



LEGISLATIVE AND COURT SERVICES MEMORANDUM

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TO: **MAYOR, A. NUTTALL, AND MEMBERS OF COUNCIL**

FROM: **T. MCARTHUR, DEPUTY CITY CLERK**

RE: **LIQUOR SALES LICENCE APPLICATION REVIEW – BLOOM BISTRO – 225 FERNDALE DRIVE SOUTH, UNIT 8**

DATE: **JANUARY 25, 2023**

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 BLOOM BISTRO located at 225 Ferndale Drive South, Unit 8, 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 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.



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APPENDIX "A"

MUNICIPAL INFORMATION FORM CITY OF BARRIE LIQUOR LICENCE APPLICATION QUESTIONNAIRE



Alcohol and Gaming Commission of Ontario
99 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

The information requested below is required in support of all applications for a new Liquor Sales Licence or outdoor areas being added to an existing Liquor Sales Licence.

Section 1 – Application Details

Premises Name

Bliss Bistro

Premises Phone Number (include area code)

1-800-522-2876

Premises Address

225 Ferndale Dr. S #8

City/Town

BARRIE

Province

ON

Postal Code

L4N 6B9

Contact Name

Nalini Prashad

Contact's Phone Number (include area code)

Contact's Email Address

[Redacted]

Does the application for a Liquor Sales Licence 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 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.)

City of 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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Note: Specific concerns regarding zoning or non-compliance with by-laws must be clearly outlined in a separate submission or letter within 30 days of this notification.

Address of Municipal Office

Date (dd/mm/yyyy)

Title

Signature of Municipal Official



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Liquor Licence Application Questionnaire

GENERAL INFORMATION

Name of Establishment: (Registered name and Operating name, if different)	BLOOM BISTRO 1000107247 ONTARIO INC
Street Address of Establishment:	225 FERNDALE DRIVE SOUTH # 8
Closest Intersection:	FERNDALE & ARDAGH.
Mailing Address: (If different from the location of the establishment)	SAME AS ABOVE
Name of Owner: (Indicate individual sole proprietor, partnership or corporation, as appropriate) If partnership or corporation, provide names and contact information for all shareholders	Nalini Prashad Corporation → NO other shareholders
Name of Applicant: (if different from owner)	Patrick Harrington - Stewart
Mailing Address for Applicant:	
Applicant Business Phone/Fax Number:	
Applicant Business E-mail address:	

Purpose of the Liquor Licence Application:

New establishment

New owner/operator of existing establishment

Name of previous business THE POOL Hub

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



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Liquor Licence 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>215.33</u> ft ² / m ²	<u>255.00</u> ft ² / m ²	_____ ft ² / m ²	_____ ft ² / m ²
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>100</u> occupant load	<u>N/A</u> occupant load	<u>N/A</u> occupant load	<u>N/A</u> occupant load
	<u>70</u> licensed capacity	<u>N/A</u> licensed capacity	<u>N/A</u> licensed capacity	<u>N/A</u> licensed capacity
	<u>70</u> seating capacity	<u>N/A</u> seating capacity	<u>N/A</u> seating capacity	<u>N/A</u> 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 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? 400 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:

N/A

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

What is the distance to the closest residential dwelling unit? 350 ft/m

Does the subject property contain residential units?
Yes No



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OPERATING HOURS, TARGET MARKET, NATURE OF BUSINESS

Hours of Operation of the business:	Indoor Area	Outdoor Area
	7AM - 3 PM	N/A
Hours associated with alcohol sales	Indoor Area	Outdoor Area

9AM - 3 PM

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:

Family Restaurant

After 10 PM:

N/A

Describe your target market:

Families, professionals, College students

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:

Security Cameras

After 10 PM:

N/A

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)

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

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



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

We have camera on main door, back door
and interior

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

Describe your plans for crowd management:

Before 10 PM:

We will have the front of house assign a number
for people in the queue and they will wait in
their cars to have their turn for seating in the
restaurant.

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

After 10 PM: N/A

Is a cover charge to enter the premises proposed? Yes N/A No N/A (routinely special
events perhaps

What is the anticipated percentage of liquor sales to gross sales? N/A

35% - 45%



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Describe the nature of the proposed seating for the venue (i.e. dining tables, cocktail tables, stand up bar):	Indoor Area Dining tables, stand up and seated bar table/counter
Describe any food preparation facilities for the venue:	Indoor Area Beverage Bar, Hot table, Full kitchen
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 Take-out
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
Describe any ancillary entertainment (i.e. video games, pool tables, etc):	Indoor Area N/A
	Outdoor Area N/A



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Describe any musical entertainment to be provided (i.e. dance floor, live/recorded music, amplified sound, etc)

Indoor Area Only

Dance Floor

Yes _____ No

Live Music

Yes No _____

Recorded Music

Yes _____ No

Amplified Sound

Yes _____ No

Unamplified Sound

Yes _____ No

Outdoor Area Only

Dance Floor

Yes _____ No

Live Music

Yes _____ No

Recorded Music

Yes _____ No

Amplified Sound

Yes _____ No



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Unamplified Sound

Yes _____ No



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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:

N/A

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

N/A

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

N/A

Is there a pending charge or conviction against the business related to a liquor related offence? Yes _____ No _____

N/A

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



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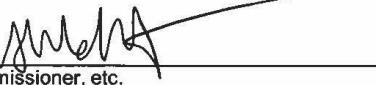
I Patrick Hammott-Stewart (name of applicant/owner), hereby certify that the information provided pursuant to this liquor licence application questionnaire is true, accurate and complete to the best of my knowledge and ability. I understand and acknowledge that if the information with respect to the 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 17 day

January 20 23


A Commissioner, etc.

Alexander Edward Malmsten,
a Commissioner, etc.,
Province of Ontario, for the
Corporation of the City of Barrie
Expires July 15, 2025

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*