compiled and submitted to the Alcohol and Gaming Commission of Ontario for its review and consideration as part of the Commission's liquor licence issuance process.



APPENDIX "A"

MUNICIPAL INFORMATION FORM CITY OF BARRIE LIQUOR LICENCE APPLICATION QUESTIONNAIRE



Return completed form to: Alcohol and Gaming Commission of Ontario 90 SHEPPARD AVE E SUITE 200 TORONTO ON M2N 0A4 Remplir et retourner cette formule à : Commission des alcools et des jeux de l'Ontario 90 AV SHEPPARD E BUREAU 200 TORONTO ON M2N 0A4

Municipal Renseignements Information municipaux

The information requested below is required in support of all applications for a **new** liquor licence or outdoor areas being added to an **existing** liquor licence.

Les renseignements sont recueillis conjointement à toute demande de **nouveau** permis d'alcool ou d'ajout de zones de plein air à un permis d'alcool **existant**.

liquor licence.		exist	existant.		
Section 1	Application Details	Section	1 - Détails	de la demand	de
Establishment na	ame / Nom de l'établissement (pice fait cac	ial Mylhi- Cuisin		el. no. / Nº de tél. de	l'établissement
Contact name / I	lom de la personne à contacter		Contact's tel. no	. / Nº de tél. de la per	sonne à contacter
Exact location of Street Number / Numéro 353		ress) / Emplacement exact de l	établissement (non Street Type / Genre de rue	Direction/ S	Suite/Floor/Apt. / Bureau/étage/app.
Lot/Concession/r Lot/concession/r	oute rurale Ville	/Town/Municipality / e/village/municipalité のねうと	'	Postal Code / Code postal LYM JC	2
		/ La demande de permis d'alco outdoor areas / des zones de ple		autres sur :	
Section 2 Municipal Cler	 Municipal Clerk's official notice of for a liquor licent your municipality 	application ce in /	permis municip	ficiel de dem d'alcool dan palité à l'inte secrétaire m	s votre
Name of village, (If the area when known as)	e the establishment is located w	kes are paid / Nom du village, de vas annexed or amalgamated, pr annexée ou fusionnée, nom sous	la ville ou du cantor ovide the name of th	e Village, Town, Tow	nship or City was
Is the area where	the establishment is located: / L	a vente de boissons alcooliques e	st-elle autorisée dans	s la région où se trouv	ve l'établissement?
Wet (for spiri	s, beer, wine) / Oui (spiritueux, b	ière, vin) Damp (for beer a	nd wine only) / Oui (b	pière et vin seulement) Dry / Non
bylaws must be	ns regarding zoning or non-co clearly outlined in a separat 30 days of this notification	e submission aux règ un doc	réoccupation conce lements municipau ument distinct ou	ernant le zonage ou ux doit être claireme u une lettre, à l'int es la date du prése	nt décrite dans érieur d'une
Signature of mu	nicipal official / Signature du (de	e la) représentant(e) municipal(e) Title / Poste		·
Address of muni	cipal office / Adresse du bureau	u municipal		Date	
2085 (2013/09)	Queen's Printer of Ontario, 2013 / © Im	primeur de la Reine pour l'Ontario, 2013			Page 1 of/de 1



GENERAL INFORMATION

Name of Establishment: (Registered name and Operating	the 7 spice fast casual		
name, if different)	2-2 and of a some a law tiles tree		
Street Address of Establishment:	353 Duckworth St. barrie Ontario 14m JCZ		
Closest Intersection:	buckworth - Gove A.		
Mailing Address: (If different from the location of the establishment)			
Name of Owner: (Indicate individual sole proprietor, partnership or corporation, as appropriate) If partnership or corporation, provide names and contact information for all shareholders	Priyantha Jayal Wattorythanthrige Darshana kumara Gallage		
Name of Applicant: (if different from owner)	pauline de Jesus		
Mailing Address for Applicant:	5 9 9		
Applicant Business Phone/Fax Number:			
Applicant Business E-mail address			
Purpose of the Liquor Licence Application: New establishment New owner/operator of existing establishment Name of previous business			
Change to indoor occupant load/seating capacity (including addition or alteration to interior)			
Change to outdoor occupant load/seating capacity (including addition or alteration to outdoor patio)			
xOther. Describe below			
Existing Business with no liquor licence. Now applying for a liquor licence.			



