

Renseignements municipaux

Return completed
form to:
Alcohol and Gaming
Commission of Ontario
90 Sheppard Avenue, East
Suite 200
Toronto ON M2N 0A4

Remplir et retourner cette
formule à ;
Commission des alcools
et des jeux de l'Ontario
90, avenue Sheppard Est
Bureau 200
Toronto ON M2N 0A4



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

Jadore Fine Cheese & Chocolate Inc.

Establishment tel. no./ N° de tél. de l'établissement

Contact name/Nom de la personne à contacter

Jessi Fournier & Bekki Martin

Contact's tel. no./ N° de tél. de la personne à contacter

Exact location of establishment (not mailing address - street number and name, city or lot no., concession and township)

Emplacement exact de l'établissement (non l'adresse postale - numéro et nom de la rue, ville ou numéro de lot, concession et canton)

123 Dunlop St E.

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)

(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:

Specify concerns regarding zoning, non-compliance with bylaws, or general objections to the application by council or elected municipal representatives, must be clearly outlined, in a separate submission or letter within 30 days of this notification.

Remarque :

Toute question particulière concernant le zonage, la non-conformité aux règlements municipaux ou toute objection générale relative à la demande de la part de membres du conseil ou de représentants municipaux élus doit être décrite clairement dans un document distinct ou une lettre à l'intérieur d'une période de 30 jours après la remise 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

GENERAL INFORMATION

Name of Establishment: (Registered name and Operating name, if different)	J'adore Fine Cheese + Chocolate Inc.
Street Address of Establishment:	123 Dunlop St. East.
Closest Intersection:	Mulcaster & Dunlop
Mailing Address: (If different from the location of the establishment)	Same
Name of Owner: (Indicate individual sole proprietor, partnership or corporation, as appropriate) If partnership or corporation, provide names and contact information for all shareholders	Bekki Martin Vice President Jesse Fournier President
Name of Applicant: (if different from owner)	Bekki Martin
Mailing Address for Applicant:	
Applicant Business Phone/Fax Number:	705 818 0000
Applicant Business E-mail address:	Sales@jadorefinecheese.com

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

New Patio, Outdoor

SIZE AND LOCATION

What is the size (floor area) of the establishment?

CURRENT
Indoor Area

131.5 ft²/m²

PROPOSED
Indoor Area

Same ft²/m²

CURRENT
Outdoor Area

_____ ft²/
m²

PROPOSED
Outdoor Area

_____ ft²/m²

What is the occupant load and/or seating capacity of the establishment?

CURRENT
Indoor Area

30

occupant load

30

licensed capacity

30

seating capacity

PROPOSED
Indoor Area

30

occupant load

30

licensed capacity

30

seating capacity

CURRENT
Outdoor Area

_____ occupant load

_____ licensed capacity

_____ seating capacity

PROPOSED
Outdoor Area

30

occupant load

30

licensed capacity

30

seating capacity

inside already licensed

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? 20 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:

Bohemia - coffee Bar

Flying Monkey Brewery

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

apartments along developer

Does the subject property contain residential units?

Yes ☐ No ☒

OPERATING HOURS, TARGET MARKET, NATURE OF BUSINESS

Hours of Operation of the business: Indoor Area 9-6pm Outdoor Area 12-9

Hours associated with alcohol sales Indoor Area 12-9 Outdoor Area 12-9

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

Before 10 PM:

Cheese & Chocolate Shop

After 10 PM:

Closed.

Describe your target market:

- Age 25+

- Food passionate people

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: 2-3 staff all SMART Serve Certified

After 10 PM: Closed with 4 cameras.

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)

n/a

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

Are exterior line ups (queues) anticipated for your establishment? Yes ☐ No ☒

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

Is either internal or external video surveillance planned for the establishment?
Yes ☒ No ☐ Describe

6 cameras Inside
2 Cameras Outside on each level of Patio

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

Describe your plans for crowd management:

Before 10 PM:

We stay within or maximum capacity.
After maximum capacity is reached we refuse entry
until there is space available.

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

After 10 PM:

Closed.

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? 5%

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):	Indoor Area <i>already Licenced</i>
	Outdoor Area <i>- Cocktail tables - Bar Stools.</i>
Describe any food preparation facilities for the venue:	Indoor Area <i>already Licenced</i>
	Outdoor Area <i>taken place inside</i>
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 <i>already Licenced</i>
	Outdoor Area <i>- Cheese Platters - Chocolate tastings - Cheese tastings</i>
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 <i>n/a</i>
	Outdoor Area <i>n/a</i>
Describe any ancillary entertainment (i.e. video games, pool tables, etc):	Indoor Area <i>n/a</i>
	Outdoor Area <i>n/a</i>

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

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 <input checked="" type="checkbox"/>
	Live Music	
	Yes _____	No <input checked="" type="checkbox"/>
	Recorded Music	
	Yes _____	No <input checked="" type="checkbox"/>
	Amplified Sound	
	Yes _____	No <input checked="" type="checkbox"/>
	Unamplified Sound	
	Yes _____	No <input checked="" type="checkbox"/>
	<u>Outdoor Area Only</u>	
	Dance Floor	
	Yes _____	No <input checked="" type="checkbox"/>
Live Music		
Yes _____	No <input checked="" type="checkbox"/>	
Recorded Music		
Yes <input checked="" type="checkbox"/>	No _____	
Amplified Sound		
Yes _____	No <input checked="" type="checkbox"/>	
Unamplified Sound		
Yes _____	No <input checked="" type="checkbox"/>	

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 ☒ 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:

None.

