



LEGISLATIVE AND COURT SERVICES MEMORANDUM

TO: MAYOR J. LEHMAN, AND MEMBERS OF COUNCIL

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

RE: LIQUOR LICENCE APPLICATION REVIEW – MATRIX STUDIO

DATE: APRIL 18, 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, April 17, 2019 from an establishment named Matrix Studio located at 173 Dunlop Street West, 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, May 1, 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
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

Municipal Information

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.

Section 1 - Application Details

Premises Name Matrix Studio	Premises Telephone Number 705-737-4868		
Contact Name AND BUTTINEAU	Contact's Telephone Number	Email Address	
Address 173 DUNLOP ST W	City/Town Barrie	Province / State ON	Postal Code L4N 1B4

Does the application for a Liquor Sales Licence include:

- Indoor areas
 Outdoor areas

Section 2 - Municipal Clerk's Official Notice of Application for a Liquor Sales Licence in your Municipality

Municipal Clerk:

Please confirm the "Wet/Damp/Dry" status below.

Name of village, town, township or city where taxes are paid: (If the area where the establishment is located was annexed or amalgamated, provide the name of the Village, Town, Township or City was known as) The Corporation of the City of Barrie
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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 with by-laws must be clearly outlined **in a separate submission or letter within 30 days of this notification.**

Signature of Municipal Official	Title
Address of Municipal Office	Date YYYY MM DD



Liquor Licence Application
Questionnaire

GENERAL INFORMATION

Name of Establishment: (Registered name and Operating name, if different)	Matrix Studio
Street Address of Establishment:	173 Dunlop St W, Barrie, Ont
Closest Intersection:	Dunlop & Eades
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	Ann Buttineau Lawrence Anthony Partnership
Name of Applicant: (if different from owner)	
Mailing Address for Applicant:	173 Dunlop St W, Barrie, Ont L4N1B4
Applicant Business Phone/Fax Number:	705-737-4868
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)

Other. Describe below



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SIZE AND LOCATION

What is the size (floor area) of the establishment?	<u>CURRENT</u> <u>Indoor Area</u> 21635 (ft ²) m ²	<u>PROPOSED</u> <u>Indoor Area</u> 21635 (ft ²) m ²	<u>CURRENT</u> <u>Outdoor Area</u> 2816 (ft ²) m ²	<u>PROPOSED</u> <u>Outdoor Area</u> 2816 (ft ²) m ²
What is the occupant load and/or seating capacity of the establishment?	<u>CURRENT</u> <u>Indoor Area</u> occupant load licensed capacity seating capacity	<u>PROPOSED</u> <u>Indoor Area</u> occupant load licensed capacity seating capacity	<u>CURRENT</u> <u>Outdoor Area</u> occupant load licensed capacity seating capacity	<u>PROPOSED</u> <u>Outdoor Area</u> occupant load licensed 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 licenced 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

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:

sticky fingers - but they just closed their doors for good on Feb 23, 2019. City is tearing building down & adding parking.

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

What is the distance to the closest residential dwelling unit? 30 ft/ m

Does the subject property contain residential units?
Yes No



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OPERATING HOURS, TARGET MARKET, NATURE OF BUSINESS

Hours of Operation of the business: Indoor Area 12pm - 8pm Outdoor Area 12pm - 8pm

Hours associated with alcohol sales Indoor Area 12pm - 8pm Outdoor Area 12pm - 8pm

What is the primary nature of the establishment? (i.e. family restaurant, fine dining, lounge/nightclub, bar/tavern, coffee house, etc)

Before 10 PM:

Nail Salon & esthetics, & services

After 10 PM:

N/A

Describe your target market:

Clients coming to get services

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:

two full time staff 7 part-time

After 10 PM:

N/A

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

Are all security personnel trained and licensed? Yes x No _____ Describe (i.e. in-house or hired service)

Smart ~~Service~~ Servers

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

Are exterior line ups (queues) anticipated for your establishment? Yes _____ No x



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Is either internal or external video surveillance planned for the establishment?
Yes _____ No X Describe

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

Describe your plans for crowd management:

Before 10 PM:

N/A

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

After 10 PM:

N/A

Is a cover charge to enter the premises proposed? Yes _____ No X (routinely / special events)

What is the anticipated percentage of liquor sales to gross sales? 2%

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Describe the nature of the proposed seating for the venue (i.e. dining tables, cocktail tables, stand up bar):	Indoor Area styling chairs. waiting room chairs
	Outdoor Area Patio tables
Describe any food preparation facilities for the venue:	Indoor Area N/A
	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, non-motorized refreshment vehicles, etc?):	Indoor Area Tattoo, Hair Salon, esthetics
	Outdoor Area nothing
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 no
	Outdoor Area yes
Describe any ancillary entertainment (i.e. video games, pool tables, etc):	Indoor Area n/a
	Outdoor Area n/a

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



Liquor Licence Application
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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:

none

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 managers of the business have a criminal record? Yes _____ No If 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? Yes _____ No

List the names and addresses of any other licensed establishments in Canada owned or operated by the same operator or owner:

n/a

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



Liquor Licence Application
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I Ann Buthineau / Dan Bithineau (name of applicant/owner), hereby certify that the information provided pursuant to this liquor licence 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 licence issued by the City and may be grounds for such licence to be revoked

Sworn (Affirmed) before me at The City of Barrie,
in the Province of Ontario on the 16 day

April, 20 19

Monique Anne Kovacs
A Commissioner, etc.



Signature of Applicant


Monique Anne Kovacs,
a Commissioner, etc.,
Province of Ontario, for the
Corporation of the City of Barrie.
Expires May 9, 2021

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.