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

**FROM:** D. MCALPINE, CITY CLERK

**NOTED:** E. ARCHER, CMA, GENERAL MANAGER OF CORPORATE SERVICES   
C. LADD, CHIEF ADMINISTRATIVE OFFICER 

**RE:** LIQUOR LICENCE APPLICATION REVIEW – PAINTERS HALL BISTRO

**DATE:** MAY 7, 2012

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The purpose of this memorandum is to advise that a Municipal Information Form and associated City of Barrie Liquor Licence Application Questionnaire which was received on May 2, 2012 from Painters Hall Bistro located at 17 Clapperton Street, which was circulated to City Departments and community stakeholders upon receipt.

A copy of the Alcohol and Gaming Commission of Ontario's Municipal Information Form and associated City of Barrie Liquor Licence Application Questionnaire is attached as Appendix "A" to this memorandum.

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 16, 2012**, as follows:

Alcohol and Gaming Commission of Ontario  
c/o Dawn McAlpine, City Clerk  
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.

  
\_\_\_\_\_  
Dawn McAlpine, City Clerk

**APPENDIX "A"**  
**SUBMITTED DOCUMENTS**

# Municipal Information 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

Painters Hall BISTRO

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

Contact name/Nom de la personne à contacter

Erin or Shane BURROWS

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)

17. Clapperton St. BARRIE

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)	200800 Ont Inc O/A PAINTERS HALL BISTRO
Street Address of Establishment:	17. CLAPPERTON ST.
Closest Intersection:	Collier St. + CLAPPERTON ST.
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	Shane Burrows.
Name of Applicant: (if different from owner)	ERIN BURROWS.
Mailing Address for Applicant:	
Applicant Business Phone/Fax Number:	
Applicant Business E-mail address:	e.burrows@painters hall.ca

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

Patio licence - for existing liquor licence  
@ 79 persons.

**SIZE AND LOCATION**

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

\_\_\_\_\_

*The Five*

\_\_\_\_\_

*Ask*

\_\_\_\_\_

*Dmaleighs*

\_\_\_\_\_

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

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

Does the subject property contain residential units? - *upstairs Apartments*  
Yes  No \_\_\_\_\_

**OPERATING HOURS, TARGET MARKET, NATURE OF BUSINESS**

Hours of Operation of the business:

Indoor Area

11:30 - 11pm

Outdoor Area

12 - 10pm

Hours associated with alcohol sales

Indoor Area

12 - 11pm

Outdoor Area

12 - 10pm

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

Before 10 PM:

Restaurant / Bistro

After 10 PM:

-

Describe your target market:

Generation X

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:

8 Staff

After 10 PM:

2

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 \_\_\_\_\_

N/A

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

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

Yes \_\_\_\_\_ No \_\_\_\_\_ Describe

N/A

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:

Q

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? 30%

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>Dining Tables</i>
	Outdoor Area <i>DINING Tables</i>
Describe any food preparation facilities for the venue:	Indoor Area <i>Industrial Kitchen</i>
	Outdoor Area <i>NONE</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>N/A</i>
	Outdoor Area <i>N/A</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>NO</i>
	Outdoor Area <i>NO</i>
Describe any ancillary entertainment (i.e. video games, pool tables, etc):	Indoor Area <i>NO</i>
	Outdoor Area <i>NO.</i>

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

<p>Describe any musical entertainment to be provided (i.e. dance floor, live/recorded music, amplified sound, etc)</p>	<p><u>Indoor Area Only</u></p>
	<p>Dance Floor Yes _____ No <input checked="" type="checkbox"/></p>
	<p>Live Music Yes _____ No _____ <i>Thurs Fri - 6-10 pm</i></p>
	<p>Recorded Music Yes <input checked="" type="checkbox"/> No _____ <i>11:30 - 11 pm</i></p>
	<p>Amplified Sound Yes _____ No <input checked="" type="checkbox"/></p>
	<p>Unamplified Sound Yes _____ No <input checked="" type="checkbox"/></p>
	<p><u>Outdoor Area Only</u></p>
	<p>Dance Floor Yes _____ No <input checked="" type="checkbox"/></p>
	<p>Live Music Yes _____ No <input checked="" type="checkbox"/></p>
	<p>Recorded Music Yes _____ No <input checked="" type="checkbox"/></p>
	<p>Amplified Sound Yes _____ No <input checked="" type="checkbox"/></p>
	<p>Unamplified Sound Yes _____ No <input checked="" type="checkbox"/></p>

**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*

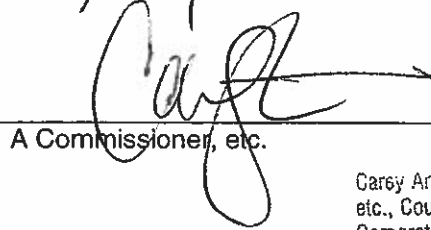
Note: If you require more space please attach additional documentation to this form.

I ERIN BURROWS (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 2nd day

May, 20 12.

