

CITY OF HAMILTON

MOTION

Council Date: March 30, 2016

MOVED BY COUNCILLOR J. PARTRIDGE.....

SECONDED BY COUNCILLOR.....

WATERDOWN ARTS AND MUSIC STREETFEST – SPECIAL OCCASION PERMIT LIQUOR LICENCE

WHEREAS, Hamilton City Council has received Notice (attached hereto as Appendix “A”) from Mr. Shawn May on behalf of the Waterdown Arts and Music Streetfest, that they wish to obtain approval for a Special Occasion Permit Liquor Licence to sell alcohol on May 20, 2016 between the hours of 4:00 p.m. and 11:00 p.m.; May 21, 2016 between the hours of Noon and 11:00 p.m. and May 22, 2016 between the hours of Noon and 11:00 p.m. at Memorial Park located at 200 Hamilton Street North, Hamilton, Ontario, during the Waterdown Arts and Music Streetfest taking place in Hamilton, Ontario;

WHEREAS, the Alcohol and Gaming Commission of Ontario requires that if a permit holder is not a registered charity or non-profit organization, that a resolution of the Council is required to designate the event as one of municipal significance; and

WHEREAS, the City of Hamilton does not have an objection to the Liquor Licence Serving Time Extension for the following establishment;

THEREFORE BE IT RESOLVED:

- (a) That the City of Hamilton hereby deems the Waterdown Arts and Music Streetfest, being held in the City of Hamilton, Ontario on May 20, 21 and 22, 2016, as municipally significant; and,
- (b) That the following applicant be provided a copy of this resolution for inclusion with their application to the Alcohol and Gaming Commission of Ontario:
 - (i) Waterdown Arts and Music Streetfest c/o Mr. Shawn May, Hamilton, Ontario.



Hamilton

LIQUOR LICENCE NOTIFICATION FORM
CITY OF HAMILTON
 Temporary Extension Permit Special Occasion Permit
NAME OF EVENT: WATERDOWN ARTS AND MUSIC STREETFESTMunicipal Address of Event: 200 HAMILTON ST. NORTHWATERDOWN, ON LOR 2HO**CONTACT INFORMATION**

(Please Print Legibly – Approval of incomplete or illegible applications may be delayed)

Organization: WATERDOWN ARTS AND MUSIC STREETFESTContact Person: SHAWN MAY Phone (day): _____

Address: _____ Phone (evening): _____

City: WATERDOWN Cell Phone: _____

Postal Code: _____ Fax: _____

E-mail: _____

EVENT DETAILS**Type of Event:**Parade Sport/Tournament Event/Festival Other Please Specify: _____**Location:** City Park (Name): MEMORIAL PARK Building/Facility Name/Area: _____ Road(s): _____**ESTIMATED ATTENDANCE (please estimate all that apply)**Number of Participants: 20000 Number of General Public per day: 7000

*PEOPLE INVOLVED IN THE EVENT EG: RACERS, RUNNERS, VENDERS

Number of Volunteers/Staff: 175 Number of General Public for the entire event: 20000

July 09 2014

EVENT ELEMENTS (complete to ensure proper permits are processed)

Event on City Property:	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Admission Fee:	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Sound Amplification:	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Pay Duty Police Hired:	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Food:	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	if yes number of Pay Duty of Police Hired:	<u>2</u>
Fireworks:	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Private Security Hired:	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Tents/Temporary Structures:	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	if yes number of Private Security Hired:	<u>8</u>
if yes Tent/structure Dimensions:	<u>10x20</u>	Wheelchair Accessible:	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>

Occupant loads of each tent/structure _____

Event Details (provide detail to ensure proper evaluation of the application):

Event Date DD/MM/YY	Event Time Start _____ Finish _____	Alcohol Service Time Start _____ Finish _____
20/05/16	Start <u>4 PM</u> Finish <u>11 PM</u>	Start <u>4 PM</u> Finish <u>11 PM</u>
21/05/16	Start <u>9 AM</u> Finish <u>11 PM</u>	Start <u>12 PM (NOON)</u> Finish <u>11 PM</u>
22/05/16	Start <u>9 AM</u> Finish <u>11 PM</u>	Start <u>12 PM (NOON)</u> Finish <u>11 PM</u>
Event Date DD/MM/YY	Event Time Start _____ Finish _____	Alcohol Service Time Start _____ Finish _____
Event Date DD/MM/YY	Event Time Start _____ Finish _____	Alcohol Service Time Start _____ Finish _____

Written description as well as a detailed map, route and/or site plan **MUST** be included with this application.

Note to AGCO/LCBO:

This application is used by the City of Hamilton as notification to Fire, Building, Health, Clerks Office and the Police Service of the City of Hamilton for Temporary Extension and Special Occasion Permit Liquor Licence requests.

For Office Use

Date Received: MARCH 1, 2016 Received By: MISHA GIBBONS

Signature _____ Print Name: SHAWN P. MAY Date: FEB 19 / 2016

