



Montgomery County Board of License Commissioners

For Office Use Only
Reviewed by:
Entered by:

2024-2025 ALCOHOLIC BEVERAGE LICENSE RENEWAL APPLICATION

This application can be filed as early as February 1, 2024 BUT no later than March 31, 2024
If no renewal application is submitted, the license will expire on April 30, 2024.

Application fee is \$120 (check and ACH accepted)

Questions? Call 240-777-1999 or email ABSLicensing@MontgomeryCountyMD.gov.

Please complete, print clearly, and circle or highlight any changes from last year. Examples: Changes in address, contact information, licensees, manager, ownership, corporate officers, authorized persons.

For the Use of: Individual Partnership Corporation Ltd. Liability Co. (LLC)

(1) Trade Name of Licensed Facility: (Business Telephone #)
(2) Address of Licensed Facility:
(3) Current License #: (4) Current Account #:
(5) Hours of Operation:

(6) Applicant(s): Each applicant below applies for renewal of the license now held. You must provide names, home addresses, and home and/or cell phone number:

A. Name Home Address/Zip Code
Email Address Home Telephone # Cell Phone #

B. Name Home Address/Zip Code
Email Address Home Telephone # Cell Phone #

C. Name Home Address/Zip Code
Email Address Home Telephone # Cell Phone #

(7) Who will be the **on-site manager** at the business from May 1, 2024 to April 30, 2025?

_____ Note: Fingerprints and copy of their driver's license must be submitted if this individual has not previously submitted them.

(8) **Organizational Structure:** Complete only (a), (b) or (c)

(a) Name of **Corporation** (IF APPLICABLE): _____

Address of corporation: _____

Stockholders:

Name _____ Shares Owned: _____

Name _____ Shares Owned: _____

Name _____ Shares Owned: _____

Name _____ Shares Owned: _____

(b) Name of **Ltd. Liability Co. (LLC)** (IF APPLICABLE): _____

Address of LLC: _____

Member percentage ownership interest of entire LLC:

Name _____ Percentage: _____

Name _____ Percentage: _____

Name _____ Percentage: _____

Name _____ Percentage: _____

(c) Name of **Partnership** (IF APPLICABLE): _____

Address of Partnership: _____

Percentage ownership interest of all general partners:

Name/Address _____ Percentage: _____

Name/Address _____ Percentage: _____

Name/Address _____ Percentage: _____

Name/Address _____ Percentage: _____

(9) **Property Information:** Complete either (a) or (b):

(a) COMPLETE IF YOUR CURRENT LEASE RUNS THROUGH OR BEYOND APRIL 30, 2025

STATEMENT OF LICENSEE RE: LEASE

I/We hereby certify that I/We have a lease with _____
(Name of Property Owner)

(Address of Property Owner) **(Phone Number of Property Owner)**

expiring _____ for the property named in the foregoing renewal application for
(DD/MM/YY)
Alcoholic Beverage License made by _____ to the Board
(Applicant/s)

of License Commissioners and that I/We hereby authorize the State Comptroller, his duly authorized deputies, inspectors, and clerks; the Board of License Commissioners for Montgomery County, its duly authorized agents and employees, and any peace officers of said County to inspect and search, without warrant, the premises upon which the business is to be conducted, and any and all parts of the building in which said business is to be conducted, at any and all hours.

(b) COMPLETE IF YOUR LEASE EXPIRES BEFORE APRIL 30, 2025 OR IF YOU OWN THE PROPERTY

STATEMENT OF LANDLORD/OWNER OF PREMISES

I/WE HEREBY CERTIFY that I/WE are the owner(s) of the property known as
_____ located at _____
(facility name) **(address)**

_____ named in the foregoing renewal application made by
_____ to the Board of License Commissioners.
(applicant)

Under the Alcoholic Beverage Laws of Maryland: That I/We assent to the granting of the license applied for, that I/We hereby authorize the State Comptroller, his duly authorized deputies, inspectors and clerks, the Board of License Commissioners for Montgomery County, its duly authorized agents and employees, and any peace officers of said county to inspect and search, without warrant, the premises upon which the business is to be conducted, at any and all hours. Affidavit: "By signing this application, I do solemnly declare and affirm under the penalties of perjury that the contents of the foregoing document are true and correct to the best of my knowledge, information, and belief."

