GENERAL INFORMATION

APPLICATIONS MUST BE FULLY COMPLETED, ACCOMPANIED BY THE APPROPRIATE AFFIDAVITS AND FEES AT THE TIME OF FILING. APPLICATIONS ARE SCHEDULED ACCORDING TO THE BOARD'S SCHEDULE. HEARING/FILING DATES CAN BE OBTAINED BY VISITING OUR WEBSITE http://bolc.mypgc.us OR BY CONTACTING THE OFFICE.

CURRENT FILING FEE:

All fees are paid by Certified Check, Cashier's Check or Money Order – No cash or personal checks are accepted.

New Application \$700.00 Transfer Application \$500.00

PROOF OF LEGAL STATUS

Pursuant to Section 26-1407 of the Alcoholic Beverage Article of the Annotated Code of Maryland applicants for an alcoholic beverage license shall provide proof of the applicant's legal status at the time of filing the application. In order to adhere to this requirement, the Board will accept:

- 1. United States Passport or United States Passport Card or
- 2. Naturalization Certificate or
- 3. Permanent Resident Card (Green Card)

Or One Document from Column A and One from Column B

Column A

- Driver's License
- ID Card issued by federal, state or local government
- US Military Card
- Military dependent's ID Card

Column B

- Social Security Card
- Certificate of Birth Abroad
- Certificate of Birth issued by the Department of State
- Original or certified copy of birth certificate
- US Citizen ID Card
- Identification Card for Use of Resident

RESIDENCY REQUIREMENTS:

Should the applicant for an alcoholic beverage license not reside in the State of Maryland, the applicant must designate an agent, who resides within the state of Maryland, to accept service of process and all other communication from the Board. Each applicant must provide the agent's personal information; to include name, address, telephone number and e-mail address, to enable the agent to accept service and official matters of the Board for the applicant.

In the case of a *Corporation* where there are less than three officers or directors of the corporation, all officers or directors shall make the application for the license holding a total of three offices among them. In the event there are no officers/members or directors of the corporation, at least one stockholder may make the application, if there is an affirmative vote of the stockholders holding a majority of the stock.

PERSONAL INFORMATION SHEET:

All applications and stockholders are required to submit a Personal Information Sheet. The sheets may be submitted to the Board of License Commissioners' individually, but the sheets must be fully completed and submitted prior to the application being scheduled for a hearing.

CRIMINAL BACKGROUND INVESTIGATION CHECKS:

The Board of License Commissioner's Office must receive the results of the completed Criminal Background Investigation checks prior to the scheduled hearing date. The forms may be obtained from the Board of License Commissioners website and are to be filed directly with the Central Repository with the appropriate fee.

INTERIOR DESIGN LAYOUT:

Applications must be accompanied, at the time of filing, by an Interior Design Layout of the establishment. The interior design layout is to be a file size copy, 8.5 x 11. Specific details must be provided as to the square footage for on and off sale areas.

PROHIBITIONS:

No license shall be granted to sell alcoholic beverages within 1,000 feet of a school building or 500 feet of a church.

The Board of License Commissioners has a limited number of licenses to issue; therefore, an application for an alcoholic beverage license may not be considered prima facie evidence that the applicant(s) is/are entitled to a license. (Section 26-1601) The Commissioners may not grant any additional licenses of any class that were not determined and posted as available for hearing.

BOARD OF LICENSE COMMISSIONERS
(Liquor Control Board)
9200 Basil Court
Suite 420
Largo, Maryland 20774
301-583-9980
http://bolc.mypgc.us

GENERAL LIST OF REQUIREMENTS FOR ISSUANCE (The individualized list of applicable requirements will be provided after the application has been approved)

- Use and Occupancy Permit
- Bulk Sales Permit or letter that no bulk is being transferred
- Workman's Compensation Certificate
- Executed Copy of Lease or Deed
- Articles of Incorporation or Articles of Organization
- · Certificate of Good Standing
- Minutes of the Corporation or Operating Agreement
- Copies of Stock Certificate or Operating Agreement setting forth the members and membership interest
- Title 6 Commercial Code Affidavit 6-102 (must be dated within ten days of the issuance of the transfer)
- Alcohol Awareness Certificate
- Sales and Use Tax License
- Final Inspection for New or Transfer of Location provide five-day notice in writing prior to issuance for Inspection Staff to perform the inspection
- Hotels, Catering Establishments and BLX Licenses, applicants are required to provide CPA Affidavits, Invoices and Cancelled Checks for their respective Capital Investment as required by Sections 26-904, 26-1616 of the Alcoholic Beverage Article of the Annotated Code of Maryland.

