## **Alcohol and Gaming Commission of Ontario**

Licensing and Registration 90 SHEPPARD AVE E SUITE 200 TORONTO ON M2N 0A4

Fax: 416-326-8711

Tel: 416-326-8700 or 1-800-522-2876 toll free in Ontario

## **Municipal Information**

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.

Premises Name	Premises Teleph	Premises Telephone Number			
Contact Name	Contact's Teleph	Felephone Number E		Email Address	
Address	City / Town	Province / State		Postal Code	
Does the application for a Liquor Sale Indoor areas Outdoor areas Section 2 - Municipal Clerk's Of Municipality Municipal Clerk: Please confirm the "Wet/Damp/Dre Name of village, town, township or cannexed or amalgamated, provide the	fficial Notice of Applicat  y" status below.  city where taxes are paid: (If t	the area where	the establi	shment is located was	
Is the area where the establishment  Wet (for spirits, beer, wine)		□Dry			
Note: Specific concerns regarding zoning submission or letter within 30 day		-laws must be	clearly ou <sup>,</sup>	tlined <b>in a separate</b>	
Signature of Municipal Official		Title			
Address of Municipal Office		Date	YYYY	MM DD	