

## **Montgomery County Board of License Commissioners**

For Office Use Only Reviewed by:
Entered by:

## 2023-2024 ALCOHOLIC BEVERAGE LICENSE RENEWAL APPLICATION

This application can be filed as early as February 1, 2023 BUT no later than March 31, 2023 If no renewal application is submitted, the license will expire on April 30, 2023.

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

Questions? Call 240-777-1999 or email <a href="mailto:ABSLicensing@MontgomeryCountyMD.gov">ABSLicensing@MontgomeryCountyMD.gov</a>.

*****	**********	**********	************
	se complete, print clearly, and gress, contact information, licensees		ges from last year. Examples: Changes officers, authorized persons.
*****	**********	**********	***********
For th	ne Use of:	Partnership   Corporation	n ☐ Ltd. Liability Co. (LLC)
(1) Tr	ade Name of Licensed Facility: _		
(2) Ac	ddress of Licensed Facility:		(Business Telephone #)
			ount #:
(5) Ho	ours of Operation:		
(6) A.	<b>Applicant(s):</b> Each applicant to names, home addresses, and h	• •	e license now held. You must provide er:
	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)		o will be the <b>on-site manager</b> at the business from May 1, 202	•
		Note: Fingerpoint be submitted if this individual has not previously submitted the	
(8)	Org	anizational Structure: Complete only (a), (b) or (c)	
	(a)	Name of <b>Corporation</b> (IF APPLICABLE):	
		Address of corporation:	
		Stockholders: Name	Shares Owned:
		Name	Shares Owned:
		Name	Shares Owned:
		Name	
	(b)	Name of Ltd. Liability Co. (LLC) (IF APPLICABLE):	
		Address of LLC:	
		Member percentage ownership interest of entire LLC:	Percentage:
		Name	
		Name	Percentage:
		Name	Percentage:
	(c)	Name of <b>Partnership</b> (IF APPLICABLE):	
		Address of Partnership:	
		Percentage ownership interest of all general partners:	
		Name/Address	Percentage:
		Name/Address	Percentage:
		Name/Address	
		Name/Address_	Percentage:

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

Date: \_\_\_\_\_

(a) COMPLETE IF YOUR CUR	RENT LEASE RUNS THROUGH OR BEYOND APRIL 30, 2023
	STATEMENT OF LICENSEE RE: LEASE
I/We hereby certify that I/We h	ave a lease with
	(Name of Property Owner)
(Address of Property Own	er) (Phone Number of Property Owner)
expiring	for the property named in the foregoing renewal application for
(DD/MM/YY Alcoholic Reverage License m	ade by to the Board
7 toorione Develage Electrice III	ade byto the Board (Applicant/s)
deputies, inspectors, and clerk authorized agents and employ warrant, the premises upon wh	It that I/We hereby authorize the State Comptroller, his duly authorized as; the Board of License Commissioners for Montgomery County, its duly ees, and any peace officers of said County to inspect and search, without nich the business is to be conducted, and any and all parts of the building in conducted, at any and all hours.
(b) COMPLETE IF YOUR LEAS	SE EXPIRES BEFORE APRIL 30, 2023 <u>OR</u> IF YOU OWN THE PROPERTY
	I/WE are the owner(s) of the property known as
	located at
(facility name	
	named in the foregoing renewal application made by
	to the Board of License Commissioners.
(applio	cant)
hereby authorize the State Comp Commissioners for Montgomery county to inspect and search, wit all hours. Affidavit: "By signing the	ws of Maryland: That I/We assent to the granting of the license applied for, that I/We stroller, his duly authorized deputies, inspectors and clerks, the Board of License County, its duly authorized agents and employees, and any peace officers of said hout warrant, the premises upon which the business is to be conducted, at any and his application, I do solemnly declare and affirm under the penalties of perjury that the ent are true and correct to the best of my knowledge, information, and belief."
Property Owner (Print name) _	
Property Owner (Signature)	<del> </del>
Address:	Phone Number

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

	ELECTION OF OFFICERS F	ROM CORPORATE MINUTES
	(Corporate	e Name)
Provide the name of President, Secretar	of the officers and the office hel	d for each as applicable, e.g. President, Vice
Applicant (A):		
	(Name)	(Office held)
Applicant (B):	(Name)	
	(Name)	(Office held)
Applicant (C):	(Name)	
	(Name)	(Office held)
LIMIT	ED LIABILITY COMPANY	ORGANIZATIONAL RESOLUTION
	(Limited Liability Cor	mpany Name)
Authorized Person	<b>(Λ)</b> :	
Authorized Ferson	(A):(Name)	
Authorized Person	(B):	
, (411011204 1 010011	(B):(Name)	
Authorized Person	(C).	
. 13.1.3.1.2.34 1 3.3011	(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.
	☐ <b>REMOVE</b> the following permit(s) from my license.
	Check all that apply:
	<ul> <li>□ Catering</li> <li>□ Outdoor Café</li> <li>□ Beer and/or Wine Sampling/Tasting</li> <li>□ Wine Corkage</li> <li>□ Growler</li> <li>□ Cooking Alcohol</li> <li>□ Delivery</li> </ul>
	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 <u>did not exceed</u> 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
statei	y signed statement, affidavit or oath required under the provisions of this Act shall contain any false ment, the offender shall be deemed guilty of perjury, and upon indictment and conviction thereof, shall object to the penalties provided by law for that crime."  avit:
the c	signing this application, I do solemnly declare and affirm under the penalties of perjury that ontents of the foregoing document are true and correct to the best of my knowledge, mation, 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)
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Mail application with check <u>or ACH form to:</u> Montgomery County Board of License Commissioners 201 Edison Park Drive, Gaithersburg, MD 20878

Email application with ACH form to: <u>ABSLicensing@MontgomeryCountyMD.gov</u>

## 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. understand there will be a fee of \$35 if the withdrawal is declined for non-sufficient funds.
Licensee Signature
Date