

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 – MUCHO BURRITO

DATE: OCTOBER 28, 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 Friday October 18, 2019 from an establishment named Mucho Burrito located at 420 Essa Road, 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 November 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



Return completed form to: Alcohol and Gaming Commission of Ontario 90 SHEPPARD AVE E SUITE 200 TORONTO ON M2N 0A4 Remplir et retoumer 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

liquor licence.			existant.			
Section 1	- Application De	tails Se	ction '	1 - Détails	de la demai	nde
Establishment n	ame / Nom de l'établisser	nent		Establishment to	el. no. / Nº de tél.	de l'établissement
AKSHAR MAH	IANT INC. (MUCHO BUI	RRITO)				
	Nom de la personne à con			Contact's tel. no	. / N° de tél. de la p	ersonne à contacter
DR. VINOD PA	ATEL					
Exact location of Street Number / Numéro		g address) / Emplacement exa	ot de l'éta	Street Type / Genre de rue	l'adresse postale) Direction/ Orientation de rue	Suite/Floor/Apt. / Bureau/étage/app.
420	ESSA ROAD					C3
		City/ Town/Municipality / Ville/village/municipalité			Postal Code / Code postal	
LOT 5		BARRIE			L4N 9J7	
Does the applica	ition for a liquor licence inc	clude: / La demande de permis	d'alcool p	orte-t-elle entre a	utres sur :	
✓ indoor area	s / des zones intérieures	outdoor areas / des zones	de plein	air		
Name of village,	the "wet/damp/dry" so town, township or city whe	Sec	firmer le ge, de la	municipal(e) : e statut de la ré ville ou du canton	egion ci-dessous	ont versés :
(Si la région où s	se trouve l'établissement a	été annexée ou fusionnée, nom	sous leg	quel le village, la	ville ou le canton é	itait connu)
	the establishment is locate s, beer, wine) / Oui (spiritue	d: / La vente de boissons alcoolid ux, bière, vin) Damp (for			la région où se tro ière et vin seuleme	
bylaws must be	ns regarding zoning or no clearly outlined in a sep 30 days of this notifica	n-compliance with To arate submission aution.	x règlem docum	ccupation conce nents municipau: nent distinct ou		
Signature of mur	nicipal official / Signature d	u (de la) représentant(e) munic	pal(e)	Title / Poste		
Address of munic	cipal office / Adresse du bo	ureau municipal			Date	
2085 (2013/09)	Queen's Printer of Ontario, 2013 /	© Imprimeur de la Reine pour l'Ontario	2013			Page 1 of/de 1





Liquor License Application Questionnaire

GENERAL INFORMATION

Name of Establishment: (Registered name and Operating name, if different)	AKSHAR MAHANT INC. (MUCHO BURRITO)			
Street Address of Establishment:	420 ESSA ROAD, UNIT #C3, BARRIE, ON, L4N 9J7			
Closest Intersection:	ESSA ROAD & VETERAN DRIVE			
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	AKSHAR MAHANT INC. (MUCHO BURRITO) DR. VINOD PATEL SANJAYKUMAR PATEL			
Name of Applicant: (if different from owner)				
Mailing Address for Applicant:				
Applicant Business Phone/Fax Number:				
Applicant Business E-mail address:				
Purpose of the Liquor License Appl	ı			
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				





OUTS AND LOCATION				
	:	SIZE AND LOCATION		
What is the size (floor area) of the establishment?	rea) of the <u>Indoor Area</u> <u>Indoor A</u>		ROPOSED CURRENT Outdoor Area	
	1228 ft²/ m²	1228 ft²/ m²	m ² ft ² /	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?	28 Occupant load	28 occupant load	occupant load	occupant load
	28 Licensed capacity	28 licensed capacity	licensed capacity	licensed capacity
	28 Seating capacity	28 seating capacity	seating capacity	seating capacity
Is the entire operation enclosed? (i.e. the operation is interior space only) Yes				
What is the distance to the closest other establishment(s) serving alcohol? 1100 Mft/ 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:				
THERE IS NO BUSINESS ESTABLISHMENT SERVING ALCOHOL WITHIN 120 M WHICH I AM				
AWARE OF.				
Note: If you require more space please attach additional documentation to this form.				
What is the distance to the closest residential dwelling unit? 120 M ft/ m				
Does the subject property contain residential units? Yes No				





