



STATE OF MARYLAND
SPECIAL ENTERTAINMENT PERMIT REQUEST FORM
BOARD OF LICENSE COMMISSIONERS

9200 Basil Court, Suite 410
 Largo, Maryland 20774
 301-583-9980
<http://bolc.mypgc.us>



Trade Name: _____

Corporate Name _____

Address: _____

City, Zip: _____

Class of License: _____

In order to file for a Special Entertainment Permit this application must be submitted to the Board Office with the following attached:

1. Certified check, cashier's check, or money order payable to Prince George's County for the Advertising Fee of \$250.00.
2. Evidence that the security plan has been submitted to the Prince George's County Chief of Police at:

**Office of the Chief
 Prince George's County Police Department
 7600 Barlowe Road
 Landover, Maryland 20785
tecicale@co.pg.md.us**

The Prince George's County Police Department has created a sample security plan format for you to use as a template for submission. Questions regarding the creation and submission of the security plan should be directed to the Prince George's County Police Department.

3. If the business is located within a municipality, evidence that the security plan has been submitted to the Police Department for the municipality in which the business is located.

Upon approval of the Special Entertainment Permit the following items will be required to be filed with our office in order to effectuate the permit:

- A. Certified check, cashier's check, or money order payable to Prince George's County for the Special Entertainment Permit Fee of \$1,500.00.
- B. Copy of the Use and Occupancy Permit.
- C. Copy of the Dance Permit, if applicable.

Note: If the licensee wants to amend the entertainment described in this form, the changes must first be submitted to the Board for approval prior to implementation of such changes with evidence of approval by the Prince George's County Police Department.

Special Entertainment Permit Request Form

Page | 2

The Special Entertainment permit request must be filed annually.

The Renewal Period for the Special Entertainment Permit is **August 15th – September 15th**.

Trade Name: _____

Address: _____

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Start Time:							
End Time:							
Describe the entertainment.							
Is there a cover charge?							
If yes, what is the amount and times of the cover charge?							
Are there drink or food minimums?							
Is there patron dancing?							
Are patrons carded at the entrance?							
Are patrons searched or patted down at the door?							
Does the establishment offer VIP seating?							

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Trade Name: _____

Address: _____

List the type of entertainers, e.g. band, DJ, comic, exotic dancer, vocalist, instrumentalist, etc. Describe in detail the type and genre of entertainment provided, include detailed information when known such as the name of entertainer(s), number of entertainers, place where the entertainer(s) is (are) from, etc. Also, indicate the frequency of the described entertainment, e.g. weekly, bi-weekly, monthly, quarterly, semi-annually, annually, etc. If the entertainment is provided by the licensee's regular employees, please indicate; otherwise state that entertainment will be provided through a contract between the licensee and entertainer.

Monday	
Tuesday	
Wednesday	
Thursday	
Friday	
Saturday	
Sunday	

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Trade Name: _____

Address: _____

**SPECIAL EXEMPTION FOR AN ESTABLISHMENT WITH
A SPECIAL ENTERTAINMENT PERMIT FOR:**

Special Exemption for Family Oriented Events with Entertainment. This is to be completed by establishments that plan to offer family oriented events. Upon approval of this request, licensees are required to submit the schedule of event not less than ten (10) prior to the event.

Does your establishment plan to host any of these types of family oriented events? Please check the appropriate events.

- | | |
|---|---|
| <input type="checkbox"/> Anniversary Party | <input type="checkbox"/> Family Themed Theatrical Performance |
| <input type="checkbox"/> Baby Shower | <input type="checkbox"/> Graduation Party |
| <input type="checkbox"/> Baptism Reception | <input type="checkbox"/> Political Event |
| <input type="checkbox"/> Bar Mitzvah | <input type="checkbox"/> Retirement Party |
| <input type="checkbox"/> Bat Mitzvah | <input type="checkbox"/> Rights of Passage Event |
| <input type="checkbox"/> Beautillion | <input type="checkbox"/> Scholarship Award Ceremony |
| <input type="checkbox"/> Birthday Party | <input type="checkbox"/> School Event |
| <input type="checkbox"/> Book Signing | <input type="checkbox"/> Tea Party |
| <input type="checkbox"/> Church Events | <input type="checkbox"/> Wedding |
| <input type="checkbox"/> Confirmation Reception | <input type="checkbox"/> Wedding Reception |
| <input type="checkbox"/> Corporate Reception | <input type="checkbox"/> Wedding Shower |
| <input type="checkbox"/> Cotillion | <input type="checkbox"/> Other (Specify): _____ |
| <input type="checkbox"/> Engagement Party | _____ |
| <input type="checkbox"/> Faith Based Events | _____ |
| <input type="checkbox"/> Family Reunion | |

Approximate Number of Events Annually: _____

This form shall be filed annually with the request for a Special Entertainment Permit; the Board will review the information and notify the licensee if approval is granted for the above listed family orientated events. Upon approval the licensee is responsible to notify the Board on a monthly basis of the event type and date of each event scheduled. Failure to notify the Board could result in a violation due to lack of prior authorization for the event pursuant to R.R. 75. Events with entertainment that the Board authorized under the family oriented entertainment exemption will not have to comply with the requirement of a Special Entertainment Permit.

Special Entertainment Permit Request Form

Page | 5

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Trade Name: _____

Address: _____

I hereby certify that I am a licensee for the above named licensed establishment, I have read and understand the rule regarding the Special Entertainment Permit, and I will abide by all the rules and regulations regarding the sale and distribution of alcoholic beverages.

Signature of Licensee: _____ Date: _____

STATE OF MARYLAND, COUNTY OF _____, to wit:

I hereby certify that on this _____ day of _____, _____ before me, the subscriber, a notary public of the State of Maryland, in and for _____ personally appeared _____ and made oath in due form of law that the matters and facts set forth in this document are true and correct.

WITNESS my hand and official seal.

My Commission expires:

Notary Public