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STATE OF MARYLAND RETAIL ALCOHOLIC BEVERAGE LICENSE APPLICATION

BOARD OF LICENSE COMMISSIONERS 9200 BASIL COURT, SUITE 420 LARGO, MARYLAND 20774 301-583-9980



http://bolc.mypgc.us

		TH	IIS APPLI	CATION I	IS FOR:				
New License		Fee:	\$700.00						
Transfer of License		Fee:	\$500.00						
Transfer of Location		Fee:	\$500.00						
PAYMENT: Payment mus George's Cou		y application in t			ck, Certified	d Check or	Money Ord	er payable to	Prince
TYPE AND CLASS OF LICENSE									
CLASS OF LICENSE		A	В			C		D	
TYPE OF LICENSE	BEE	ER	BEER AN	D WINE		BEER, V	WINE & L	IQUOR	
	ВН		BLX			OTHER	:		
Application is hereby									
Annotated Code of Maryla				**				ng as required	
	I	NFORMATIO	ON REGA	RDING TH	HE APPL	ICANT(S)		
Name of Applicant		Title of Applicant	Home Address of Licensee			e	Telephone State Veri		
		Аррисан	pncant				Number	-	
	.	BUSI	INESS NA	ME AND A	ADDRES	<u>S</u>			
Trade Name									
Corporation/LLC									
Address, City, Zip									
Telephone Number				Departme	ent ID#				
			OFFICIA	L USE ON	NLY				
Attorney					Date Fi				
Address					Hearin	_			
Phone Number					Board .	Action			
Accepted:	Reviewed	:			Issued:				

			DESCRIPTION O	F THE PREM	ISES				
	Describe the premises to be covered under								
the license. If only part of the building is									
	e premises, a def	finitive							
description must be given: Is the building located within one thousand				IC El'.					
feet (1,000)		one thousand		If yes, Explain					
/	ng located within	five hundred		If yes, Explain					
	a Place of Wors			II yes, Explain					
	es zoned for sale			If no, Explain					
beverages?				, 1					
Is the building	g complete?			If "no" when w					
				be the building	be				
				complete?					
			MODE OF C	PERATION					
Describe the	e Mode of Oper	ation							
Is the busin	agg to be sondy	atad undan this	license tied in any mann	an to o					
			ncense tied in any main 1 or supermarket?	ier to a					
Seating Cap		store operation	Is there a bar?		Does the licensed premises				
			25 0220 0 0020		have a drive -in window?				
Will enterta	inment be pres	ented to the		If yes, you must be approved for a Special Entertainment Permit					
public?					or a Family Entertainment Permit, prior to providing or allowing				
_					on the licensed premises.				
Square foot	age on sale			Square footage					
				off sale					
			HOURS OF (OPERATION					
		Open	ing Time		Closing Time				
Monday		OP 42.			0.00 g0				
Tuesday									
Wednesda	N. T.								
	ıy								
Thursday									
Friday									
Saturday									
Sunday									
	Y THE FOL	LOWING DO			TITH APPLICATION OR THAT THE				
	Y THE FOL	LOWING DO		INCLUDED W IS EXEMPT	TITH APPLICATION OR THAT THE				
VERIF			BUSINESS	IS EXEMPT					
VERIF	ication to this po	oint is fully com		Stock Ov	wnership Affidavit fully completed, signed and				
VERIF'	ication to this po	oint is fully comp	BUSINESS I	Stock Ovnotarized	vnership Affidavit fully completed, signed and by applicants (if applicable)				
VERIF	ication to this po ized by applican sfer of Location/ ed and notarized	oint is fully comp ats 'Assignment of I by previous lice	pleted, signed and License Statement nsees (if applicable)	Stock Ovnotarized	vnership Affidavit fully completed, signed and by applicants (if applicable) Statement fully completed, signed and notarized by				
VERIF	ication to this po ized by applican sfer of Location/ ed and notarized	oint is fully comp ats 'Assignment of I by previous lice	pleted, signed and	Stock Ov notarized Landlord Property	vnership Affidavit fully completed, signed and by applicants (if applicable) Statement fully completed, signed and notarized by				
Appl notar Transsigne Perso	ication to this porized by applicant sfer of Location and notarized on all Information on	oint is fully comp tts (Assignment of I by previous lice Sheet for each f	pleted, signed and License Statement nsees (if applicable) inancially interested	Stock Ovnotarized Landlord Property Affidavit	vnership Affidavit fully completed, signed and by applicants (if applicable) Statement fully completed, signed and notarized by Owner to be completed by each applicant/stockholder				
Appl notar Transigne Perso perso Desig	ication to this po rized by applicant sfer of Location/ and notarized onal Information on gnated Agent Fo	oint is fully computs (Assignment of I by previous lice Sheet for each form for each application)	pleted, signed and License Statement nsees (if applicable) inancially interested licant/stockholder that	Stock Ovnotarized Landlord Property Affidavit	vnership Affidavit fully completed, signed and by applicants (if applicable) Statement fully completed, signed and notarized by Owner				
Appl notar Transigne Perso perso Designis not	ication to this porized by applicant of Location and notarized on al Information on gnated Agent For ta Maryland res	oint is fully compats (Assignment of I by previous lice) Sheet for each form for each applied (if applical)	pleted, signed and License Statement nsees (if applicable) inancially interested licant/stockholder that	Stock Ovnotarized Landlord Property Affidavit	vnership Affidavit fully completed, signed and by applicants (if applicable) Statement fully completed, signed and notarized by Owner to be completed by each applicant/stockholder				