Liquor License Application Questionnaire

OPERATING HOURS	S, TARGET MARKET, NAT	URE OF BUSINESS
Hours of Operation of the business:	Indoor Area 10:00 AM TO 11:30 PM	Outdoor Area
Hours associated with alcohol sales	Indoor Area	Outdoor Area
What is the primary nature of the establis bar/tavern, coffee house, etc)	shment? (i.e. family restaura	ant, fine dining, lounge/nightclub,
Before 10 PM:		
FAMILY RESTAURANT (MEXICAN WELL ESTABL	ISHED FRANCHISEE - MUCHO	BURRITO)
After 10 PM:		
FAMILY RESTAURANT (MEXICAN WELL ES	TABLISHED FRANCHISEE -	MUCHO BURRITO)
Describe your target market: OUR PLANNED TARGET MARKET FOR FAMILY F	RESTAURANT IS WITHIN 5 KM R	ADUIS FROM THE BUSINESS ADDRESS.
No.		
Describe the proposed security both inter training or experience of staff, number of		tablishment (i.e. total number of staff,
Before 10 PM: 12 FULL TIME / PART TIME / EXPERIENCED STA	FF	
After 10 PM: 2 FULL TIME STAFFS		
Note: If you require more space please a	ttach additional documenta	tion to this form.
Are all security personnel trained and lice or hired service) NA	nsed? Yes	No Describe (i.e. in-house
Note: If you require many and a second	Manh additional days	Alan An Alain Farman
Note: If you require more space please a	ttacri additional documenta	tion to this form.
Are exterior line ups (queues) anticipated	for your establishment? Y	es No

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Is either internal or external video surveillance planned for the establishment?
Yes NoDescribe
INTERNAL CCTV SURVEILLANCE WILL BE INSTALLED AND OPERATING 24/7/365.
Note: If you require more space please attach additional documentation to this form.
Note. If you require more space please attach additional documentation to this form.
Describe your plans for crowd management:
Before 10 PM:
Note: If you require more space please attach additional documentation to this form.
After 10 PM:
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?





Describe the nature of the proposed seating for the venue (i.e. dining tables, cocktail tables, stand up bar):	Indoor Area DINNIG TABLE
	Outdoor Area NA
Describe any food preparation facilities for the venue:	Indoor Area AS PER MUCHO BURRITO'S FRANCHISEE STANDARDS, THERE WILL BE GRILL, STOVE, OVEN MICROWAVE & FRYING PANE
	Outdoor Area NA
Describe any other type of business to be operated from the establishment on a permanent basis, or from	indoor Area NA
time to time (i.e. bakeshop, variety store, grocery store, billiard hall, take-out restaurant, adult entertainment, non- motorized refreshment vehicles, etc?):	Outdoor Area NA
If yes, are the businesses physically separated from the licensed area(s) so that access or exits to and from	Indoor Area NA
the other business are not through the licensed area(s)? Provide full details:	Outdoor Area NA
Describe any ancillary entertainment (i.e. video games, pool tables, etc):	Indoor Area NA
	Outdoor Area NA





Describe any musical entertainment to be provided (i.e. dance	Indoor Area Only Dance Floor
floor, live/recorded music, amplified sound , etc)	Yes No
	Live Music Yes No
	Recorded Music
	Yes No
	Yes No
,	Unamplified Sound Yes No
	Outdoor Area Only
	Yes No
	Live Music Yes No
	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: 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__V ____ 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? __No ____/ List the names and addresses of any other licensed establishments in Canada owned or operated by the same operator or owner:

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





Liquor License Application Questionnaire

that the information pro- complete to the best o with respect to the esta updated questionnaire questionnaire or the inc	of my knowledge and abi ablishment changes mate I further understand a clusion of false statements	uor license application questionnaire is true, accurate and lity. I understand and acknowledge that if the information erially, I am responsible for completing and submitting an acknowledge that the submission of an incomplete is is deemed to be a breach of any business license issued
by the City and may be	grounds for such license	s is deemed to be a breach of any business license issued to be revoked

Sworn (Affirmed) before me at The City of Barrie, in the Province of Ontario on the 1 k day

Kristi Lynn Fishpool, a Commissioner, etc., Province of Ontario, for the Corporation of the City of Barrie. Expires May 9, 2021

Signature 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 Garning 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.