Staff Memorandum



To Mayor A. Nuttall and Members of Council

Subject New Liquor Licence Application Review – South Indian Xpress Inc.

o/a The Masala Indian Kitchen and Bar - 422 Dunlop Street

West, Unit 1

Ward(s) 5

Date October 8, 2025

Department Head

Approval

W. Cooke, City Clerk/Director of Legislative and Court Services

Executive Member

Approval

Not applicable

CAO Approval Not applicable

The purpose of this Memorandum is to advise members of Council that an Alcohol and Gaming Commission (AGCO) Municipal Information Form and an associated City of Barrie Liquor Licence Application Questionnaire were received from a business named South Indian Xpress Inc. o/a The Masala Indian Kitchen and Bar located at 422 Dunlop Street West, Unit 1, Barrie. Upon receipt, the documents were circulated to City Departments and community stakeholders.

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 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 will be compiled and submitted to the Alcohol and Gaming Commission of Ontario for review and consideration as part of the Commission's liquor sales licence issuance process.

Appendix:

Appendix A - Municipal Information Form and City of Barrie Liquor Licence Application Questionnaire

Memo Author: Tara McArthur, Coordinator of Elections and Special Projects

File #: P09 - Licences

Pending #: Not Applicable

Appendix A

Municipal Information Form and City of Barrie Liquor Licence Application Questionnaire



Alcohol and Gaming Commission of Ontario 90 Sheppard Avenue East, Suite 200 Toronto ON M2N 0A4 Tel.: 416-326-8700 • Fax: 416-326-8711 Toll free in Ontario: 1-800-522-2876 Inquiries: www.agco.ca/iagco

Website: www.agco.ca

Municipal Information for Liquor Sales Licences (including Tied House)

The information requested below is required in support of all applications for a new Liquor Sales Licence (including Tied House) or areas being added to an existing Liquor Sales Licence.			
Section 1 – Application Details Premises Name Premises Phone Number (include			
THE MASALA INDIAN KITCHEN AND BAR		area code)	
Premises Address 422 DUNLOP STREET WEST, UNIT 1	City/Town BARRIE	Province ON	Postal Code L4N 1C2
Contact Name		Contact's Phone No	ımbar (includa
MANOJ KUMAR DEVANDLA		Contact's Phone Number (include area code and extension)	
Contact's Email Address			
Does the application for a Liquor Sales Licence (including Tied House) include indoor areas and/or outdoor areas?			
Indoor Areas Outdoor Areas			
Section 2 – Municipal Clerk's Official Notice of Application for a Liquor Sales Licence (including Tied House) 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 that the village, town, township or city was known as.) BARRIE			
is the area where the establishment is located "wet", "damp" or "dry"? Please select one. Wet (for spirits, beer, wine) Damp (for beer and wine only) Dry			
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Address of Municipal Office		
0 Collier St, Barrie, ON L4M 4T5		
lame of Municipal Official	Title	Date (dd/mm/yyyy)
Telephone number	Email Address	
· · · · · · · · · · · · · · · · · · ·		
		Signature of Municipal Official



(Regi	e of Establishment: istered name and Operating e, if different)	Registered Name : SOUTH INDIAN XPRESS INC. Operating Name : THE MASALA INDIAN KITCHEN AND BAR	
Stree	t Address of Establishment:	422 DUNLOP ST. W,UNIT 1, BARRIE, L4N 1C2	
Close	est Intersection:	HIGHWAY 400 AND DUNLOP	
(If diff	ng Address: ferent from the location of the polishment)		
(Indic partne appro corpo	e of Owner: cate individual sole proprietor, ership, or corporation (as opriate) If partnership or oration, provide names and act information for all shareholders	MANOJ KUMAR DEVANDLA ENTITY TYPE : (CORPORATION)	
(if diff	e of Applicant: ferent from owner)	MANOJ KUMAR DEVANDLA	
	ng Address for Applicant:	1	
Applic	cant Business Phone/Fax ber:		
Applic	cant Business E-mail address:		
Section	on 1: Purpose of the Liquor S	Sales Licence Application	
\checkmark	New establishment		
	New owner/operator of an existing	ng establishment	
	If applicable, name of previous b	usiness	
	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 (If yes, describe below)		
Note:	If you require more space, please at	ttach additional documentation to this form.	



Sectio	n 2: Size and L	ocation			
	f any changes have attion at the time of app		revious occupant load	l inspection, you mus	at provide the required
area)	is the size (floor of the lishment?	Current Indoor Area 250.83 ft2/m2	Proposed Indoor Area 119.92 ft2/m2	Current Outdoor Area ft2/m2	Proposed Outdoor Area ft2/m2
load a	is the occupant and/or seating city of the lishment?	70 Occupant Load	70 Occupant Load	Occupant Load	Occupant Load
		Licensed Capacity	Licensed Capacity	Licensed Capacity	Licensed Capacity
		65 Seating Capacity	65 Seating Capacity	Seating Capacity	Seating Capacity
Is the e	Is the entire operation enclosed? (For example: the operation is interior space only) Yes No No				
Sectio	n 3: Drawing Ro	equirements:			
An accurately scaled floor plan indicating the proposed location of <u>ALL</u> licenced area(s) must be attached to this questionnaire. Your floor plan should include exit door locations, washroom counts, and square footage of the unit, and should show both indoor and outdoor areas.					
3.1	What is the distance	to the closest other es	stablishment(s) servin	ig alcohol?	fl/m
3.2 Please provide the operating names(s) and describe the target market of other establishments serving alcohol within 120 m (approximately 400 ft) radius of the proposed location:					
3.3	3.3 What is the distance to the closest residential dwelling unit? 500 ft/m			_ft/m	
3.4	Does the subject pro	operty contain resident be below:	tial units?	Yes No	\checkmark
Note:	If you require more s	space, please attach a	additional documentat	tion to this form.	



