

Board of License Commissioners
410-386-2094
Fax: 410-386-2444
1-888-302-8978
MD Relay Service 7-1-1/800-735-2258



Office of Administrative Hearings
Carroll County Government
225 North Center Street
Westminster, Maryland 21157-5194

By order of the Board of License Commissioners, no alcoholic beverage application will be accepted unless complete and includes the following documents:

- _____ Application Fee - \$500.00 (made payable to Commissioners of Carroll County)
- _____ Application (pages 1-9)
- _____ Criminal Background Request/Fingerprint receipt for each applicant - **Please see instructions on next page.**
- _____ Certificate and Workman's Compensation Insurance Policy Number
- _____ Lease/Purchase Agreement or Sales Contract
- _____ **Complete** Maryland (or appropriate state) Certified Motor Vehicle Administration Driver's Record (each applicant)
- _____ Menu if for restaurant type operation
- _____ Plans showing exact area to be licensed including floor plan, outdoor seating (if applicable), and parking area
- _____ Diagram showing clearly the location of other licenses within a ½ mile of the applicant's market area
- _____ Each applicant, on a separate sheet, must submit name, address, phone number (**Cell Phone Numbers Preferred**), and how many years acquainted, for 10 character references. **The qualifying resident applicant references must be State of Maryland residents.**
- _____ Fingerprint information form, one for each applicant, to be signed and copied to be submitted with the application. **(Original to be kept by the applicant; copy to be included with the application.)**

Additional Forms to be filed by Corporate and LLC Applicants

- _____ Articles of Incorporation, Corporate Charter, By-Laws
- _____ Articles of Organization and Operating Agreement for LLCs
- _____ State Certificate of approval from State Department of Assessments and Taxation
- _____ Corporate minutes and resolutions
- _____ Copies of stock certificates or proof of financial interest.
- _____ Stock sheet showing total amount of outstanding stock and the amount and class owned by each stockholder who owns more than 5% of the outstanding stock showing name, address and phone number of each officer and director and each stockholder owning more than 5% of the stock

Additional Forms to be filed by Transfer Applicants

- _____ Copy of sales contract between transferor and transferee
- _____ Bulk Sales Transfer Affidavit (Application to Comptroller)

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TAKE THIS PAGE WITH YOU TO BE FINGERPRINTED
******* ATTENTION CUSTOMERS*******

**Each licensee applicant must sign a Fingerprinting Disclosure Form
PRIOR to going for your fingerprints.**

**(The applicant keeps the original signed copy and provides a
copy of the signed document to the Board with their application)**

To all Liquor License Applicants:

Effective April 15, 2012, the FBI no longer accepts paper fingerprint cards. All applicants are required to go to an authorized fingerprinting service or directly to CJIS to fill out an application for Criminal Background Check and have digital fingerprints taken:

CJIS is located at: 6776 Reisterstown Road
Reisterstown Road Plaza
Baltimore, MD 21215 - You may contact them for directions and hours of operation at 410-585-3687.

Other locations for fingerprinting:

Absolute Investigative Fingerprinting and Security Services
140 Village Shopping Center, 601 Jermor Lane
Westminster, MD 21157 - 410-857-6460

Mustard Seed
15 National Place
Westminster, MD 21157 – 443-952-7208/Toll Free: 844-239-6721

Essential Support Services
2028 Liberty Road, Suite 102 & 532 Baltimore Boulevard, Suite 302
Eldersburg, MD 21784 – 866-388-9606 & Westminster, MD 21157 – 410-861-5966

Bollinger Gunsmithing
19 W. Baltimore Street
Taneytown, MD 21787 – 410-756-5454

Please note, when you arrive you must give them the following Authorization Number so that results are sent back to our office.

ATTENTION: Jo Vance, Administrative Hearings Coordinator
ORI-MD930160Z, AUTHORIZATION #9500010111
Carroll County Liquor Board
225 North Center Street, Room 113
Westminster, MD 21157

THE BOARD OF LICENSE COMMISSIONERS
OF CARROLL COUNTY, MARYLAND

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1. Application for a liquor license shall be submitted on forms provided, in accordance with the Rules and Regulations of the Board of License Commissioners for Carroll County and the Alcoholic Beverages and Cannabis Articles of the Annotated Code of Maryland. The applicants have sole responsibility for ensuring that the application is complete, accurate and that they comply with the law.
2. The application form must be complete in every detail and all the required documents submitted **BEFORE** a hearing will be scheduled.
 - a. Show complete mailing address.
 - b. Signature(s) will be notarized where required.
 - c. Show complete Trade Name and Corporate/LLC/Partnership/Sole Proprietorship Name.
3. Individual Applicant:
 - a. Must be resident of the State of Maryland at the time of filing application. Must remain a resident for at least nine (9) months of the year.
 - b. Must be the sole owner of the business for which the license is being applied.
4. Partnership Application:

