

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 De	tails		
Premises Name	Premises Phone Number (include		
Boston Pizza MArkham		area code)	
		905-477-2010	
Premises Address	City/Town	Province	Postal Code
50 East Valhalla Dr	Markham	ON	L3R 0A3
Contact Name			
Vince Pimentel		Contact's Phone Number (include area code and extension)	
Contact's Email Address		416-319-0130	
vince.pimentel@sunraygroup.ca			
Section 2 – Municipal Clerl Licence (including Tied Ho	-	•	or Sales
Municipal Clerk: Please confirm the "wet/dam	, ,		
Name of village, town, township of (If the area where the establishment the village, town, township or city	ent is located was annexed o	r amalgamated, provide	the name that
Is the area where the establishme			
igert igvee Wet (for spirits, beer, wine)	Damp (for beer and	d wine only)	/

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		
Name of Municipal Official	Title	Date (dd/mm/yyyy)
Telephone number	Email Address	
	Signa	ature of Municipal Official



## **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 <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

Applicant Contage Information			
First Name Rattan		Last Name Gupta	
Street Number	Street Name		Suite/Unit Number
245	Yorkland Blvd.		200
City	1	Postal Code	Province
North York		M2J 4W9	ON
Telephone Number	Mobile Number	Email	sunraygroup.ca
416-492-1200	647-505-3402	Ray.gupta@s	

## **Restaurant Information**

Name of Restaurar Boston Pizza Mark		•
Street Number 50	Street Name East Valhalla Drive	Sulte/Unit Number
City Markham	Postal Code L3R 0A3	Province ON

Page 1 of 2

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.

2.0km	What is the distance between the restaurant and the closest residential area? (in kilometres) 2.0km  Does the restaurant have a working Fire Alarm System?		
	<u>Yes</u>	Ño	
ine Dining	Take Out	Cafe	
in the restau	ant? (select all t	hat apply)	
Off-Tra	ck Betting	Arcade	
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struction or a	lteration been pr	-	
	Alarm System Dining I in the restaur Off-Transting operation decity: 140 (was becild; 140 (	Alarm System?  Yes  ine Dining Take Out  I in the restaurant? (select all the Off-Track Betting string operations?  Pacity: 140 (was originally the Tive secity: 140 (was originally the Tive secity	

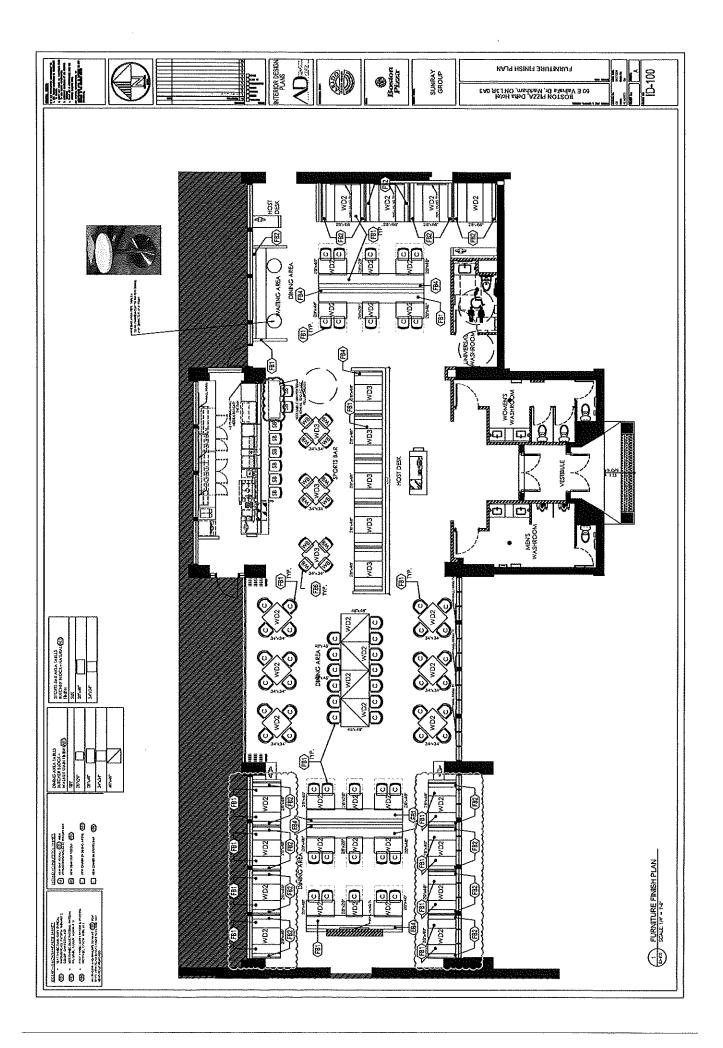
x Rattan Gupta
Applicant's Signature

11/12/2024 Date

Page 2 of 2

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## Bar Menu

## 8 Signature Cocktails:

- 1. Apple Butter Old Fashloned
- 2. Pink Sangria
- 3. Spicy Margarita
- 4. Melon Basil Mimosa
- 5. Dragon Fruit Refresher
- 6. Negroni
- 7. French Press
- 8. Espresso Martini

#### **Beer Bottles:**

White Claw

Coors Light

Miller Lite

**Bud Light** 

Michelob Ultra

Samuel Adams

Heineken

Corona

Stella

Voodoo Ranger IPA

Heineken 0.0

#### Wines:

Mionetto Prosecco DOC Brut

Charles and Charles Rose

Tommasi "Le Rosse"Pinot Grigio

Frenzy Sauvignon Blanc

Simi Chardonnay

Kenwood Vineyards Pinot Noir

Clos Du Bois Merlot

19 Crimes Red Blend

Merf Cabernet Sauvignon

#### Liquor:

## Vodka

- Smirnoff
- Absolut Citron
- Grey Goose
- Ketle One
- Tito's Handmade

#### Gin:

- Beefeater
- Bombay
- Hendrick's
- Tanqueray

#### Rum:

- Bacardi Superior
- Malibu
- Captain Morgan

## Tequila:

- Jose Cuervo
- Patron Silver
- Don Julio Reposado
- Casamigos Anejo

## Whiskey:

- Jim Beam
- Knob Creek
- Maker's Mark
- Woodford Reserve
- Jack Daniel's
- Bulleit
- Dewars White Label
- Johnnie Walker Black Label 12
- Macallan 12
- Jameson
- Crown Royal

## Cognac:

Courvoisier vs

## Liqueurs/Cordials:

- Bailey's Irish Cream
- Campari
- Cointreau
- Disaronno Amaretto
- Grand Marnier
- Jagermeister
- Kahlua
- Fireball
- Aperol
- Martini & Rossi Rosso
- Martini & Rossi Extra Dry