SIZE AND LOCATION

What is the size (floor area) of the establishment?	CURRENT Indoor Area	PROPOSED Indoor Area	CURRENT Outdoor Area	PROPOSED Outdoor Area I I ft²/ m²
What is the occupant load and/or seating capacity of the establishment?	CURRENT Indoor Area occupant load	PROPOSED Indoor Area 14 ft occupant load 14 ft licensed capacity	CURRENT Outdoor Area	PROPOSED Outdoor Area occupant load licensed capacity
	20	N A	N/A	N A
	seating capacity	seating capacity	seating capacity	seating capacity
Is the entire operation enclosed? (i.e. the operation is interior space only) Yes No An accurate diagram/scaled floor plan indicating the proposed location of the licenced area(s) (ALL licensed areas including indoor and outdoor areas) is required to be attached to this form. What is the distance to the closest other establishment(s) serving alcohol? ft/ m (be clide ectablishment) Please provide the operating name(s) and describe the target market of other establishments serving alcohol within a 120 m (approximately 400 ft) radius of the proposed location: The first fact (as a Multiple Color) Patient (outer 18 and ab 0 se				
Pations our	10 00101	ah o ve		-
Note: If you require more space please attach additional documentation to this form. What is the distance to the closest residential dwelling unit?				
Does the subject property contain residential units? Yes No				



OPERATING HOURS, TARGET MARKET, NATURE OF BUSINESS

Hours of Operation of the business:	Indoor Area Outo	door Area		
Hours associated with alcohol sales	Indoor Area Outo	door Area		
What is the primary nature of the establishm bar/tavern, coffee house, etc)	nent? (i.e. family restaurant, fine dining	ı, lounge/nightclub,		
Before 10 PM:				
family restaurant	· · · · · · · · · · · · · · · · · · ·	***		
After 10 PM:				
family responsant		 		
Describe your target market:				
Describe the proposed security both internally and exterior to the establishment (i.e. total number of staff, training or experience of staff, number of security persons): Before 10 PM: 7 Ch. CO				
3 3 10 11		-		
After 10 PM: 3 staff				
Note: If you require more space please attach additional documentation to this form.				
Are all security personnel trained and licensed? Yes No Describe (i.e. in-house or hired service)				
Note: If you require more space please atta	ch additional documentation to this for	rm.		
Are exterior line ups (queues) anticipated for your establishment? Yes No				

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OPERATING HOURS, TARGET MARKET, NATURE OF BUSINESS (Continued)

	al or external vide No	eo surveillance planned for the establishment? Describe
security	ca me vas	
Note: If you re	quire more space	e please attach additional documentation to this form.
Describe your	olans for crowd m	nanagement:
Before 10 PM:	Linghin	the dine-in cultomers
	1	
- 20		
Note: If you re	quire more space	e please attach additional documentation to this form.
After 10 PM:	Limiting	the dine-in who mens
Is a cover char- events)	ge to enter the pr	remises proposed? Yes No (routinely / special
Mhat is the and	icinated paraents	age of liquid sales to gross sales? 20 To per day



OPERATING HOURS, TARGET MARKET, NATURE OF BUSINESS (Continued)

