



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 SHEPPARD E
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

INITIUM CO

905 947 8880 wlv

Contact name / Nom de la personne à contacter

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

ROSE BUT

416 818 1318

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.

8241

WOODBINE

AVE

6 & 7

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

City/ Town/Municipality /
Ville/village/municipalité

Postal Code /
Code postal

MARKHAM

L6G 0A9

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



CITY OF MARKHAM

LIQUOR LICENCE QUESTIONNAIRE

To enable our evaluation of your Liquor Licence application, the following information is required.

Please return the completed form to the Clerk's Department.

1. What Type of restaurant is proposed? ☐ Family ☐ Roadhouse ☐ Sports Bar ☐ Fine Dining ☐ Take Out ☐ Cafe <u>Salon</u>		
2. a. What type of Food will be served: Varied menu ☐ Specialty ☒ Snacks b. ☐ Menu attached (Please note, a copy of the menu is required with all applications)		
3. What entertainment or amusements will be provided? ☐ Karaoke ☐ Live entertainment ☐ Casino ☐ Off-track betting ☐ Arcade ☒ N/A		
4. a. The maximum seating capacity will be <u>60</u> persons. b. Where the restaurant is existing, the previous seating capacity was _____ persons.		
5. a. Was this premises previously used as a restaurant? ☐ Yes ☒ No (Note: if the answer to this question is no, a building permit will be required) b. If this premise was previously used as a restaurant, is any construction or alteration purposed? ☐ Yes ☐ No (If the answer to this question is yes, a building permit will be required)		
6. Has a building permit been applied for or obtained in connection with these premises? ☒ Yes Permit no. <u># R 14 112068 000 00 AL</u> ☐ No Provide 1 copy of the floor plan showing the dimensioned floor plan showing the dimensioned floor layout, floor areas to be licenced, seating arrangements, washrooms (show fixtures) and exits.		
7. Does the building on the premises have a fire alarm system? Yes ☒ No ☐		
8. Were the premises previously licensed? Yes ☐ No ☒		
9. Is the liquor licence application for an expansion of the existing operations? Yes ☐ No ☒ (If yes, Please provide details on a separate page)		
10. What is the nearest major intersection to the proposed locations? <u>Woodbine and Hwy 7.</u>		
11. What is the distance to the nearest residential area? <u>250m +</u>		
12. a) Your name (Please Print) <u>Ryan Tonig</u>	b) Contact Telephone No. Bus: <u>905 947 8880</u> Res: <u>416 313 1468</u>	c) The restaurant's name <u>Initium Co</u>

AS A CONTIGUOUS SPACE TO UNDER
COMPARTMENT FROM TOP OF ROOF DECK, WHEN LOCATED AT ANY
SIDE OF ROOF DECK, WHEN LOCATED AT ANY
INTERMEDIATE LEVEL, THE "COVERING ASSEMBLY" MUST
HAVE THE SAME FIRE RESISTANCE RATING