PROVIDE COPY(ies) OF ANY AND ALL AGREEMENTS/CONTRACTS relative to the operation of the business to be conducted under the alcoholic beverage license (inclusive of managerial agreements, sale contract and any agreement, which place the alcoholic beverage license as security, collateral, etc.

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APPLICANT(S) OFFICIAL DECLARATION

I/We the applicant(s) and/or stockholder do hereby means And further that I/we understand that fraudulent state			
Signature		Sig	nature
		<u></u>	
Signature		Sign	nature
STATE OF MARYLAND		SS:	
I hereby certify that on thisda	ay of	and made o	
above statement and that they are true and correct. WITNESS my hand and official seal.			6 1
My Commission expires			
		Notary Publi	c
STATE OF MARYLAND		SS:	
I hereby certify that on thisda	ay of	1 1.	
above statement and that they are true and correct. WITNESS my hand and official seal.		and made o	oath of having personal knowledge of the
My Commission expires			
		Notary Publi	ic
percentage of interest in the business, that the stock/interest has be proportionate share of the total equity and assets and net worth o commitments, regarding the change of ownership of the stock or LIST ALL OTHER CORPORATE OFFICERS/MEMBERS WHO ARE NOT APPLICANTS	of the corpor future endo	ation and that there exists no collatera	al agreements, promises, restrictions, or e or change of ownership of aforesaid stock.
	2		
	۷٠	Signature of Applicant	
	3.		
	J	Signature of Applicant	
	4	Signature of Applicant	
STATE OF MARYLAND		SS:	
I hereby certify that on thisday of _ and made oath of having personal knowledge of the above staten WITNESS my hand and official seal.	nent and tha	 ,	personally appeared
My Commission expires		Notary Public	
STATE OF MARYLAND			
I hereby certify that on thisday of _		,	personally appeared
and made oath of having personal knowledge of the above staten WITNESS my hand and official seal.	nent and tha	t they are true and correct.	
My Commission expires		Notary Public	

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TRANSF	ER OF LOCATION A	AND/OR ASSIGNMENT	OF LICENSE
Transfer of location and/or transfer of assignment from:			
Has the Bulks Sales Permit been applied for from the Comptroller?			
I, We			of t/a
do h	ereby make oath in due form o	f law that (I)(We) have fully compli	ed with all provisions of law and all regulations
(me)(us) or any of (my)(our) employees in and hereby consent to the transfer of said licer			lictments or complaints are pending against ard of License Commissioners, and that (I)(We)
	Names of Transf	eree(s)	
Transferor(s)		Transferor(s)	
Transferor(s)		Transferor(s)	
STATE OF MARYLAND		SS:	
STATE OF MARYLAND I hereby certify that on this and made oath of having personal knowledge	day of	,	
WITNESS my hand and official se	al.	at they are true and correct.	
My Commission expires		Notary Public	
STATE OF MARYLAND I hereby certify that on this	day of	SS:	
and made oath of having personal knowledge WITNESS my hand and official se	al.	Notary Public	
		-	
STAT	EMENT OF THE OV	WNER OF THE REAL P	ROPERTY
STATEMENT OF OWNER OF TH Maryland	IE REAL PROPERTY: A	s required by Section 4-109 of the Alcoh	oolic Beverage Article of the Annotated Code of
I (WE), HERBY CERTIFY, That located at			. I hereby
clerks, the Board of License Commiss	sioners, it's duly authorized he premises upon which the	agents and employees and any p	its duly authorized deputies, inspectors and eace officers of Prince George's County to and all parts of the building in which said
Owner			Phone
Signature Address		print/name	
Owner			Phone
Address			
personally appeared			r a Notary Public of the State of Maryland,
and made oath in due form of law that	the information herein is tr	ue.	
My Commission Expires:			
		Notary Public	