All partners must be residents of the State of Maryland and must be residents at the time of filing of the application. Must remain residents for at least nine (9) months of the year.
5. Corporate and Club Application:
 - a. All of the individuals applying for a license on behalf of a corporation or LLC must have a financial interest in the corporation. "Financial interest" is defined as ownership of at least ten percent (10%) of the outstanding common stock of the corporation which is entitled to vote at any stockholder meeting for which the actual consideration paid was \$5,000.00.
 - b. If the application is for a Corporation, the license shall be applied for and issued to three (3) of the officers of that corporation as individuals, unless the corporation has less than three officers. If the application is for a limited liability company, the license shall be applied for by one or more authorized members of the LLC. At least one (1) of the individuals shall reside in the State of Maryland as of the time of filing of the application. All applicants must have financial interest in the corporation. The license shall remain valid only as long as the resident applicant continues to

remain a resident of the State of Maryland, and the Corporation remains as a viable entity.

- c. The qualifying resident applicant must own at least 10 percent of the business or have an investment of \$5,000. Attach a copy of receipt for actual consideration.
- d. If the application is for a Close Corporation, at least one of the stockholders must apply for the license and he/she must qualify the same as an individual licensee.
- e. If the application is for a club, three (3) of the officers must apply as “b” above. Officers of the clubs are exempt from the financial interest requirement.

6. Forms to be submitted by all applicants:

- a. Application
- b. Check for advertising - \$500.00, made payable to Carroll County Commissioners
- c. Certificate and Workmen’s Compensation Insurance Policy Number
- d. Lease/Purchase Agreement or Sales Contract or other document giving applicant the right to use the premises to be licensed
- e. Menu if for restaurant type operation
- f. Plans showing exact area to be licensed to include parking lot, and floor plans of all seating including inside and outside areas.
- g. Certified copy of each applicant’s complete driving record
- h. A diagram showing clearly the location of other licensed establishments in the applicants market area
- i. A certificate of alcohol awareness training must be supplied before a license can be issued.

7. Additional forms to be filed by Corporate and LLC Applicants

- a. Articles of Incorporation or Articles of Organization.
- b. Certificate of Good Standing dated within 30 days of application or State Certificate of approval from State Dept. of Assessments and Instructions for Application for Alcoholic Beverage License Taxation
- c. Copy of relevant corporate minute and resolutions
- d. Copies of Stock Certificates
- e. A stock sheet showing the total amount of outstanding stock with the name, address and phone number of **each** officer, director and stock holder owning more than 5% of the stock and LLC members.

8. Additional forms to be filed by Transfer Applicants

- a. Copy of sales contract between transferor and transferee
- b. Bulk Sales Transfer Application (may be submitted at time of hearing)
- c. Two copies of actual inventory of alcoholic beverages (may be submitted at time of hearing)
- d. Check for Comptroller of the Treasury (Bulk Sales) for \$200.00 **(to be submitted directly to the Comptroller)**
- f. Affidavit of Commercial Law - Title 6 (may be submitted at hearing)
- g. In addition to the advertising fee of \$500.00, there is a \$350.00 Transfer Fee to be paid upon issuance of the new license.

9. Additional forms for upgrading to Class B or D License.
 - a. Floor plan showing seating capacity inside and outside the licensed establishment.
10. Approval of any license to be issued must have **prior** approval from the Health Department and Permits and Inspections.
 - a. These agencies will be notified by the Liquor Board upon receipt of the application.
 - b. If the initial inspection is not passed or cannot be performed, it is the applicant's responsibility to reschedule the inspection.
 - c. A license will not be issued until all approvals have been obtained.
11. All prospective licensees must be fingerprinted per page two of this packet for a criminal background check.
12. Taxing Agencies: The applicant and business must not owe any delinquent taxes.
13. Hearings are normally held the second Wednesday of the month. Allow 4-6 weeks for processing of application. Applicants scheduled for a hearing are notified at least ten (10) days in advance.
14. All prospective licensees shall attend the hearing. In the case of transfer, both Transferor(s) and the prospective Transferee(s) must attend the hearing unless excused for a good cause.
15. Applicants are required to have **3** character witnesses for each applicant present at the hearing to testify under oath.
16. Each applicant, on a separate sheet, must submit name, address, fit and proper status of applicant and how many years acquainted, of 10 character references. The qualifying resident applicant's (**Applicant A**) references **must be State of Maryland residents**.
17. If you need assistance, or have any questions, please call the Board Office at (410) 386-2094.

