

TO: MAYOR J. LEHMAN, AND MEMBERS OF COUNCIL

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

RE: LIQUOR SALES LICENCE APPLICATION REVIEW – 147 RISTORANTE INC.

DATE: MAY 13, 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 Thursday, May 13, 2019 from an establishment named 147 Ristorante Inc. located at 143 and 147 Dunlop Street East, 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 sales licences) through the City Clerk by Thursday May 23, 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



Alcohol and Gaming Commission of Ontario

Municipal Information

Licensing and Registration 90 SHEPPARD AVE E SUITE 200 TORONTO ON M2N 0A4 Fax: 416-326-8711 Tel: 416-326-8700 or 1-800-522-2876 toll free in Ontario

The information requested below is required in support of all applications for a new Liquor Sales Licence or outdoor areas being added to an existing Liquor Sales Licence.

| Premises Name 147 RISTORANTE (NexDor) | Premises Teleph 705-252-9147 | Premises Telephone Number 705-252-9147 | | |
|--|---------------------------------|---|--------------|------------------------|
| Contact Name Sharada Narain | Contact's Teleph | one Number | Email A | ddress |
| Address 143-147 Dunlop Street East | City /Town Barrie | Province / | / State N | Postal Code IAM 1A6 |
| Does the application for a Liquor Sales Li X Indoor areas X Outdoor areas | cence include: | | | |
| | | | | Licence in you |

| Municipal Clerk: Please confirm the "Wet/Damp/Dry" status below. | |
|--|---|
| Name of village, town, township or city where taxes are pa annexed or amalgamated, provide the name of the Village, I | |
| Is the area where the establishment is located: | |
| Wet (for spirits, beer, wine) □Damp (for beer and wine | only) Dry |
| Note: Specific concerns regarding zoning or non-compliance w submission or letter within 30 days of this notification. | ith by-laws must be clearly outlined in a separate |
| Signature of Municipal Official | Title |
| Address of Municipal Office | Date |
| | YYYY MM DD |
| | |

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Barrie

Liquor License Application Questionnaire

| | GENERAL INFORMATION |
|--|--|
| Name of Establishment (Registered name and Operating name, if different) | 147 RISTORANTE INC. 01A NEXDOS |
| Street Address of Establishment: | 143-147 DUNLOP ST E. RAPPIEM 1 |
| Closest Intersection: | LIMULCASTER ST & DUNCO AAST |
| Mailing Address: (If different from the location of the establishment) | NIA. ST-E |
| Name of Owner: (Indicate individual sole proprietor, partnership or comporation, as appropriate) If partnership or corporation, provide names and contact information for all shareholders | ROSANNA DE LEULS |
| Name of Applicant: (if different from owner) | COUGEN DESIMONE |
| Mailing Address for Applicant: | SAME AS ESTABLISHMENT |
| Applicant Business Phone/Fax Number: | |
| Applicant Business E-mail address | info@147dunlop:ca |
| Purpose of the Liquor License Applie New establishment New owner/operator of e | |
| 25 | ant load/seating capacity (including addition or alteration to interior) |

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| 6 | | ciquoi cicense | Application | <u> </u> |
|--|---------------------------|--------------------------|-------------------------|--------------------------|
| SIZE AND LOCATION | | | | |
| What is the size (floor area) of the establishment? | CURRENT Indoor Area | PROPOSED Indoor Area | CURRENT Outdoor Area | PROPOSED Outdoor Area |
| | 2030 ft2/m2 | 1663 ft2/m2 | 135 H21 | 378 ft²/m² |
| What is the occupant load and/or seating capacity of the | CURRENT Indoor Area | PROPOSED Indoor Area | CURRENT Outdoor Area | PROPOSED Outdoor Area |
| Establishment? | 1 2 3 Occupant load | occupant load | 24 occupant load | 66 (42 + 24) |
| | Licensed capacity | 138 licensed capacity | 26 licensed capacity | licensed capacity |
| | 1 2-5 Seating capacity | 138 seating capacity | Seating capacity | seating capacity |
| Is the entire operation enclosed? (i.e. the operation is interior space only) Yes No | | | | |
| GRILLICION | | ET TAP AN | D GRILL | - BAR & |
| FAMILY TARA AU | THENTIC | major | Culsine | - FAMILY |
|) THE WOR | FS - FA | Mly. | - 30(-3- | <u> </u> |
| Note: If you require more space please attach additional documentation to this form. | | | | |
| | | | | |
| What is the distance to the closest residential dwelling unit? < 100 mm up Stairs of Current location Does the subject property contain residential units? Yes | | | | |



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Liquor License Application Questionnaire