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PRINCE GEORGE'S COUNTY BOARD OF LICENSE COMMISSIONERS



Personal Information Sheet



Pursuant to 26 – 1807 of the Alcoholic Beverage Article of the Annotated Code of Maryland, The Board is required to verify that all undisputed taxes are paid prior to receiving an Alcoholic Beverage License.

To comply with that mandate, applicants are required to complete and submit this form to enable the appropriate verifications. Each application can independently submit this form in the method they choose; however, the application will not be considered complete or scheduled for a hearing date until all forms have been received. These forms will be stored separately from the master file and will not be available for public view.

t/a:			_
Corporation:			
License Number: (If Applicable)			_
Name:			
Home Address:			
City, State, Zip Code:			_
County of Residence:			
Do you:	Own your Home	Rent your Home	Other
SSN (XXX-XX-XXXX):			

AFFIDAV	II – IO BE COMPLE.	IEDBY	ALL AI	PPLIC	CAN I S/L	ICE	NOFFO\9	TOCKH	JLDE	LKS
Name					Sex		Date of Bi	rth		
Address					ength of residence		nt	Place of Birth		
Email Address			ne#	00			Phone #	Ditti	<u> </u>	
Citizen of the United States?	Permanent Resident?		If a natura of naturali	uralized citizen, date/place ralization?						
How many shares of stoo	ck have been issued to you?	#	%	What was the consideration given for each share of stock?					? \$	
Do you have a financial conducted under the lice	interest in the business to be ense?		Do you understand that a pecannot have a financial interbusiness?				person other than the applicant erest in the license or the			
Have you ever been conv	victed of a felony?		Explain						1	
Have you been found in governing the sale, use o beverages?	violation of the laws or rules r control of alcoholic		Explain							
Have you ever been four State/Federal law?	nd guilty of violating a			Expla	in					
Have you been adjudged for the prevention of gar	guilty of violating the laws nbling?			Expla	in					
Have you ever held a lice beverages and, if so, in v location?	ense for the sale of alcoholic what State and at what			Expla	in					
If so, was the business ev laws and rules concerning	ver found in violation of the ng alcoholic beverages?			Explain						
Have you ever have had alcoholic beverages deni				Explain						
	loyed at an establishment age? If so, what position(s)?	Explain								
If so, was the business ev laws or rules concerning	ver found in violation of the alcoholic beverages?		Explain							
Are you financially interested in another business that has an alcoholic beverage license? If so, where?				Explain						
If the license is issued, will you conform to all laws and regulations relating to the business conducted under this license?				If not a Maryland resident, do you understand you must designate an agent to accept service and official matters of the Board?						
How much time will you			Have	you read the	Rules	and Regulat	tions?			
and that I will not hereafter distiller or wholesaler other any signed statement, repo	nereby certifies that no manufacture convey or grant any interest, and the than for the purchase of alcoholic beart, affidavit, or oath, required un and upon conviction thereof shall	at I have no everages. S nder any of	indebtedness Section 6-629 f the provisio	or other of the A	financial obli Alcoholic Bevo is Article, sha	gation, or erage A	directly or ind	lirectly, to any Annotated Co	manufac	turer, brewer, aryland: If
STATE OF MARYLAND, _	SS:					-		Sig	nature	
personal knowledge of the	is day of e above statement and that they a nand and official seal.	re true and	correct.					and	made o	ath of having
	Notary Public									
	DESIGNATED	AGEN	T STATI	EME	NT – IF A	PPL	ICABLE	,		
	residing ate Board on behalf of the person li									ervice and
STATE OF MADVI	AND,	ee.				De	esignated Agent			
I hereby certify that on having personal know WITNESS	on this day of wledge of the above statement an my hand and official seal. ires:	d that they							_and ma	ade oath of
						Notary	Public			

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