THE BOARD OF LICENSE COMMISSIONERS FOR CARROLL COUNTY
(the "Board")

Application is made by the undersigned for an alcoholic beverage license under the provisions of the Alcoholic Beverages Articles of the Annotated Code of Maryland and the Rules and Regulations of the Board; together with the advertising fee of \$500.00 made payable to the **Carroll County Commissioners**, 225 North Center Street, Westminster, Maryland 21157, (410) 386-2094. If more space is needed, please attach additional sheet.

1. FOR THE USE OF: (check one)

/ / / / / / / / / /
An Individual Partnership Corporation LLC Unincorporated
Association

a. Type of license applied for (Check Appropriate Space)

Class A	BWL _____	BW _____	B _____
Class B	BWL _____	BW _____	B _____
Class BC	BWL _____	BW _____	B _____
Class BR	BWL _____	BW _____	B _____
Class C	BWL _____	BW _____	B _____
Class D	BWL _____	BW _____	B _____
Class H	BWL _____	BW _____	B _____
Class HC	BWL _____	BW _____	B _____

b. Is this license for a corporation or a club? _____

Give the name of the Corporation, Partnership or LLC? _____

Or the name of the club? _____

Email Address for the business? _____

BUSINESS SECTION - PLEASE PRINT OR TYPE AND ANSWER FULLY

c. Under what **trade name** will you conduct business? _____

A. Corporate Name _____ Bus. Phone # _____

B. Trade Name _____ Type of Business _____

Address of place to be licensed (Give street number or accurate location)

Street _____ P.O. Box # _____ Phone # _____

City _____ State _____ Zip _____

C. Election District where located _____. Is this
an application for a new license? _____

D. Are you represented by an attorney? _____
Whom? _____ Telephone # _____

Firm _____ Address _____

- E. Is this a transfer from a present license? _____
 From Whom? _____
****Both the transferor and the transferee must appear at the hearing for the transfer of a license.**
 (This Board must be furnished a copy of the Bulk Sales Permit issued by the State Comptroller's Office,
 before any license will be transferred.)
- F. Name of banking institution(s) for the **business account** _____
- G. Is this a transfer of location? _____
 From where? _____
- H. Is this an upgrade of license class? _____
 From what class? _____
- I. Is this an increase in premises? _____ Explain _____

4. State name of owner of property _____
 State address of owner of property _____

APPLICANT SECTION - PLEASE PRINT OR TYPE AND ANSWER FULLY

APPLICANT A (Resident Applicant as required by Alcoholic Beverages and Cannabis Articles Title 4-109(a)(4))

Name _____ Cell Phone # _____ Bus. Phone # _____
 Home Address _____ Period of Residence _____
 City _____ County _____ State _____ Zip _____
 Age _____ Sex _____ Maiden Name _____
 Are you a citizen of the U.S.? _____ Birth Place _____
 If a naturalized citizen, state when and where **and** provide Naturalization Certificate _____
Your Email Address: _____

What is your financial interest in the business? _____

APPLICANT B

Name _____ Cell Phone # _____ Bus. Phone # _____
 Home Address _____ Period of Residence _____
 City _____ County _____ State _____ Zip _____
 Age _____ Sex _____ Maiden Name _____

Are you a citizen of the U.S.? _____ Birth Place _____

If a naturalized citizen, state when and where **and** provide Naturalization Certificate _____

Your Email Address: _____

What is your financial interest in the business? _____

APPLICANT C

Name _____ Cell Phone # _____ Bus. Phone # _____

Home Address _____ Period of Residence _____

City _____ County _____ State _____ Zip _____

Age _____ Sex _____ Maiden Name _____

Are you a citizen of the U.S.? _____ Birth Place _____

If a naturalized citizen, state when and where **and** provide Naturalization Certificate _____

Your Email Address: _____

What is your financial interest in the business? _____

1. A. Are you a resident of the State of Maryland **at the time of filing this application?**

A. _____ B. _____ C. _____

If so, state district and precinct. A. _____ B. _____ C. _____

2. Have you ever been:

A. Convicted of a felony?

A. _____ B. _____ C. _____

2. Adjudged guilty of violating gambling laws?

A. _____ B. _____ C. _____

3. Adjudged guilty of violating alcoholic beverage laws?

A. _____ B. _____ C. _____

D. Adjudged guilty of any misdemeanor or felony offense against the laws of the United States, or any state?

A. _____ B. _____ C. _____

If so, state where and when _____

E. Identified in an action filed by any agency of the United States of America or any State thereof that is charged with the administration, interpretation or enforcement of any law or regulation?