Describe the nature of the proposed seating for the venue (i.e. dining tables, cocktail tables, stand up bar):	Diving tables (20 reating) Outdoor Area Note
Describe any food preparation facilities for the venue:	Multi - Cuisine Outdoor Area N/A
Describe any other type of business to be operated from the establishment on a permanent basis, or from time to time (i.e. bakeshop, variety store, grocery store, billiard hall, take-out restaurant, adult entertainment, nonmotorized refreshment vehicles, etc?):	Indoor Area N 1] Outdoor Area
If yes, are the businesses physically separated from the licensed area(s) so that access or exits to and from the other business are not through the licensed area(s)? Provide full details:	Indoor Area リカ Outdoor Area リカ
Describe any ancillary entertainment (i.e. video games, pool tables, etc):	Indoor Area N (Ω Outdoor Area N A



OPERATING HOURS, TARGET MARKET, NATURE OF BUSINESS (Continued)

Describe any musical entertainment to be	Indoor Area Only
provided (i.e. dance floor, live/recorded	Dance Floor
music, amplified sound , etc)	Yes No
	Live Music
	Yes No
	Recorded Music
	Yes No
	Amplified Sound
	Yes No
8	Unamplified Sound
	Yes No
	Outdoor Area Only
	Dance Floor
	Yes No
	Live Music
	Yes No
	Recorded Music
	Yes No
	Amplified Sound
	Yes No
	Unamplified Sound
	Yes No

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OWNERSHIP/MANAGEMENT INFORMATION

Describe the owner or operator's performance record including any by-law violations, building, health, fire code deficiencies noted on an inspection report, and any pending charges or convictions or liquor licence
offences within the last 3 years:
Has a principal officer of the business or a manager of the business been charged with or convicted of a liquor licence related offence? Yes No If yes, provide details of any pending charge or conviction
Do any of the principal officer(s) or moneys of the huntered have a criminal record?
Do any of the principal officer(s) or managers of the business have a criminal record? Yes No If yes, provide a copy of the criminal records check
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Province of Security Companies of the Security S
Carrier Confession
Is there a pending charge or conviction against the business related to a liquor related offence?
Yes No If yes, provide details
List the names and addresses of any other licensed establishments in Canada owned or operated by the same operator or owner: \mathfrak{NoNE}
Note: If you require more space please attach additional documentation to this form.



pauline de Jesus	(name of applicant/owner), hereby certify
that the information provided pursuant to this liquor licer complete to the best of my knowledge and ability. I un with respect to the establishment changes materially, I updated questionnaire. I further understand and ack questionnaire or the inclusion of false statements is cissued by the City and may be grounds for such licence	derstand and acknowledge that if the information am responsible for completing and submitting ar nowledge that the submission of an incomplete leemed to be a breach of any business licence
Sworn (Affirmed) before me at The City of Barrie, in the Province of Ontario on the30 K day	Signature of Applicant
January , 20 19.	
A Commissioner, etc.	Kathleen Mary Foster, a Commissioner, etc., Province of Ontario, for the Corporation of the City of Barrie.

NOTE: This is a sworn (affirmed) affidavit of the deponent only. No investigation has been conducted by this authority to confirm or verify the above sworn information.

The CRIMINAL CODE OF CANADA provides that: everyone commits perjury who, with intent to mislead, makes before a person who is authorized by law to permit it to be made before him a false statement under oath or solemn affirmation by affidavit, solemn declaration or deposition or orally, knowing that the statement is false, is guilty of an indictable offence and liable to a term of imprisonment not exceeding fourteen years (Section 131, 132), or by summary conviction (Section 134).

Personal information on this form is collected to determine any concerns with zoning, non-compliance with any bylaws or general objections to the application by City Council, the municipality, residents, and/or organizations within the municipality. The document and any associated submissions will be made available on the City's website and distributed to various stakeholder organizations and resident associations as well as the Alcohol and Gaming Commission of Ontario. This document is a public record, despite anything in the *Municipal Freedom of Information* and *Protection of Privacy Act (1990)*, and, until its destruction, may be inspected by any person at the City Clerk's Office at a time when the office is open. Questions about this collection can be directed to the City Clerk, 70 Collier Street, Barrie, Ontario L4M 4T5 (705) 739-4220 Ext 4421.