

City of Guelph Alcohol Risk Management Policy (ARMP) Planning and Compliance Questionnaire



Please contact 519-837-5678 or TTY: 519-826-9771 to:

1. Get assistance completing the application;
2. Ask any questions about the Alcohol Risk Management Policy;
3. Request this document in an alternate format as per the Accessibility for Ontarians with Disabilities Act;



Please provide the following details and information about the event for which you have requested to sell or serve alcohol. Go to <http://guelph.ca/living/recreation/special-events> to refer to the Special Events User Manual for details.

1. Event Details (please print)

Event Name

Event Date(s)

(day/month/year)

Event Start Time

(specify AM/PM)

Event End Time

(specify AM/PM)

Event Location

Purpose of Event

Expected Attendance

Age Range

If minors will be attending, please describe how they will be identified (ie. wrist band policy):

Is the event open to the public or private (ie. by invitation only)?

Public

Private

2. Event Organizer and Contact Information

Event Organizer

What type is the event organizer?:

individual

corporation/business

2. Event Organizer and Contact Information (continued)

If the event organizer is an organization or association, please indicate which type it is:

Registered charity under the
Income Tax Act

**Registration
Number**

Incorporated non-profit organization or
association organized to promote charitable,
educational, religious or community objects

**Incorporation
Number**

Event Organizer Main Contact

Name

Will the main contact person be on-site for the duration of the event? Yes No

Address

Email

**Mobile
Phone**

Event Organizer Designate

Name

Will the designate person be on-site for the duration of the event? Yes No

Address

Email

**Mobile
Phone**

3. Event(s) Hosted By An Individual or Business

An event hosted by an individual or business **must** use a caterer. The caterer must have a Catering Endorsement issued by the Alcohol and Gaming Commission of Ontario.

**Catering Endorsement
Licensee Name**

Address

Email

**Business
Phone**

**Main
Contact**

Email

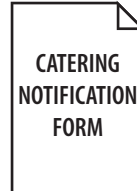
**Mobile
Phone**

3. Event(s) Hosted By An Individual or Business (continued)

The event organizer must **provide a copy of the following documents** prior to final municipal approval being granted.



**Licensee
Liquor
License**



**Copy of the Catering
Notification Form**

**4. Event(s) Hosted By Registered Charity
or Incorporated Non-profit Organization**

Are you obtaining a 'Sale' Special Occasion Permit (SOP), 'No Sale' SOP or operating under the authority of a Catering Endorsement from the Alcohol Gaming Commission of Ontario?

Sale SOP No Sale SOP
Catering Endorsement

The event organizer must provide a copy of the SOP.
If you selected a Catering Endorsement is used, a copy of the documents listed in Section 3 (above) must be provided.



**Special
Occasion
Permit**

Advertising

If you indicated that the event(s) is public in Section 1, **please provide details on how and where the event will be advertised.**

Will the event be advertised? Yes No



Print Ads (newspapers, posters, magazines, etc.)



Radio and Television



Electronic (website, email, Facebook, Twitter, etc.)



Other

5. Alcohol and Food Service Details

Alcohol Service Start Time: specify AM/PM **End Time:** specify AM/PM

Please list types and sizes of alcohol servings and sale price (if applicable):

Spirits/Beer/Wine	Serving Size (ml or oz)	Container (bottle, plastic cup, can, etc.)	Sale Price (if applicable)

Please list non-alcohol beverages that will be available and sale price (if applicable):

Non-alcohol Beverages	Sale Price (if applicable)

Please list foods that will be available and sale price (if applicable):

Food	Sale Price (if applicable)

6. Licensed Area and Event Site Details

Please provide a site layout showing the entire event site and indicate licensed area(s).

Describe how the licensed area is delineated from the non-licensed area (ie. fencing, signage, walls, etc.). Include dimensions and sizes as per Alcohol and Gaming Commission of Ontario requirements.

What is the capacity (number of people) of the licensed area?

Describe how the capacity of the licensed area (room, beer garden etc) will be controlled and maintained.

Signage

Provide details on the locations where the following required signage will be posted:

Special Occasion Permit/License (if under a Catering Endorsement)

Fetal Alcohol Spectrum Disorder signage

Non-alcohol/low alcohol options

Signage identifying boundaries of licensed area(s)



7. Event Security, Safety and Control

Identify the event staff and security that will be on-site during the licensed hours:

Event Staff and Security Roles	Number of people	Source (ie. security company, GPS)
Licensed security		
Smart Serve Bartenders		
Smart Serve Servers		
Smart Serve Ticket Sellers		
Pay Duty Officers		
Other event workers (please describe role)		

Total number of staff/security on site during licensed hours

Describe how event staff and security will be easily identified (distinguishing apparel, etc.).

Describe how and by whom the licensed area exits and entrances will be monitored and controlled.

Describe how event staff and security will communicate with each other.

Provide enforcement and escalation procedures; identifying specific roles and responsibilities.

7. Event Security, Safety and Control (continued)

Safe Transportation Options

Will the Event Organizer be directly providing any safe transportation options (taxi paid by organizer, designated driver, etc.)?

Yes No

If you are providing safe transportation options, describe them.

If you are not providing safe transportation options, describe how you will promote and advertise safe transportation options.

8. Signature

I warrant that the information provided is accurate and complete.

- I understand that submission of this application does not constitute approval to hold a licensed event on City owned or operated property.
- I further understand that I may be required to provide further details and/or supporting documentation to facilitate the approval.
- I understand that it is my responsibility to notify the City of Guelph and the Alcohol and Gaming Commission of Ontario (if relevant), should any information change following the submission of this questionnaire.
- If I am submitting this application on behalf of an organization or corporation, I warrant that I have the authority to do so.

Event Organizer/ Applicant Name
(please print)

Signature

Date

day/month/year