A. _____ B. _____ C. _____

If so, state where and when _____

3. Have you ever held a license for the sale of alcoholic beverages?
A. _____ B. _____ C. _____
If yes, in which state, when, and where was the business located?

If so, has any such license been suspended or revoked or have you been fined or placed on probation for a violation of the liquor license restrictions?
A. _____ B. _____ C. _____
If yes, give full details _____

4. Have you ever applied for an alcoholic beverage license in Carroll County?
A. _____ B. _____ C. _____
5. What financial interest if any, do you have in the business to be conducted under this license (%).
A. _____ B. _____ C. _____
6. Are you, or your business, financially interested in any other business for which an alcoholic beverage license has been applied for, granted or issued?
A. _____ B. _____ C. _____
If so, state where the license is located and the nature of your interest.
A. _____ B. _____ C. _____
7. a. Is your spouse, as the case may be, licensed?
A. _____ B. _____ C. _____
b. Do they have any financial interest in any other alcoholic beverages business?
A. _____ B. _____ C. _____
If so, give details _____

8. Is there now, or will there be during the continuance of the license applied for, any other person financially interested in said license or the business to be conducted thereunder?
A. _____ B. _____ C. _____
If so, state fully the circumstances _____

9. a. Does any manufacturer, brewer, distiller or wholesaler have any financial interest, direct, or indirect, in the premises or business to be conducted thereunder?
A. _____ B. _____ C. _____
b. Will any such interest be hereafter conveyed or granted to any such manufacturer, distiller, brewer, or wholesaler?
A. _____ B. _____ C. _____
10. Do you now have, or will you hereafter have, any indebtedness or other financial obligation, directly to any manufacturer, brewer, distiller or wholesaler, other than for purchase of alcoholic beverages?
A. _____ B. _____ C. _____
11. If granted a license, will you conform to all laws and regulations relating to the business in which you propose to engage?
A. _____ B. _____ C. _____

I- We hereby authorize the Comptroller, his duly authorized deputies, inspectors and clerks, the Board of

License Commissioners of Carroll County, its duly authorized agents and employees, any peace officer of the County or the State, to inspect and search, without warrant, the premises upon which said 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.

(Extract from the law: If any affidavit or oath required under the provisions of this Act shall contain any false statements, 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.)

I HEREBY CERTIFY under penalties of perjury that the facts set forth in the foregoing document are true and correct and if ascribed to me based upon personal knowledge.

A. _____

B. _____

C. _____

Signature of Applicant(s)

STATE OF MARYLAND, COUNTY OF: _____

This certifies that on this _____ day of _____, 20____, before the subscriber, a Notary Public in and for the State and County aforesaid, personally appeared the above named applicants

WITNESS my hand and official seal _____

(Signature of Notary Public)

My Commission Expires: _____

(S E A L)

(Statement of owner or owners of property required in connection with Alcoholic Beverage Laws of Maryland)

I-We-HEREBY CERTIFY, that I am/We are the owner(s) of the property known as _____ named in this application made by the above named applicants, to the Board of License Commissioners of Carroll county under the Alcoholic Beverage and Cannabis Laws of Maryland, for the class _____ License expiring April 30, _____; that I/We hereby authorize the State Comptroller, its duly authorized deputies, inspectors, and clerks, the Board of License Commissioners of Carroll County, the incorporated municipality within which the business is located, if any, or the State, to inspect and search without warrant, the premises upon which said 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.

My/Our signature this _____ day of _____, 20_____.

Witness

Owner

Witness

Owner

NOTE: ALL PERSONS HAVING AN INTEREST IN THE PROPERTY MUST SIGN

TRANSFERS: Include copy of lease, sales contract, bulk transfer affidavit. Also include a menu, if restaurant business.

IF THIS APPPLICATION IS FOR A TRANSFER FROM ANOTHER LICENSEE(S) please have said licensee(s) sign below to indicate their consent to the transfer and have their signatures witnessed as well as attend the hearing per Rule #10b of the Board of License Commissioners Rules and Regulations.

