Required Information for Business License Application

Montgomery County License Department 50 Maryland Ave. Ste 1300 Rockville, MD 20850
Tel. 240-777-9460 Fax 240-777-9451 Hours 8:30 – 4:30

Audit Control #
_____

_____
LLC, Corporation or Owner Name
(Must be registered with the Assessment & Taxation Dept)

_____
Trade Name (must be registered with Assessment & Taxation 410-767-1340)

New business? yes/no or purchasing existing business ? (transfer) yes/no

(Transfer Business: need signed original license or business contract)

Existing business: How long have you been in business without a license? _____

Federal Tax Id or Social Security Number _____

Worker's compensation policy number/and number of employees

_____ _____

Number of stores in Maryland _____

Wholesale Value of Inventory $_____

Cigarette License? ____yes ____no

Type of Business _____

Use & Sale Tax License Number_____

Telephone/ Fax Numbers _____ _____

_____
Address of Business Location/ Mailing Address (if different from location)

Apply online https://jportal.mdcourts.gov/**license**/index_disclaimer.jsp
Maryland Judiciary Business Online