

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		Premises Phone Number (include	
Espresso 21		area code) 3656083788	
Premises Address	City/Town	Province	Postal Code
159E Main St Unionville	Unionville	ON	L3R2G8
Contact Name			
Kit Chau		Contact's Phone No area code and exte	•
Contact's Email Address espressoxxi21@gmail.com		4166279248	
Does the application for a Liquor Sales Licen  Indoor Areas  Outdoor Areas  Section 2 – Municipal Clerk's Official Licence in your Municipality.			
Municipal Clerk: Please confirm the "wet/damp/dry" sta	tus below.		
Name of village, town, township or city where (If the area where the establishment is locate the village, town, township or city was known Markham	d was annexed or am	algamated, provide t	he name that
Is the area where the establishment is locate  Wet (for spirits, beer, wine)	d "wet", "damp" or "dr amp (for beer and wir	<u></u>	

Address of Municipal Office	Date (dd/mm/yyy
Title	Signature of Municipal Official

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.



#### **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.

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The following items <u>must</u> 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

KIT

Street Number

Street Name

Last Name

CITA-U

Street Number

Suite/Unit Number

City

Union Ville

Postal Code

L3R 2G8

Telephone Number

3656083788 4166279248

Restaurant Information

# Name of Restaurant ESPRESSO 2 | Street Number | Street Name | Suite/Unit Number | 159E | Main Street | City | Postal Code | Province | L3R2GS | On)

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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.

processing the second s	
What is the closest major intersection to the restaurant?	What is the distance between the restaurant and the closest residential
HWY7	area? (in kilometres)
11 W I /	10kilonetuse
Does the restaurant have a valid Business Licence issued	Does the restaurant have a working Fire
by the City of Markham?	Alarm System?
Yes O No	$\bigcirc$
Business Licence Number: 24 157 148 EE	Yes No
Dustriess Licence Nulliper.	
If no, please note that a Business Licence is required.	
Type of restaurant (select one)	
	ne Dining Take Out 4 Cafe
What, if any, entertainment or amusements will be provided	in the restaurant? (select all that apply)
Karaoke L Live Entertainment Casino	Off-Track Betting Arcade
is the liquor licence application for an expansion of the exist	ing operations?
Yes	
O No	
If yes, please provide the <u>current</u> existing maximum seating capa	city: 28
If no, please provide the <u>planned</u> existing maximum seating capa	city:
Location History	
Has a Building Permit been applied for or obtained for this lo	ocation?
Yes Building Permit Number:	<u>.                                    </u>
No -	
<u> </u>	
Was the location previously used as a restaurant?	Yes No
If no, a Building Permit is required. Contact Building Services at	905-477-7000 ext. 4870 for more information.
If the location was previously used as a restaurant, has cons	struction or alteration been proposed?
Yes 9 No	
If yes, please provide Alteration Permit Number:	· · · · · · · · · · · · · · · · · · ·
	79131,202x
Applicant's Signature	Date

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# **ESPRESSO 21**

#### **Gallery & Cafe**

#### Toast

Avocado Smoked Salmon toast \$20

Toested black bread with avocado cream cheese ,smoked salmon,cherry tomatoes and pomegranate

2. Avocado with egg toast \$17

Toested black bread with avocado and eggs,cream cheese ,tomatoes and pomegranate

3. Bacon & egg toast

## Eggs Benedict

\$20

1. Smoked Salmon eggs Benedict \$19

English multin with posched eggs, cream cheese, arugula, smoked salmon and hollandinase sauce

2. Prosciutto eggs Benedict \$19

English multin with posched eggs, mayo basil, iceberg, prosciutto and hollandinase sauce

3. Belly bacon eggs Benedict \$18

English multin with posched eggs, mayo basil, iceberg, belly bacon and hollandinase sauce

4 sausage eggs Benedict \$19

#### Salad

1. Caesar Salad.	\$17
2. Smoke salmon Salad	\$20
3. Chicken salad	\$20
4. Tuna Salad with egg	\$18
5. Beef salad	\$19

#### Panini

1. Prosciutto
Prosciut

5. Turkey panini. \$17
Smoked turkey on iceberg.onion, Roman tomatoes and mayo basil

Roast beef panini
 Roast beef on iceberg-onlon. Roman .tomatoes and provokone cheese

#### Soup

1. Tomatoes

Made with a base of veggies served with two slices of bread.

2. Touscan bean soup.

\$11

Please inform us of any allergies!

# **ESPRESSO 21**

Gallery & Cafe

# Coffee

1. Espresso.	\$3.75
2. Americano.	\$4.25
3. Macchiato	\$4.5
4. Cortado	\$4.5
5. Cappuccino.	\$4.75
6. Flat white	\$4.75
7. Latte	\$5
8. Hot chocolate	\$5.5

#### More

1. Nutella La	tte	\$6.5
2. Caramel la	tte	\$6
3. Mocha.		\$6
4. Spanish co	offee.	\$6
5. Espresso t		\$6
6. Maple latte		\$6
	ce cream +coffee)	\$9.5
8. Irish coffe		\$9.5
9. Rosé capp		\$6.5
*Decaf avail	*Any hot &cold * *option :	* All one size
*oat almond soy o *Flavor:van	oconut caramei \$1. ilia .cinnamon .hazeinu	*espresso \$2 t. \$0.5

#### Tea

\$3.75
\$4.5
\$5.75
\$5.75
\$5.75
\$6
\$6
\$6
\$6
\$6

Lemonade s	parkiing.	\$6
*Original	*strawberry	*mango

### Ice Cream

Cup			\$6
Waffle.			\$6.5
Charcoal co	ne.		\$7.5

#### Cheesecake

Cheesecake

\$10.95

Please inform us of any allergies!