WITNESS:

FOR CLUBS, CORPORATIONS, LLCs, PARTNERSHIPS AND ASSOCIATIONS

Please provide the name and official capacity of all officers, members, or all parties, including limited partners:

Please list the names and respective office for each person to whom this license is to be issued:

Signature _____
President or Vice President

FORM FOR CHARACTER REFERENCES

References for App. A <u>(Name of Applicant)</u> <u>Names of References</u>	Is this person fit and proper to hold a license? (Yes or No)	Address & Phone Number (cell phone preferred)	Years known
Signature of Reference #1			
Signature of Reference #2			
Signature of Reference #3			
Signature of Reference #4			
Signature of Reference #5			
Signature of Reference #6			
Signature of Reference #7			
Signature of Reference #8			
Signature of Reference #9			
Signature of Reference #10			

References for App. B <u>(Name of Applicant)</u> <u>Names of References</u>	Is this person fit and proper to hold a license?	Address & Phone Number (cell phone preferred)	Years known
Signature of Reference #1			
Signature of Reference #2			
Signature of Reference #3			
Signature of Reference #4			
Signature of Reference #5			
Signature of Reference #6			
Signature of Reference #7			
Signature of Reference #8			
Signature of Reference #9			
Signature of Reference #10			

References for App. C (Name of Applicant) Names of References	Is this person fit and proper to hold a license?	Address & Phone Number (cell phone preferred)	Years known
Signature of Reference #1			
Signature of Reference #2			
Signature of Reference #3			
Signature of Reference #4			
Signature of Reference #5			
Signature of Reference #6			
Signature of Reference #7			
Signature of Reference #8			
Signature of Reference #9			
Signature of Reference #10			

AGENCY PRIVACY REQUIREMENTS FOR NONCRIMINAL JUSTICE APPLICANTS

Authorized governmental and non-governmental agencies/officials that conduct a national fingerprint-based criminal history record check on an applicant for a noncriminal justice purpose (such as employment or a license, immigration or naturalization matter, security clearance, or adoption) are obligated to ensure the applicant is provided certain notices and that the results of the check are handled in a manner that protects the applicant's privacy. All notices must be provided in writing.¹ These obligations are pursuant to the Privacy Act of 1974, Title 5, United States Code (U.S.C.), Section 552a, and Title 28, Code of Federal Regulations (CFR), Section 50.12, among other authorities.

- Officials must ensure that each applicant receives an adequate written FBI Privacy Act Statement (dated 2013 or later) when the applicant submits his/her fingerprints and associated personal information.²
- Officials must advise all applicants in writing that procedures for obtaining a change, correction, or update of an FBI criminal history record are set forth at 28 CFR 16.34. Information regarding this process may be found at <https://www.fbi.gov/services/cjis/identity-history-summary-checks> and <https://www.edo.cjis.gov>.
- Officials must provide the applicant the opportunity to complete or challenge the accuracy of the information in the FBI criminal history record.
- Officials should not deny the employment, license, or other benefit based on information in the FBI criminal history record until the applicant has been afforded a reasonable time to correct or complete the record or has declined to do so.
- Officials must use the FBI criminal history record for authorized purposes only and cannot retain or disseminate it in violation of federal statute, regulation or executive order, or rule, procedure or standard established by the National Crime Prevention and Privacy Compact Council.³

The FBI has no objection to officials providing a copy of the applicant's FBI criminal history record to the applicant for review and possible challenge when the record was obtained based on positive fingerprint identification. If agency policy permits, this courtesy will save the applicant the time and additional FBI fee to obtain his/her record directly from the FBI by following the procedures found at 28 CFR 16.30 through 16.34. It will also allow the officials to make a more timely determination of the applicant's suitability.

Each agency should establish and document the process/procedures it utilizes for how/when it gives the applicant the FBI Privacy Act Statement, the 28 CFR 50.12 notice, and the opportunity to correct his/her record. Such documentation will assist State and/or FBI auditors during periodic compliance reviews on use of FBI criminal history records for noncriminal justice purposes.

Name: _____

Date: _____

¹ Written notification includes electronic notification, but excludes oral notification.

² See <https://www.fbi.gov/services/cjis/compact-council/privacy-act-statement>

³ See 5 U.S.C. 552a(b); 28 U.S.C. 534(b); 34 U.S.C. § 40316 (formerly cited as 42 U.S.C. § 14616), Article IV(c); 28 CFR 20.21(c), 20.33(d), 50.12(b) and 906.2(d).