	n 4: Operating Hours, Target Market, Nature o		
		indoor Area	Outdoor Area
Hours	of Operation of the Business?	11am to 12am	
Hours	of Operation associated with alcohol sales?	11am to 12am	
,1	What is the primary nature of the establishment? lounge/nightclub, bar/tavern, coffee house, etc.)	(For example, family	restaurant, fine dining
	Before 10:00 pm:		
	Fine Dining , After 10:00 pm:		
	Fine Dining Describe your target market:		
	Enthusiasts seeking culinary experiences, resi	dents and office work	ers, and tourists.
1.2	Describe the proposed security both internally and extern of staff, training or experience of staff, number of security	ally to the establishment (I	For example, total numbe
	Before 10:00 pm		
	N/A		
	After 10:00 pm:		
	N/A		
4.3	Are all security personnel trained and licensed?	Yes No	
	If you answered <u>yes</u> , please describe below. (For exam	ple, in-house or hired serv	rice)
Note:	If you require more space, please attach additional docu	imentation to this form.	



4.4	Are exterior lineups (queues) anticipated for your establishment? Yes No
4.5	Is either internal or external video surveillance planned for the establishment? Yes No If yes, please describe below:
	Security Cameras are already installed all around and inside the establishment.
46	Describe your plans for crowd management:
	Before 10.00 pm:
	Staff supervision.
,	After 10:00 pm: Extra monitoring
4.7	Is a cover charge to enter the premises proposed?
4.8	What is the anticipated percentage of liquor sales to gross sales?
	Anticipated percentage of liquor sales to gross sales: 20%
Note:	If you require more space, please attach additional documentation to this form.



	Indoor Area
Describe the nature of the proposed seating for the venue (i.e. dining tables, cocktail tables, stand up bar):	Dining Tables
	Outdoor Area
	NA
	Indoor Area
Describe any food preparation facilities for the venue:	Full commercial kitchen with stove, tandoor oven
	Outdoor Area
	NA
Describe any other type of	Indoor Area
business to be operated from the establishment on a permanent basis, or from time to time (i.e. bakeshop, variety store,	NA
grocery store, billiard hall, take-out restaurant, adult entertainment, non-motorized	Outdoor Area
refreshment vehicles, etc?)	NA
	Indoor Area
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)?	NA
	Outdoor Area
	NA
Describe any ancillary, entertainment (for example, video games, pool tables, etc.).	Indoor Area
	NA
	Outdoor Area
F	NA

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



	Indoor Area
	Dance floor
	Yes No 🗸
	Live Music
	Yes No 🗸
	Recorded Music
	Yes No
	Amplified Sound
	Yes No 🗸
	Unamplified Sound
Describe any musical entertainment to be provided	Yes No 🗸
(for example, dance floor, live/recorded music, amplified sound, etc.).	Outdoor Area
umphilos double, clo.).	Odidoo! Alog
	Dance floor
	Dance floor
	Yes No 🗸
	Yes No V
	Yes No V Live Music Yes No V
	Yes No Live Music Yes No Recorded Music
	Yes No Live Music Yes No Recorded Music Yes No V
	Yes No V Live Music Yes No V Recorded Music Yes No V Amplified Sound
	Yes No Live Music Yes No Recorded Music Yes No Amplified Sound Yes No V
	Yes No V Live Music Yes No V Recorded Music Yes No V Amplified Sound Yes No V Unamplified Sound
	Yes No Live Music Yes No Recorded Music Yes No Amplified Sound Yes No V

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



Section 5 Ownership / Management Information 5.1 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
5 2	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 V If yes, provide details of a pending charge or conviction below:
5.3	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 below:
5.4	Is there a pending charge or conviction against the business related to a liquor-related offence? Yes No V If yes, please describe below
5.5	List the names and addresses of any other license establishments in Canada owned or operated by the same operator or owner:
Note:	If you require more space, please attach additional documentation to this form.



Section 6 Affidavit of Liquor Sales Licence Application Questionnaire

, MANOJ DEVANDLALA (name of applicant/owner), hereby certify that the information provided pursuant to this liquor sale 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 26 day of

Emily Anne Brooke A Commissioner, etc. Province of Ontario, for the Corporation of the City of Barrie Expires July 15, 2028

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 bylaws, 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.

Personal information contained on this form is collected under the authority of the Ontario Building Code, Ontario Regulation 332/12 as amended and the City of Barrie By-law 2009-141 and will be used to respond to requests for information on properties.

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