

Alcohol and Gaming Commission of Ontario

Telephone: 416 326-8700 1 800 522-2876 toll free in Ontario Fax: 416 326-5555

Agency Letter of Approval

Note: A separate letter is required from Building, Fire and Health authority.

THIS FORM IS NOT REQUIRED FOR CHANGES IN OWNERSHIP ONLY.

Attention: Approving Agency

This form is supplied for the convenience of approving authorities. Any individual agency may choose to utilise their own specific correspondence.

Name of approv					
City of Stratfo	Street Name		Street Type	Direction	Suite/Floor/Apt,
82 Erie St Lot/Concession/Rural Route		City/Town/Municipality	1	Postal Code	
		Stratford ON		N 5 A	2 M 4
Re:					
Name of Establ	lishment		Municipality	у	
Street Number Street Name			Street Type	Direction	Suite/Floor/Apt
Lot/Concession	1/Rural Route	City/Town		Postal Code	
Agency h A total c	ment has, or will be made, at this time has no objections to the use of this facecupant load has been established a fithe total occupant load should be segmand no objections to the use of this face	cility as a licensed premises under the Lic	guor Licence / Outdoorelow or provid guor Licence /	Act. e appropriate atta	achment.
Name of appro	oving official (please print)	Title of approving official		Date	ee attachment
тчатне от аррго	ming official (please philit)	The or approving official		Date	
Signature of ap	pproving official	Telephone number	F (ax number	-