



**LEGISLATIVE AND COURT SERVICES  
MEMORANDUM**

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**TO: MAYOR J. LEHMAN, AND MEMBERS OF COUNCIL**

**FROM: T. MCARTHUR, COMMITTEE SUPPORT CLERK**

**RE: LIQUOR SALES LICENCE APPLICATION REVIEW – THE WHEELED BREW  
BOTTLE SHOP – 7 CLAPPERSON STREET**

**DATE: JANUARY 11, 2020**

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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 The Wheeled Brew Bottle Shop located at 7 Clapperton Street, 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 Wednesday, January 20, 2021 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](mailto: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 Information Renseignements 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.

#### Section 1 - Application Details

#### Section 1 - Détails de la demande

Establishment name / Nom de l'établissement <i>The Wheeled Brew Bottle Shop</i>		Establishment tel. no. / N° de tél. de l'établissement <i>647-313-7585</i>	
Contact name / Nom de la personne à contacter <i>Evan MacDonald</i>		Contact's tel. no. / N° de tél. de la personne à contacter	
Exact location of establishment (not mailing address) / Emplacement exact de l'établissement (non l'adresse postale)			
Street Number / Numéro <i>7</i>	Street Name / Nom de rue <i>Clapperton Street</i>	Street Type / Genre de rue <i>St.</i>	Direction / Orientation de rue
Lot/Concession/Route / Lot/concession/route rurale		City/ Town/Municipality / Ville/village/municipalité <i>Barrie</i>	Postal Code / Code postal <i>L4M 3E4</i>

Does the application for a liquor licence include: / La demande de permis d'alcool porte-t-elle entre autres sur :

☒ indoor areas / des zones intérieures ☐ outdoor areas / des zones de plein air

#### Section 2 - Municipal Clerk's 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 village, de la ville ou du canton à qui les impôts sont versés :  
(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) *City of Barrie*  
(Si la région où se trouve l'établissement a été annexée ou fusionnée, nom sous lequel le village, la ville ou le canton était connu)

Is the area where the establishment is located: / La vente de boissons alcooliques est-elle autorisée dans la région où se trouve l'établissement?

☒ Wet (for spirits, beer, wine) / Oui (spiritueux, bière, vin) ☐ Damp (for beer and wine only) / Oui (bière et vin seulement) ☐ Dry / Non

#### 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-conformité 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) municipal(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)	The Wheeled Brew Incorporated, The Wheeled Brew Bottle Shop
Street Address of Establishment:	7 Clapperton Street, Barrie
Closest Intersection:	Clapperton Street & Dunlop Street East
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	Corporation, Evan MacDonald James Sime Christina Sime
Name of Applicant: (If different from owner)	
Mailing Address for Applicant:	
Applicant Business Phone/Fax Number:	647-313-7585
Applicant Business E-mail address:	info@thewheeledbrew.com

Purpose of the Liquor License 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 \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



## Liquor License Application Questionnaire

### SIZE AND LOCATION

What is the size (floor area) of the establishment?	<u>CURRENT</u> Indoor Area	<u>PROPOSED</u> Indoor Area	<u>CURRENT</u> Outdoor Area	<u>PROPOSED</u> Outdoor Area
	<u>780</u> ft <sup>2</sup> /m <sup>2</sup>	<u>458</u> ft <sup>2</sup> /m <sup>2</sup>	<u>N/A</u> ft <sup>2</sup> /m <sup>2</sup>	<u>N/A</u> ft <sup>2</sup> /m <sup>2</sup>
What is the occupant load and/or seating capacity of the Establishment?	<u>CURRENT</u> Indoor Area	<u>PROPOSED</u> Indoor Area	<u>CURRENT</u> Outdoor Area	<u>PROPOSED</u> Outdoor Area
	<u>Awaiting Inspection</u>	<u>15</u>	<u>N/A</u>	<u>N/A</u>
	Occupant load	occupant load	occupant load	occupant load
	<u>N/A</u>	<u>15</u>	<u>N/A</u>	<u>N/A</u>
	Licensed capacity	licensed capacity	licensed capacity	licensed capacity
	<u>N/A</u>	<u>5</u>	<u>N/A</u>	<u>N/A</u>
	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 licensed 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

