

STATE OF MARYLAND
 APPLICATION FOR SPECIAL ONE DAY ALCOHOLIC BEVERAGE LICENSE (CLASS C)
 NOT FOR PROFIT ORGANIZATIONS
 (Maximum 7 Consecutive Days)

LICENSE
 NO. _____
 TYPE OF ORGANIZATION AND COST OF LICENSES (PER DAY)

**BEER &
 LIGHT WINE**

**BEER
 WINE & LIQUOR**

(Please identify the type of organization you represent)**Check one**

\$20.00 - Religious Civic Fraternal Hospital Veterans Charitable Org. \$35.00
 \$30.00 - Social or Others ----- \$50.00
 WS (Wine Sampling) Permit ----- \$30.00

Make Checks Payable to Baltimore County, Maryland

(TYPE OR PRINT)

Application is hereby made to the Board of Liquor License Commissioners of Baltimore County for a special ONE DAY
Beer & Wine or **Beer, Wine & Liquor** License at \$ _____ Per Day Total Cost of \$ _____
 for use within and on the premises below designated:

 Name of Applicant (Must be officer of organization) (Age) (Telephone Number)

 Home Address of Applicant (Street) (Zone)

 Name of Organization

Tax Identification Number:
 (Federal No.) _____ (State No.) _____

 Address where license is to be used (Zip Code) (Full Description of Location)

 Date(s) License to be used (Hours License to be used) (Estimated Number of Attendees) Yes No
 (Crowd Manager Training)

 Signature of owner of premises (Signature indicates acknowledgment of Responsibility for those Rules and Regulations
 of the Board pertaining to owners of property upon which One-Day Events are held).

 Home Address of owner of premises Phone Number

Purpose for which Funds are to be used: _____

List three officers, their office, age and home address.

Officers	Office Held	Age	Home Address
1.			
2.			
3.			

CERTIFICATE OF APPLICANT:

I hereby certify on this _____ day of _____, 20____ that the matters and facts set forth in the
 foregoing application are true to the best of my information, knowledge and belief and that the above named organization is organized and operates
 as a not for profit bonafide club, society or association having duly elected officers; that it has a constitution or by-law and that its members pay
 specified dues or membership charges throughout the year.

Signature of Applicant _____

STATE OF MARYLAND, BALTIMORE COUNTY, SS:

This certifies, that on the _____ day of _____, 20____, before the subscriber, a Notary of the State of
 Maryland, personally appeared _____, the applicant named in the a foregoing, and made oath in due form of law
 that the statements therein are true to the best of _____ knowledge and belief.

Witness my hand and official seal.

 Commission Expiration: _____

Approved – Liquor Board _____

(OVER)

NOTE

LICENSES ARE ISSUED TO OFFICERS WHO ARE AT LEAST 21 YEARS OF AGE, APPLYING FOR AN ALCOHOLIC BEVERAGE LICENSE FOR THE USE OF BONAFIDE ORGANIZATIONS ONLY.

- (A) IF THIS APPLICATION IS THE FIRST FOR YOUR ORGANIZATION, THE BOARD REQUIRES A LETTER FROM AN OFFICER OF YOUR ORGANIZATION THAT STATES:
- (1) THE TYPE AND PURPOSE OF ORGANIZATION AND IT IS NOT FOR PROFIT; AND
 - (2) THE NAME OF EACH OFFICER, OFFICE HELD, HOME ADDRESS, AGE, AND TERM EXPIRATION DATE OF SUCH OFFICE
 - (3) LETTERS OF DETERMINATION FROM THE INTERNAL REVENUE SERVICE QUALIFYING YOUR ORGANIZATION AS NOT FOR PROFIT
 - (4) ANY EVENT WITH 50 OR MORE ATTENDEES, APPLICANTS MUST SUBMIT A CROWD MANAGER CERTIFICATE FOR EITHER THE APPLICANT THEMSELVES OR AN EMPLOYEE AT THE FACILITY WHERE THE EVENT WILL BE HELD

CROWD MANAGER TRAINING IS REQUIRED BY ALL NATIONAL FIRE CODE STANDARDS IN PUBLIC ASSEMBLIES SUCH AS NIGHTCLUBS, AUDITORIUMS, BALLROOMS AND ARENAS

- (5) ALL APPLICANTS SIGNATURES MUST BE **NOTARIZED**
- (B) **THE APPLICATION SHOULD BE RECEIVED BY THE BOARD NO LATER THAN FIFTEEN DAYS PRIOR TO DATE OF USE, TO ALLOW TIME FOR PROCESSING. AFTER APPLICATION IS COMPLETELY FILLED OUT, INCLUDING CERTIFICATION, MAIL TO:**

**BOARD OF LIQUOR LICENSE COMMISSIONER FOR BALTIMORE COUNTY
COUNTY OFFICE BUILDING
111 W. CHESAPEAKE AVE., RM. G-9
TOWSON, MARYLAND 21204**

FOR APPROVAL SUBJECT TO RESTRICTIONS IMPOSED BY THE BOARD, IF ANY.

ANY QUESTIONS PLEASE CONTACT BALTIMORE COUNTY
BOARD OF LIQUOR LICENSE COMMISSIONERS 410-887-3191.

www.baltimorecountymd.gov