

TO: MAYOR J. LEHMAN, AND MEMBERS OF COUNCIL

FROM: T. MCARTHUR, ACTING DEPUTY CITY CLERK

RE: LIQUOR SALES LICENCE APPLICATION REVIEW – TANDOORI TONIGHT

DATE: FEBRUARY 3, 2020

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 was received from an establishment named Tandoori Tonight located at 36 Anne Street North, 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 Friday, February 21, 2020 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**.

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Section 1 - Application Details	Section 1 - Détails de la demande
Establishment name / Nom de l'établissement  1 ANDOR 1 ONIGHT LTD.  Contact name / Nom de la personne à contacter  Rupinder (Rupa) Kumar	Establishment tel. no. / N° de tél. de l'établissement  705-503-3338  Contact's tel. no. / N° de tél. de la personne à contacter
Exact location of establishment (not mailing address) / Emplacement Street Number / Numer / Norm de rue  Cot/Concession/Route / City/ Town/Municipality / Ville/village/municipalité	Street Type / Genre de rue Direction/ Orientation de rue Bureau/étage/app.  Postal Code / Code postal  L4N 28C
Does the application for a liquor licence include: / La demande de pe indoor areas / des zones intérieures outdoor areas / des z	
official notice of application for a liquor licence in your municipality	Section 2 - Avis officiel de demande de permis d'alcool dans votre municipalité à l'intention du (de la) secrétaire municipal(e)
Municipal Clerk: please confirm the "wet/damp/dry" status below.	Secrétaire municipal(e) : Confirmer le statut de la région ci-dessous.
Name of village, town, township or city where taxes are paid / Nom du (If the area where the establishment is located was annexed or amalg known as) (Si la région où se trouve l'établissement a été annexée ou fusionnée,	village, de la ville ou du canton à qui les impôts sont versés : amated, provide the name of the Village, Town, Township or City was
Is the area where the establishment is located: / La vente de boissons al	
Note: Specific concerns regarding zoning or non-compliance with bylaws must be clearly outlined in a separate submission or letter within 30 days of this notification.	Remarque: Toute préoccupation concernant le zonage ou la non-conformite aux règlements municipaux doit être clairement décrite dans un document distinct ou une lettre, à l'intérieur d'une période de 30 jours après la date du présent avis.
Signature of municipal official / Signature du (de la) représentant(e) n	nunicipal(e) Title / Poste
Address of municipal office / Adresse du bureau municipal	Date
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### **Liquor License Application Questionnaire**

#### **GENERAL INFORMATION**

Name of Establishment: (Registered name and Operating name, if different)	TANDOORI TONIGHT LTD.
Street Address of Establishment:	36 Anne St. N.
Closest Intersection:	Anne St & Dunlop St. E.
Mailing Address: (If different from the location of the establishment)	1
Name of Owner: (Indicate individual sole proprietor, partnership or corporation, as appropriate) If partnership or corporation, provide names and contact information for all shareholders	Rupinder Kumar d Pankaj Kumar
Name of Applicant: (if different from owner)	
Mailing Address for Applicant:	
Applicant Business Phone/Fax Number: Applicant Business E-mail address	705 -503-3328
Purpose of the Liquor License App	lication:
New establishment	
New owner/operator of	existing establishment
Name of previous busin	ness
	pant load/seating capacity (including addition or alteration to interior)
, a to contact a	upant load/seating capacity (including addition or alteration to outdoor
Other. Describe below	
	2





### Liquor License Application Questionnaire

		SIZE AND LOCATION		<u> </u>
What is the size (floor area) of the establishment?	CURRENT Indoor Area	PROPOSED Indoor Area	CURRENT Outdoor Area	PROPOSED Outdoor Area
	ft²/ m²	ft²/ m²	m <sup>2</sup> ft²/	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?	Occupant load	occupant load	occupant load	occupant load
	Licensed capacity	licensed capacity	licensed capacity	licensed capacity
	20 Seating capacity	20. seating capacity	seating capacity	seating capacity
Is the entire operation enclosed? (i.e. the operation is interior space only) YesNoNo				
Please provide the opera within a 120 m (approxin	ating name(s) and de nately 400 ft) radius (	scribe the target mark of the proposed location	et of other establish on:	ments serving alcohol
Sports be	ac - Ti	ff's Sport	5 Bary Gr	<u> </u>
Note: If you require more	space please attach	additional documenta	ation to this form.	
What is the distance to the closest residential dwelling unit?				
Does the subject property contain residential units? Yes No				



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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: Indoor Area  Tues-Sun Ilan-Upm Tues-Sun-Ilan-Ilpn
Hours associated with alcohol sales Indoor Area Outdoor 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: family restaurant
After 10 PM: family restaurant.
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: total 5 staff nembers
After 10 PM: total 5 start members.
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 attach additional documentation to this form.
Are exterior line ups (queues) anticipated for your establishment? Yes No



### Barrie

### **Liquor License Application Questionnaire**

Is either internal or external video surveillance planned for the establishment?  Yes No Describe
Note: If you require more space please attach additional documentation to this form.
Describe your plans for crowd management:
Before 10 PM: His a small family owned restaurant 20-22 person
Once restaurant is full no one else will be sent
allowed in until seats are available.
Note: If you require more space please attach additional documentation to this form.
After 10 PM: Same as about.
Is a cover charge to enter the premises proposed? Yes No(routinely / special events)
What is the anticipated percentage of liquor sales to gross sales?



### Barrie

### Liquor License Application Questionnaire

Describe the nature of the proposed seating for the venue (i.e. dining tables, cocktail tables, stand up bar):	20-22 ppl dining seating Hables.
. Well	a few patio tables.
	seasonal
Describe any food preparation facilities for the venue:	Indoor Area
	restaurant Kitchen
	Outdoor Area
Describe any other type of business to be operated	Indoor Area
from the establishment on a permanent basis, or from	12/18
time to time (i.e. bakeshop,	Outdoor Area
variety store, grocery store, billiard hall, take-out restaurant, adult entertainment, non-	N/B.
motorized refreshment vehicles, etc?):	
If yes, are the businesses	Indoor Area
physically separated from the licensed area(s) so that	
access or exits to and from the other business are not	Outdoor Area
through the licensed area(s)? Provide full details:	
Describe any ancillary	Indoor Area
entertainment (i.e. video games, pool tables, etc):	More
	Outdoor Area
	None.





### **Liquor License Application Questionnaire**

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
	Unamplified Sound
	Yes No
1 (4)	<u>Outdoor Area Only</u>
	Dance Floor Yes No
	NO
	Live Music
	YesNo
	Recorded Music  Yes No
	Amplified Sound Yes No
	Unamplified Sound
	Yes No





#### **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: None 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? No\_\_\_\_\_ If yes, provide a copy of the criminal records check Corporation of the Cay is Expires May 9, 2021 Is there a pending charge or conviction against the business related to a liquor related offence? \_No \_ List the names and addresses of any other licensed establishments in Canada owned or operated by the same operator or owner: THRIMOI LUM 1A3

Note: If you require more space please attach additional documentation to this form





#### Liquor License Application Questionnaire

I (name of applicant/owner), hereby certify 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

General , 20 20

A Commissioner, etc.

Kathleen Mary Foster, a Commissioner, etc., Province of Onterlo, for the Corporation of the City of Barrie. Expires May 9, 2021

of Applicant

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.