

Municipal Renseignements Information municipaux

Return completed
form to:
Alcohol and Gaming
Commission of Ontario
90 Sheppard Avenue, East,
Suite 200
Toronto ON M2N 0A4

Remplir et retourner cette
formule à :
Commission des alcools
et des jeux de l'Ontario
90, avenue Sheppard Est
Bureau 200
Toronto ON M2N 0A4



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

NINO DIVERSA BAKERY PANE & DOLCE INC

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

905-881-7393

Contact name/Nom de la personne à contacter

NANCY NARDUCCI

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

905-881-7393

Exact location of establishment (not mailing address - street number and name, city or lot no., concession and township)

Emplacement exact de l'établissement (non l'adresse postale - numéro et nom de la rue, ville ou numéro de lot, concession et canton)

7287 YONGE ST THORNHILL ONT

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:

Specify concerns regarding zoning, non-compliance with bylaws, or general objections to the application by council or elected municipal representatives, must be clearly outlined, in a separate submission or letter within 30 days of this notification.

Remarque :

Toute question particulière concernant le zonage, la non-conformité aux règlements municipaux ou toute objection générale relative à la demande de la part de membres du conseil ou de représentants municipaux élus doit être décrite clairement dans un document distinct ou une lettre à l'intérieur d'une période de 30 jours après la remise 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



Town of Markham

Pickup

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 ☒ Café BAKERY
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 ☐ NONE
4. a) The maximum seating capacity will be 48 persons.b) Where the restaurant is existing, the previous seating capacity was 140 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 premises was previously used as a restaurant, is any construction or alteration proposed?

☒ 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. 06135969000 00 MP☐ No Provide 2 copies of the 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 licenced?

☒ Yes ☐ No9. 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 location?

YONGE & GLEN CAMERON

11. What is the distance to the nearest residential area?

UNDER 1/2 KILOMETER

12. a) Your name (Please print)

NANCY NARUCCI

b) Contact Telephone No.

Bus: 905-881-7393Res: 905-889-1413

c) The restaurant's name

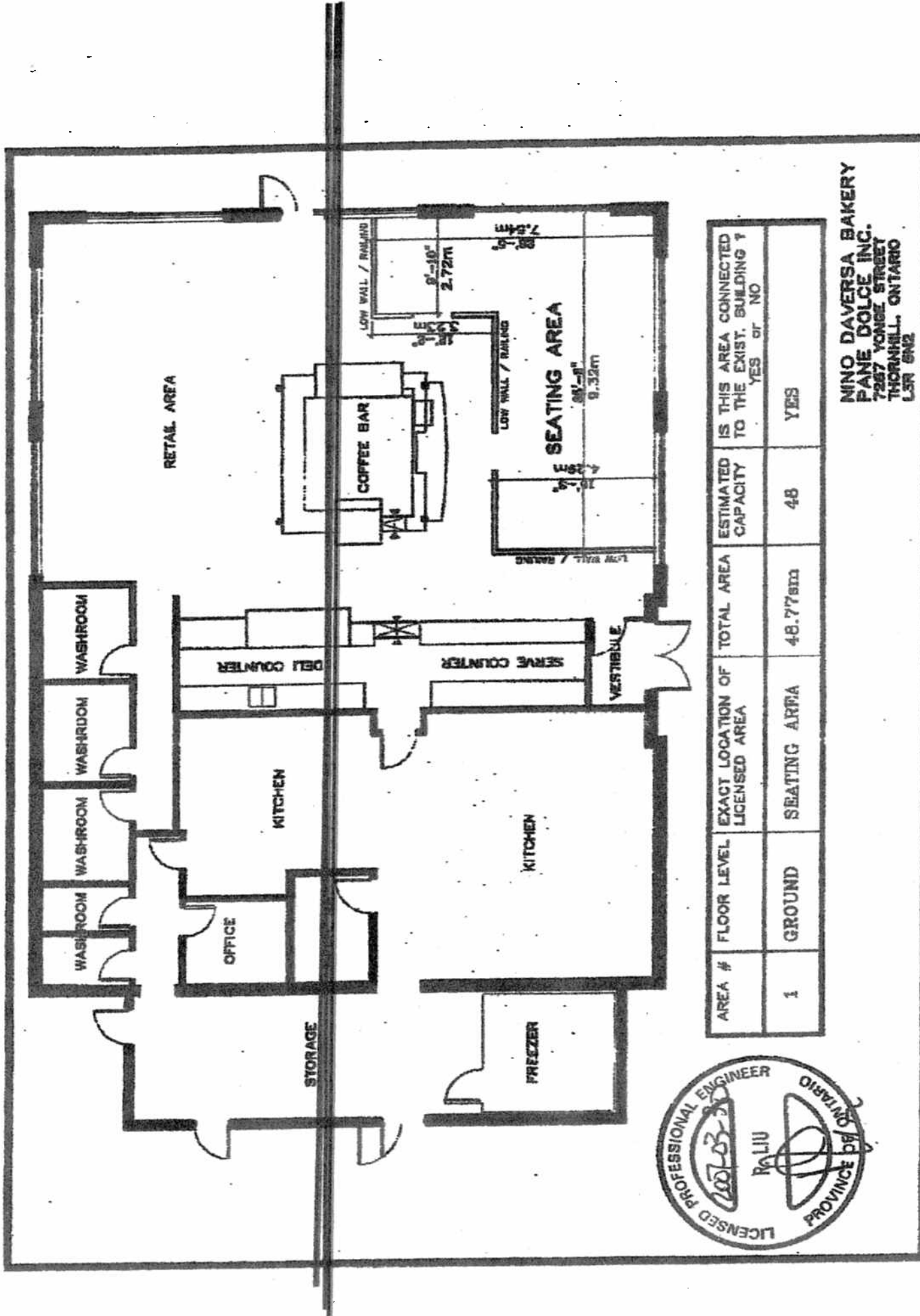
NINO NAVERSA
BAKERY

FOR OFFICIAL USE ONLY

Inspected by By-law Enforcement Date: _____

☐ Approved ☐ Not approved

Comments:



AREA #	FLOOR LEVEL	EXACT LOCATION OF LICENSED AREA	TOTAL AREA	ESTIMATED CAPACITY	IS THIS AREA CONNECTED TO THE EXIST. BUILDING ? YES or NO
1	GROUND	SEATING AREA	48.77sqm	48	YES

NINO DAVERSA BAKERY
 PANE DOLCE INC.
 7257 YONGE STREET
 THORNHILL, ONTARIO
 L3R 6N2

NINO D'AVERSA BAKERY

PANE & DOLCE INC.

72 Steeles Avenue West
Thornhill, Ontario
L4J 1A1
Tel: 905.881.7393

April 3, 2007

Town of Markham
Clerks Department

Re: Menu

Veal/Chicken/Sausage/Meatball Sandwich
Cold Cut Sandwich
Pizza
Salad
Pasta
Pastries
Coffee/Tea