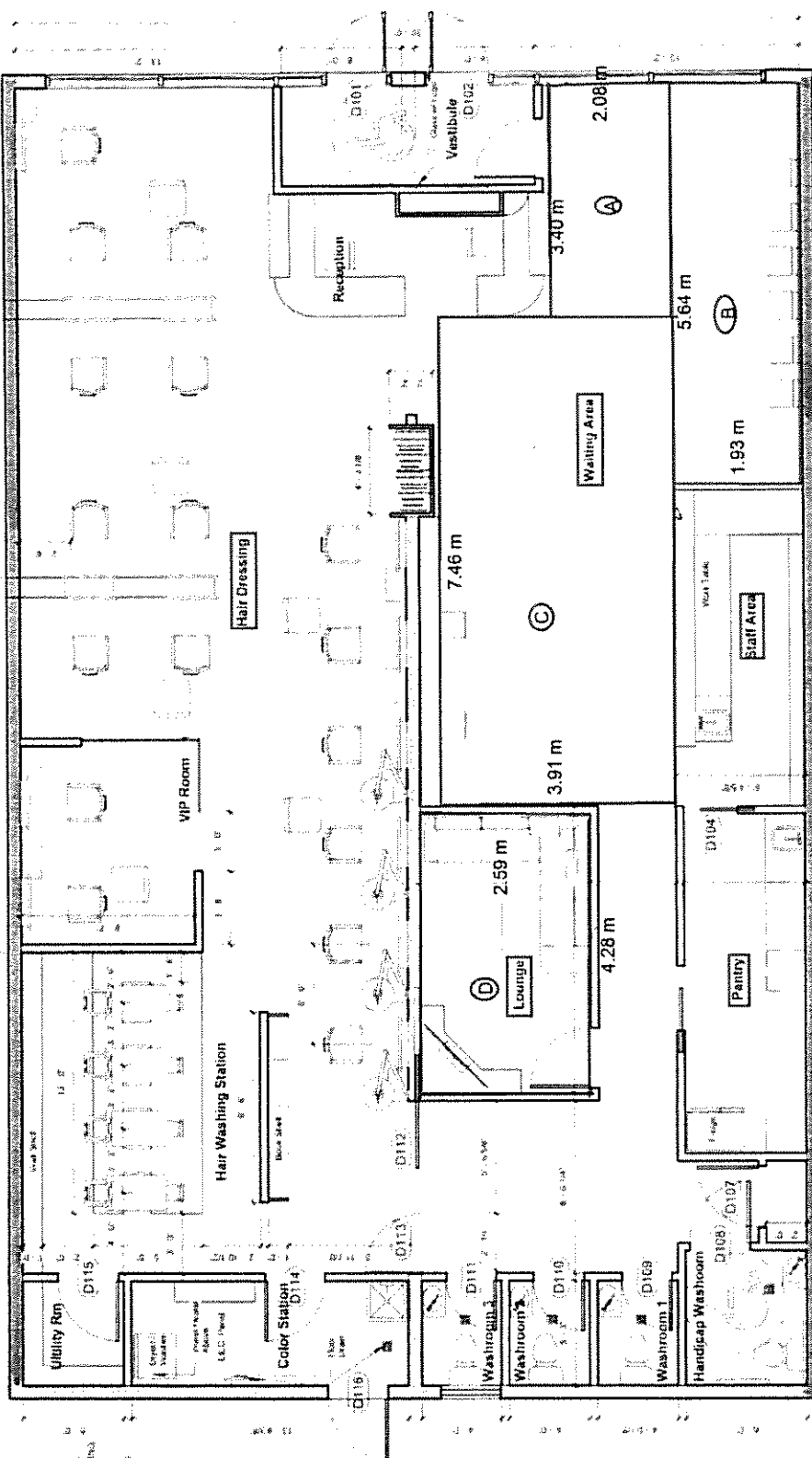
PARTITION LEGEND

- 1/2" Gypsum Board
- 5/8" Gypsum Board
- 1" Gypsum Board
- 2" Gypsum Board
- 3" Gypsum Board
- 4" Gypsum Board
- 5" Gypsum Board
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- 96" Gypsum Board
- 98" Gypsum Board
- 100" Gypsum Board

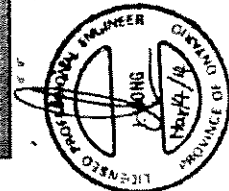
FB

F

FOR TABLE FIRE EXTINGUISHERS



Main Floor
1/32" = 1'-0"
OCCUPANCY LOAD=28



UNITEDWELL
DESIGN GROUP INC.
2000 SHEPPARD AVENUE EAST
SUITE 100
SCARBOROUGH, ONTARIO M1S 1T6
TEL: (416) 291-1111
WWW.UNITEDWELLDESIGN.COM

Salon & Lounge
8241 Woodbine Ave. Unit G67 Markham

No. Description Date

Main Floor Layout
Project No. 080-RK
Date 2014-01-17
Drawn by RK
Checked by
Scale 1/32" = 1'-0"
A01

Initium Co (Hair Salon)

8241 Woodbine Ave. Unit 6 & 7, Markham, Ontario.

FOOD/SNACK MENU

Fruit Platter	\$6.99
Garlic Bread	\$2.99
Wasabi Cucumber	\$3.99
Marinated Duck Kidney	\$3.99
BBQ HK-Style Sausage	\$3.99
Beef Ball	\$3.99
Pork Ball	\$3.99
Curry Fish Ball	\$3.99
Black Pepper Beef Ball	\$3.99
Marinated Chicken Egg	\$3.99
Ham Instant Noodle	\$3.99
Edamame	\$3.99
Cheese Cake	\$5.99
Marinated Chicken Wing	\$5.99
Crispy Chicken Wing	\$5.99
California Roll	\$8.99
Cheese Cake	\$5.99
Ice Cream	\$4.99