



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

Remplir et retourner cette
formule à :
Commission des alcools
et des jeux de l'Ontario
90 AV SHEPPARDE
BUREAU 200
TORONTO ON M2N 0A4

Municipal Information Renseignements 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.

Section 1 - Application Details

Section 1 - Détails de la demande

Establishment name / Nom de l'établissement

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

Boardwalk Gaming Centre Barrie

Contact name / Nom de la personne à contacter

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

Tom Aikins

Exact location of establishment (not mailing address) / Emplacement exact de l'établissement (non l'adresse postale)

Street Number /
Numéro

Street Name /
Nom de rue

Street Type /
Genre de rue

Direction/
Orientation de rue

Suite/Floor/Apt. /
Bureau/étage/app.

52

Bayfield

Street

Lot/Concession/Route /
Lot/concession/route rurale

City/ Town/Municipality /
Ville/village/municipalité

Postal Code /
Code postal

Barrie

L4M 3A5

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:

Specific concerns regarding zoning or non-compliance with bylaws must be clearly outlined in a **separate submission or letter within 30 days of this notification.**

Remarque :

Toute préoccupation concernant le zonage ou la non-conformité aux règlements municipaux doit être clairement décrite dans un document distinct ou une lettre, à l'intérieur d'une période de 30 jours après la date 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)	Delta Boardwalk Gaming Inc., o/a Delta Bingo Barrie
Street Address of Establishment:	52 Bayfield Street, Barrie, L4M 3A5
Closest Intersection:	Bayfield and Dunlop and Collier
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	Delta Boardwalk Gaming Inc. see attached for shareholders
Name of Applicant: (if different from owner)	Tom Aikins, Regional Manager
Mailing Address for Applicant:	52 Bayfield Street, Barrie, ON L4M 3A5
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 _____

XX 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

Liquor Licence Application Questionnaire

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>
	<u>320sqm</u> ft ² / m ²	<u>1400sqm</u> ft ² / m ²	<u> </u> ft ² / m ²	<u> </u> ft ² / m ²
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>
	<u>117</u> occupant load	<u>472</u> occupant load	<u> </u> occupant load	<u> </u> occupant load
	<u>117</u> licensed capacity	<u>472</u> licensed capacity	<u> </u> licensed capacity	<u> </u> licensed capacity
	<u>340</u> seating capacity	<u>100</u> seating capacity	<u> </u> seating capacity	<u> </u> seating capacity

Is the entire operation enclosed? (i.e. the operation is interior space only)
Yes XX 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? 20m 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 Ranch, Bourbon, Royal Thai

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

What is the distance to the closest residential dwelling unit? 25m ft/ m

Does the subject property contain residential units?
Yes No XX

Liquor Licence Application Questionnaire

OPERATING HOURS, TARGET MARKET, NATURE OF BUSINESS

	Indoor Area	930a-10p Mo-Th 930a-130a Fr-Su	Outdoor Area
Hours of Operation of the business:	_____	_____	_____

	Indoor Area	11a-10p Mo-Th 11a-130a Fr-Su	Outdoor Area
Hours associated with alcohol sales	_____	_____	_____

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

Before 10 PM: Bingo and play on demand games

After 10 PM: Bingo and play on demand games

Describe your target market: Adults 35-70

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: 1 Manager and 8 staff on site. All will have Smart Serve training

After 10 PM: 1 Manager and 8 staff on site. All will have Smart Serve training

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

Are all security personnel trained and licensed? Yes XX No _____ Describe (i.e. in-house or hired service) Smart Serve Training

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

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

Liquor Licence Application Questionnaire

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

Yes XX No _____ Describe _____

Approximately 60 Cameras currently in place. Additional cameras will be added with future renovations.

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

Describe your plans for crowd management:

Before 10 PM: Crowd management is supervised by our Session manager. All staff are Smart Serve
trained and all are responsible for checking customer IDs for minimum age.

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

After 10 PM: Unlike most bars, the gaming centre's crowd after 10pm is actually much smaller than at
8pm. The same crowd controls will be in place. On very rare occasions where a special event may
be taking place, additional staff will be employed specifically for crowd control.

Is a cover charge to enter the premises proposed? Yes _____ No XX (routinely / special events)

What is the anticipated percentage of liquor sales to gross sales? 5%

Liquor Licence Application Questionnaire

Describe the nature of the proposed seating for the venue (i.e. dining tables, cocktail tables, stand up bar):	Indoor Area
	Mixture of hexagonal tables, rectangular tables, and high bar tables.
	Outdoor Area
	not applicable
Describe any food preparation facilities for the venue:	Indoor Area
	Full service kitchen
	Outdoor Area
	not applicable
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
	Full time bingo and gaming facility
	Outdoor Area
	not applicable
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
	No
	Outdoor Area
	not applicable
Describe any ancillary entertainment (i.e. video games, pool tables, etc):	Indoor Area
	Bingo, TapTix Games, Play on Demand Gaming
	Outdoor Area
	not applicable

Liquor Licence Application Questionnaire

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

Indoor Area Only

Dance Floor

Yes _____ No XX

Live Music

Yes XX No _____

Recorded Music

Yes XX No _____

Amplified Sound

Yes XX No _____

Unamplified Sound

Yes XX No _____

Outdoor Area Only

NOT APPLICABLE

Dance Floor

Yes _____ No _____

Live Music

Yes _____ No _____

Recorded Music

Yes _____ No _____

Amplified Sound

Yes _____ No _____

Unamplified Sound

Yes _____ No _____

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 XX 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 XX 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 XX

List the names and addresses of any other licensed establishments in Canada owned or operated by the same operator or owner:

see attached

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

Liquor Licence Application Questionnaire

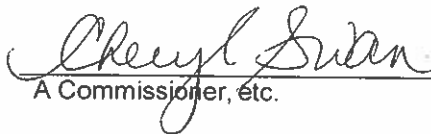
I Tom Aikins (name of applicant/owner), hereby certify that the information provided pursuant to this liquor licence application questionnaire is true, accurate and complete to the best of my knowledge and ability. I understand and acknowledge that if the information with respect to the establishment 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 31st day

October, 20 17


A Commissioner, etc.

Cheryl Joanne Swan, a Commissioner,
etc., Province of Ontario,
for the Corporation of the City of Barrie.
Expires September 19, 2019.

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