



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

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

Hockey Legends Training Inc,

Premises Phone Number (include area code)

289 554 9797

Premises Address

98 Main Street N

City/Town

Markham

Province

ON

Postal Code

L3P1X8

Contact Name

Laura Ispas

Contact's Phone Number (include area code and extension)

647 533 9372

Contact's Email Address

admin@hltraining.ca

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.)

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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

**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 Questionnaire

The Corporation of the City of Markham

To evaluate your Liquor Licence Application, you are required to complete this Questionnaire.

Submit the all required documentation to the Clerk's Office by mail or in-person to the address below.

City of Markham  
Clerk's Office  
Legislative Services Department  
101 Town Centre Boulevard  
Markham, Ontario  
L3R 9W3

**Attention:** Public Services Assistant

If you have any questions about this Questionnaire, please call 905-477-7000 ext. 2366.

## Liquor Licence Questionnaire Checklist

The following items **must** be submitted with this completed Questionnaire to the Clerk's Office:

- ✓ Applicable fee;
- ✓ A sample menu; and,
- ✓ Copy of the floor plan showing the layout, areas that require licensing, seating arrangements, washrooms (show fixtures) and exits.

## Applicant Contact Information

First Name Horia		Last Name Ispas	
Street Number 35	Street Name Wildmoor St.		Suite/Unit Number
City Markham		Postal Code L6B0P1	Province ON
Telephone Number 289-554-9797	Mobile Number 6475339372	Email admin@hltraining.ca	

## Restaurant Information

Name of Restaurant Hockey Legends Training (hockey training facility & meeting/party rooms)			
Street Number 98	Street Name Main Street N		Suite/Unit Number
City Markham		Postal Code L3P1X8	Province ON

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Rev. Jan/17

Information on this form is collected under the authority of Section 11 of the Municipal Act, 2001, S.O. 2001, c. 25, as amended and Section 12 of the Liquor Licence Act, R.S.O. 1990, Chapter L.19, as amended. The information you have provided will be used to contact you and process your Liquor Licence Application. If you have questions about this collection contact the Access & Privacy Manager, Legislative Services Development, 101 Town Centre Boulevard, Markham, Ontario, L3R 9W3, 905-477-5530.

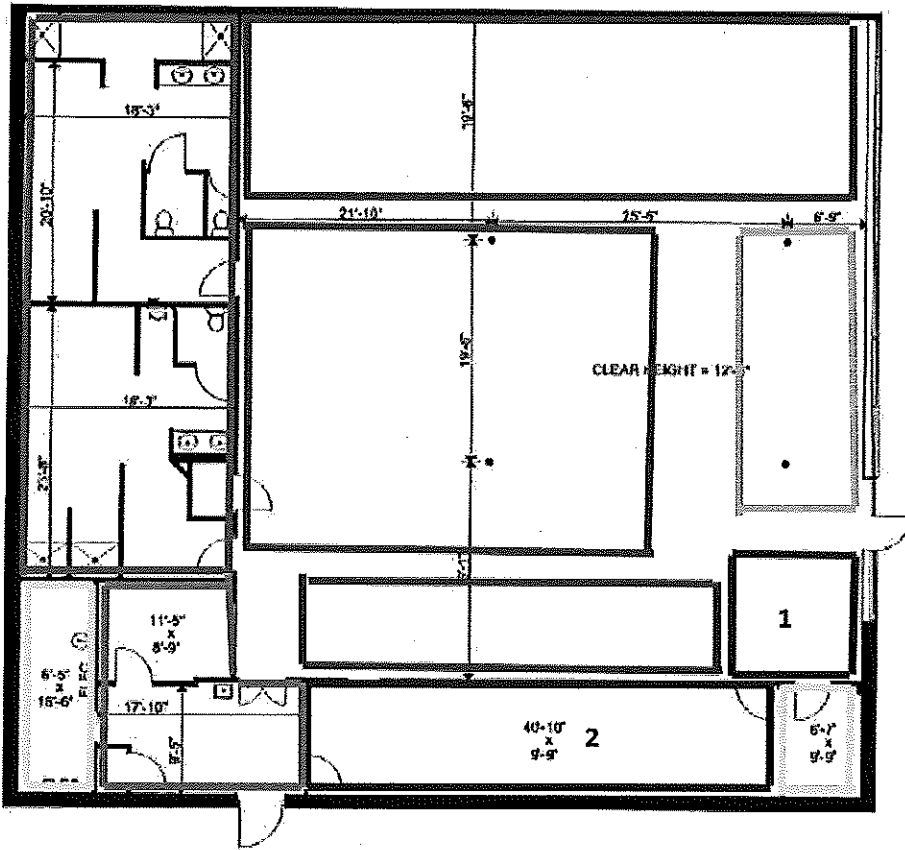
<p>What is the closest major intersection to the restaurant? Main Street Markham and Hwy.7</p>	<p>What is the distance between the restaurant and the closest residential area? (in kilometres) 0.5</p>
<p>Does the restaurant have a valid Business Licence issued by the City of Markham?</p> <p><input checked="" type="radio"/> Yes    <input type="radio"/> No</p> <p>Business Licence Number: <u>BN 775615818</u></p> <p>If no, please note that a Business Licence is required.</p>	<p>Does the restaurant have a working Fire Alarm System?</p> <p><input checked="" type="radio"/> Yes    <input type="radio"/> No</p>
<p>Type of restaurant (select one)</p> <p><input checked="" type="checkbox"/> Family    <input type="checkbox"/> Roadhouse    <input checked="" type="checkbox"/> Sports Bar    <input type="checkbox"/> Fine Dining    <input type="checkbox"/> Take Out    <input checked="" type="checkbox"/> Cafe</p>	
<p>What, if any, entertainment or amusements will be provided in the restaurant? (select all that apply)</p> <p><input type="checkbox"/> Karaoke    <input type="checkbox"/> Live Entertainment    <input type="checkbox"/> Casino    <input type="checkbox"/> Off-Track Betting    <input checked="" type="checkbox"/> Arcade</p>	
<p>Is the liquor licence application for an expansion of the existing operations?</p> <p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p>If yes, please provide the <u>current</u> existing maximum seating capacity: _____</p> <p>If no, please provide the <u>planned</u> existing maximum seating capacity: <u>20</u></p>	
<p><b>Location History</b></p>	
<p>Has a Building Permit been applied for or obtained for this location?</p> <p><input type="radio"/> Yes    Building Permit Number: _____</p> <p><input checked="" type="radio"/> No</p>	
<p>Was the location previously used as a restaurant?    <input type="radio"/> Yes    <input checked="" type="radio"/> No</p> <p>If no, a Building Permit is required. Contact Building Services at 905-477-7000 ext. 4870 for more information.</p>	
<p>If the location was previously used as a restaurant, has construction or alteration been proposed?</p> <p><input type="radio"/> Yes    <input checked="" type="radio"/> No</p> <p>If yes, please provide Alteration Permit Number: _____</p>	

  
 \_\_\_\_\_  
 Applicant's Signature

November 08, 2023  
 \_\_\_\_\_  
 Date

# Hockey Legends Training

98 Main St. N, Markham



- Proposed licenced area
- 1. Waiting area/coffee tables
- 2. Meeting room
- Washrooms
- Storage/electrical
- Staff Kitchen & Office
- Training areas
- Reception area