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:

Bombon - Bar (late night drinking and entertainment)  
North Country - Restaurant and Bar (Dining and casual)  
British Arms - Restaurant (Dining and casual drinks)  
IL Buco - Restaurant (Dining and casual drinks)  
Donaligh's - Pub (late night bar & entertainment)  
\* all of these establishments focus on live entertainment and seating, we don't!

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

What is the distance to the closest residential dwelling unit? 10 @ m

Does the subject property contain residential units?  
Yes \_\_\_\_\_ No ☒



Liquor License Application Questionnaire

OPERATING HOURS, TARGET MARKET, NATURE OF BUSINESS

Hours of Operation of the business: Indoor Area 11am - 8pm Outdoor Area N/A

Hours associated with alcohol sales: Indoor Area 11am - 8pm Outdoor Area N/A

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

Before 10 PM:

Craft beer/wine/spirits bottle shop (to-go products)

After 10 PM:

As we are not a bar or restaurant, we would continue as a bottle shop if open.

Describe your target market:

Local craft beer, wine and spirit enthusiasts age 22-55 with a strong inclination to supporting local. We will be hosting virtual events featuring local Barrie businesses to promote their services and have fun!

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:

Smart serve certified retail associates similar to Beer Store or LCBO (1-2)

After 10 PM:

Shop will be closed and feature CCTV

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)

As we are not a bar, but supplying products in cans & bottles

like the Beer Store or LCBO, we have not opted for on site security personnel

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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Liquor License Application Questionnaire

Is either internal or external video surveillance planned for the establishment?

Yes ☒ No ☐ Describe

Multiple cameras covering interior of the premises (front, pos, window, and back room)

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

Describe your plans for crowd management:

Before 10 PM:

Retail staff will ensure customer numbers align with both licensing requirements and up-to-date covid restrictions. Signage and up to date Smart Serve Certifications will aid our staff in ensuring everyone's safe shopping experience.

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

After 10 PM:

The shop will be closed prior to 10pm as our service focuses on to go products from local breweries across the province.

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? 85%.



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 This business will focus on to go product and will have a small window bench and two cocktail tables.
	Outdoor Area N/A
Describe any food preparation facilities for the venue:	Indoor Area As a retail focused unit, any alcohol purchases will have the option of bagged local snacks (no kitchen)
	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 N/A
	Outdoor Area N/A
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 N/A
	Outdoor Area N/A
Describe any ancillary entertainment (i.e. video games, pool tables, etc):	Indoor Area Not planned at this time
	Outdoor Area N/A



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

Yes \_\_\_\_\_ No X

Live Music

Yes \_\_\_\_\_ No X

Recorded Music

Yes X No \_\_\_\_\_

Amplified Sound

Yes \_\_\_\_\_ No X

Unamplified Sound

Yes \_\_\_\_\_ No X

Outdoor Area Only

Dance Floor

Yes \_\_\_\_\_ No X

Live Music

Yes \_\_\_\_\_ No X

Recorded Music

Yes \_\_\_\_\_ No X

Amplified Sound

Yes \_\_\_\_\_ No X

Unamplified Sound

Yes \_\_\_\_\_ No X





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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:

None, the board and business operators have a great reputation with  
an exemplary record on all fronts, and are excited to continue that  
in the Barrie Community

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 X 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 X 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 X

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 License Application Questionnaire

I, Evan McDonald (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



Signature of Applicant

Sworn (Affirmed) before me at The City of Barrie,  
in the Province of Ontario on the 6 day

January, 20 21.

Tara Lynn McArthur  
A Commissioner, etc.

Tara Lynn McArthur, 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 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.