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

I Jessica Fournier

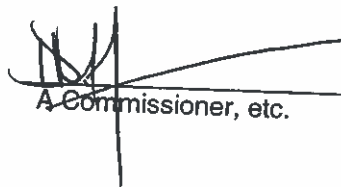
(name of applicant/owner), hereby certify that the information provided pursuant to this liquor licence application questionnaire is true, accurate and complete to the best of my knowledge and ability. I understand and acknowledge that if the information with respect to the establishment changes materially, 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.



Signature of Applicant

Sworn (Affirmed) before me at The City of Barrie,
in the Province of Ontario on the 8th day

June, 20 17.



A Commissioner, etc.

Dawn Andrea McAlpine,
a Commissioner, etc., County of
Simcoe, for the Corporation of the
City of Barrie.
Expires with termination of employment.

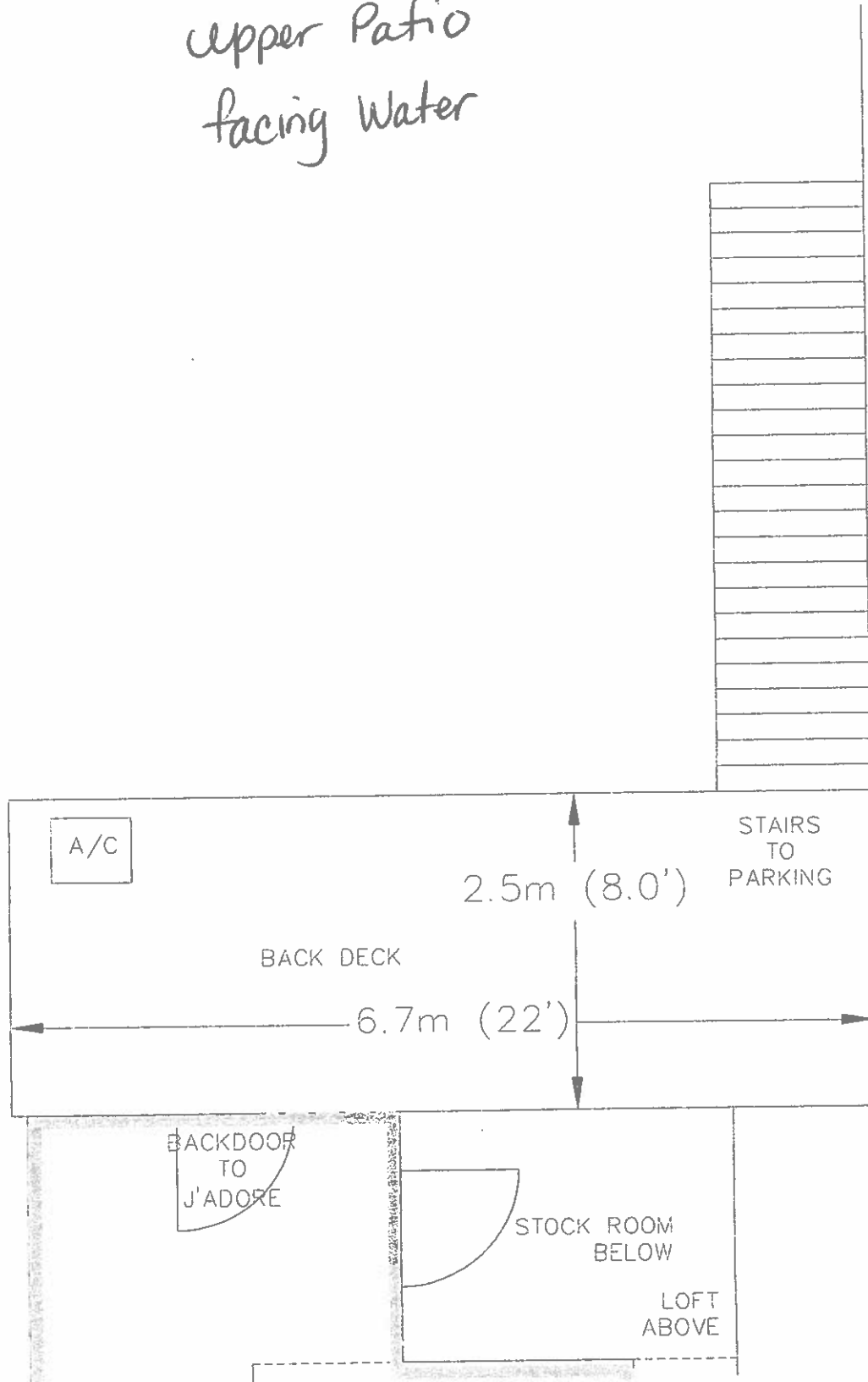
NOTE: This is a sworn (affirmed) affidavit of the deponent only. No investigation has been conducted by this authority to confirm or verify the above sworn information.

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.

LAKESHORE

upper Patio
facing Water



LAKESHORE

Lower Patio
Facing water