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| OPERATING HOURS, TARGET MARKET, NATURE OF BUSINESS |
| Hours of Operation of the business: II am - 2 am U. am - 10. |
| Hours associated with alcohol sales Indoor Area Indoor Area Indoor Area Indoor Area Indoor Area Indoor Area |
| What is the primary nature of the establishment? (i.e. family restaurant, fine dining, lounge/nightclub, bar/tavern, coffee house, etc) |
| Before 10 PM: |
| BAR |
| After 10 PM: |
| BAR - 143 DULLOP ST. E. |
| Describe your target market: |
| DUER 19 YRS OF AGE. |
| 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: |
| After 10 PM: 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) |
| 14 (7) |
| |
| Note: If you require more space please attach additional documentation to this form. |
| Are exterior line ups (queues) anticipated for your establishment? Yes No |



| Barrie Liquor License Application Questionnaire |
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| Is either internal or external video surveillance planned for the establishment? Yes No Describe |
| INTERNAL CAMERAS LOCATED ALL |
| Note: If you require more space please attach additional documentation to this form. |
| Describe your plans for crowd management: |
| Before 10 PM: |
| ~(A |
| |
| |
| Note: If you require more space please attach additional documentation to this form. After 10 PM: |
| NA. |
| |
| |
| Is a cover charge to enter the premises proposed? Yes Not/(routinely / special events) |
| What is the anticipated percentage of liquor sales to gross sales? 5 & (|





Liquor License Application Questionnaire

| Describe the nature of the proposed seating for the venue (i.e. dining tables, cocktail tables, stand up bar): | Indoor Area DINING TABLES, AND STAND UP BAR Outdoor Area DINING TABLES |
|---|--|
| 87 | DIRING MISCES |
| Describe any food preparation facilities for the venue: | Indoor Area TAPAS AND OTHER FINGER Outdoor Area |
| | SAME AS ABOVE |
| Describe any other type of business to be operated from the establishment on a permanent basis, or from | Indoor Area |
| time to time (i.e. bakeshop, variety store, grocery store, billiard half, take-out restaurant, adult entertainment, non- motorized refreshment vehicles, etc?): | Outdoor Area N. (A |
| If yes, are the businesses physically separated from the licensed area(s) so that access or exits to and from | Indoor Area |
| the other business are not through the licensed area(s)? Provide full details: | Outdoor Area ~ (A |
| Describe any ancillary entertainment (i.e. video games, pool tables, etc): | Indoor Area ~(A |
| | Outdoor Area ~ (A · |

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| Barrie | Liquor License Application Questionnaire | |
|---|--|---|
| Describe any musical entertainment to be provided (i.e. dance floor, live/recorded music, amplified sound, etc) | Indoor Area Only Dance Floor N(A) Yes | - |
| | Live Music Yes No JAZZ MUSIC. | |
| | Recorded Music Yes No Amplified Sound | |
| | Yes No Unamplified Sound Yes No | |
| | Outdoor Area Only Dance Floor N/L / A Yes No | |
| | Live Music Yes No | |
| | Yes No | |
| | Amplified Sound Yes No Unamplified Sound Yes No | |



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Liquor License Application Questionnaire

| 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 license offences within the last 3 years: | |
| NEW OWNER FOR THIS ESTABLISHMENT AS OF | |
| FEBRUARY 14,2019. | |
| NO PENDING CHARGES CONVICTIONS OR LIQUOR OFFENCES WITHIN THE PAST 3 YEARS. | LICENCE |
| Has a principal officer of the business or a manager of the business been charged with or convicted of a liquor license related offence? Yes No If yes, provide details of any pending charge or conviction | |
| | |
| | |
| Do any of the principal officer(s) or managers of the business have a criminal record? | |
| YesNoIf yes, provide a copy of the criminal records check | |
| | |
| | |
| | |
| Is there a pending charge or conviction against the business related to a liquor related offence? YesNo | |
| | |
| | |
| | |
| List the names and addresses of any other licensed establishments in Canada owned or operated by the same operator or owner: | |
| NONE | |
| | |
| Note: If you require more space please attach additional documentation to this form | |
| 1 | |





Liquor License Application Questionnaire

that the information provided pursuant to this liquor license application questionnaire is true, accurate and complete to the best of my knowledge and ability. I understand and acknowledge that if the information with respect to the establishment changes materially, I am responsible for completing and submitting an updated questionnaire. I further understand and acknowledge that the submission of an incomplete questionnaire or the inclusion of false statements is deemed to be a breach of any business license issued by the City and may be grounds for such license to be revoked

Swom (Affirmed) before me at The City of Barrie, in the Province of Ontario on the 4th day

______, 20<u>_19.</u>

A Commissioner, etc.

Kristi Lynn Fishpool, a Commissioner, etc., Province of Onterio, for the Corporation of the City of Service.

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 by-laws 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.