Property Owner (Print name) _____

Property Owner (Signature) _____

Address: _____ Phone Number: _____

Date: _____

(10) **Organizational Information:** Complete either 10(a) for Corporation or 10(b) for an LLC.

(a) ELECTION OF OFFICERS FROM CORPORATE MINUTES

(Corporate Name)

Provide the name of the officers and the office held for each as applicable, e.g. President, Vice President, Secretary, Treasurer.

Applicant (A): _____
(Name) (Office held)

Applicant (B): _____
(Name) (Office held)

Applicant (C): _____
(Name) (Office held)

(b) LIMITED LIABILITY COMPANY ORGANIZATIONAL RESOLUTION

(Limited Liability Company Name)

Authorized Person (A): _____
(Name)

Authorized Person (B): _____
(Name)

Authorized Person (C): _____
(Name)

ADDITIONAL PERMITS

(11) **Permits:** Check the appropriate box(es) below.
Current permits you have are listed in red at the bottom of your license.

- NO CHANGES** to permits on my license.
- REMOVE** the following permit(s) from my license.

Check all that apply:

- Catering
- Outdoor Café
- Beer and/or Wine Sampling/Tasting
- Wine Corkage
- Growler
- Cooking Alcohol
- Delivery

- APPLY** for the following permit(s).

** To apply, please download the permit application from our website at montgomerycountymd.gov/abs.
Select "Licensure" and "Forms" and attach the specific permit application to this renewal.*

Check all that apply and attach permit application:

- Catering (Class B BWL, Class D BWL and BD BWL licenses)
- Outdoor Café
- Beer and/or Wine Sampling/Tasting (Class A licenses; \$200 annual fee)
- Wine Corkage (Class B, C, & H licenses)
- Growler (Class B-BW, D BW, and BD BWL licenses)
- Cooking Alcohol (Class B BW and Class H licenses)
- Delivery (Class A, D BW, B BW, and BD BWL licenses)

(12) **Ratio Affidavit:** (Applicable for **Beer, Wine & Liquor Licenses only**)

I/We hereby attest, under the penalty of perjury, that the gross receipts from the sale of alcoholic beverages in the hotel/restaurant - hotel/motel for the twelve-month period immediately preceding the application for renewal did not exceed 60% of the gross receipts from the sale of food and alcohol.

Agree

(13) **State Tax Obligations:**

I/We hereby agree to keep current all state and local tax obligations including, but not limited to, state sales and use taxes, withholding taxes, and admissions taxes.

Agree

Maryland State Sales Tax Account Number:

(14) **Attest:**

I/We hereby attest, under penalty of perjury, that all the information contained in the original license application is true and unchanged at this time except for information I have since submitted to DLC in writing on renewal applications or otherwise.

Agree

Extract from The Alcoholic Beverage Article, Annotated Code of Maryland, Section 6-329:

"If any signed statement, affidavit or oath required under the provisions of this Act shall contain any false statement, the offender shall be deemed guilty of perjury, and upon indictment and conviction thereof, shall be subject to the penalties provided by law for that crime."

Affidavit:

"By signing this application, I do solemnly declare and affirm under the penalties of perjury that the contents of the foregoing document are true and correct to the best of my knowledge, information, and belief."

(15) ALL APPLICANTS MUST SIGN a, b, and c BELOW.

(a) _____
Signature of Applicant A

(b) _____
Signature of Applicant B

(c) _____
Signature of Applicant C

(d) _____
*Signature of President or Vice-president (if different from applicants listed above)

**Mail application with check or ACH form to: Montgomery County Board of License Commissioners
201 Edison Park Drive, Gaithersburg, MD 20878**

Email application with ACH form to: ABSLicensing@MontgomeryCountyMD.gov

ACH Authorization Form – Application Fee Payment

Account number _____

Facility name _____

Facility address _____

Licensee Name _____

Licensee email address _____

Licensee phone number _____

Fee amount \$120 _____

____ I authorize the Alcohol Beverage Services Division of Licensure, Regulation, and Education to withdraw my application fee from the bank account I have on file with ABS. I understand this withdrawal will be submitted to our bank within two days of the ABS LRE office receiving this form. I understand there will be a fee of \$35 if the withdrawal is declined for non-sufficient funds.

Licensee Signature _____

Date _____