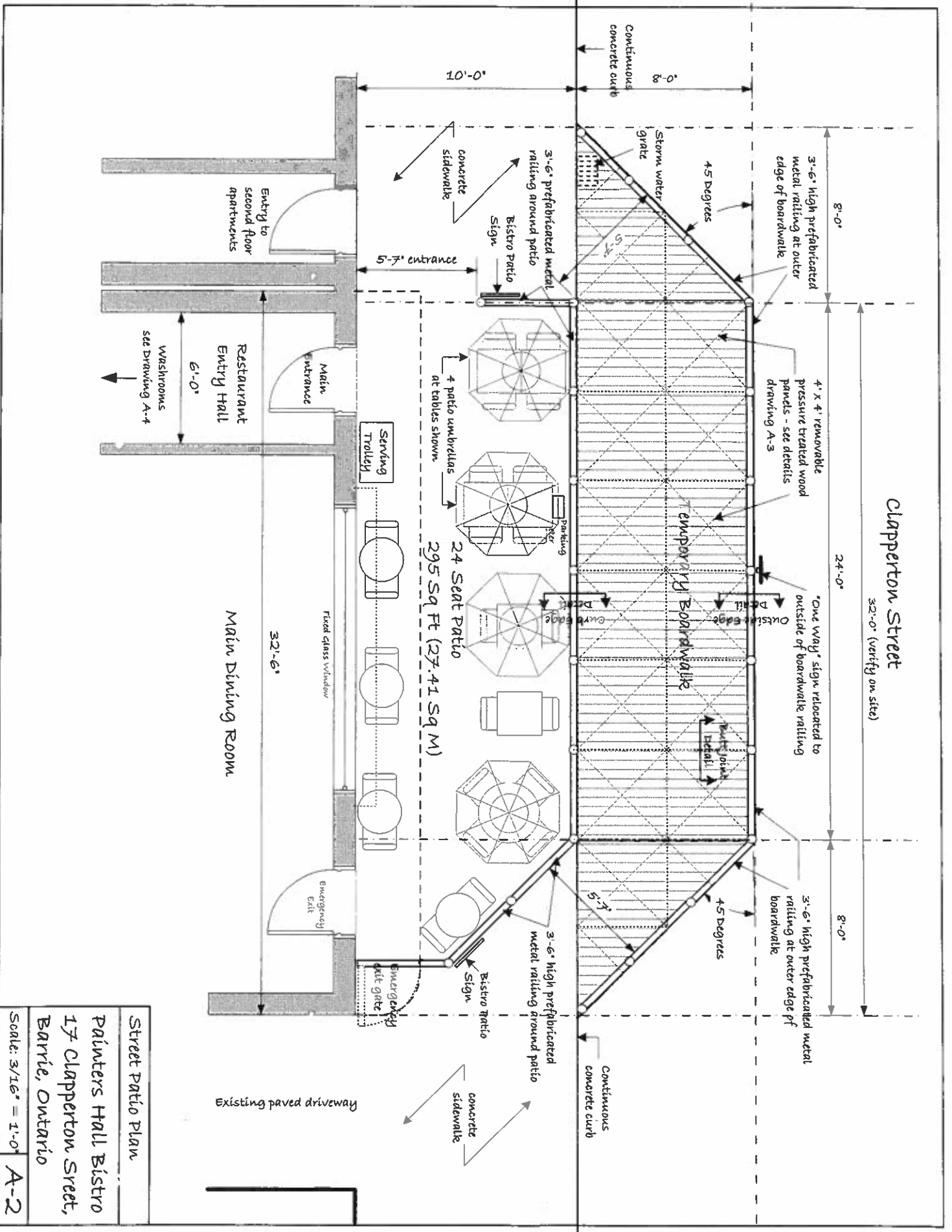
  
A Commissioner, etc.

Garry Ann McGorrie 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.



Clapperton Street

32'-0" (verify on site)

24'-0"

8'-0"

8'-0"

10'-0"

32'-6"

Main Dining Room

Existing paved driveway

24 Seat Patio  
295 SQ FT (27.41 SQ M)

Restaurant Entry Hall  
6'-0"

Washrooms  
see Drawing A-4

Entry to second floor apartments

5-7' entrance

Main entrance

Fixed glass window

Emergency exit

Emergency exit gate

Bistro patio sign

3'-6" high prefabricated metal railing around patio

3'-6" high prefabricated metal railing around patio

Bistro patio sign

4 patio umbrellas at tables shown

Serving Trolley

parking

Temporary Boardwalk

\*One Way sign relocated to outside of boardwalk railing

3'-6" high prefabricated metal railing at outer edge of boardwalk

3'-6" high prefabricated metal railing at outer edge of boardwalk

4" x 4" removable pressure treated wood panels - see details drawing A-3

45 Degrees

45 Degrees

Continuous concrete curb

Continuous concrete curb

Storm water grate

Drain

Drain

Concrete sidewalk

Concrete sidewalk

Street Patio Plan

Painters Hall Bistro  
17 Clapperton Street,  
Barrie, Ontario

Scale: 3/16" = 1'-0" A-2