

**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** 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 Carroll County 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 Applicants**

- \_\_\_ Articles of Incorporation, Corporate Charter, By-Laws
- \_\_\_ 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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**\*\*\*\*\* ATTENTION CUSTOMERS\*\*\*\*\***

**Each licensee applicant must come into the Liquor Board office in the County Office Building, Room 113, 225 North Center Street, Westminster, MD 21157, to sign a Fingerprinting Disclosure Form PRIOR to going for your fingerprints.**

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**  
19 N. Court Street  
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  
Eldersburg, MD 21784 – 866-388-9606

**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 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 Name.
3. Individual Applicant:
  - a. Must be resident of Carroll County 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 Carroll County 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 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. At least one (1) of the individuals shall reside in the County 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 County, and the Corporation remains as viable entity.

- c. The qualifying resident applicant must own at least 10 percent of the business for which actual consideration paid was \$5,000.00. 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 licenses and the classes of those licenses in the applicants market area
7. Additional forms to be filed by Corporate Applicants
- a. Articles of Incorporation
  - 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
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 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 requested to have at least 2-3 character witnesses for each applicant present at the hearing.
16. Each applicant, on a separate sheet, must submit name, address, phone number, and how many years acquainted, of 10 character references. The qualifying resident applicant(s) references **must be Carroll County residents**.
17. If you need assistance, or have any questions, please call the Board Office at (410) 386-2094.



E. Is this a transfer from a present license? \_\_\_\_\_  
From Whom? \_\_\_\_\_

(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 Article 2B)

Name \_\_\_\_\_ Home 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 \_\_\_\_\_ Home 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 \_\_\_\_\_ Home 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 Carroll County **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 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 APPLICATION IS FOR A TRANSFER FROM ANOTHER LICENSEE(S) please have said licensee(s) sign below to indicate his or their consent to the transfer and have their signatures witnessed.

WITNESS:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**FOR CLUBS, CORPORATIONS, PARTNERSHIPS AND ASSOCIATIONS**

Please provide the name and official capacity of all officers 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



# Privacy Act Statement

Authority: The FBI’s acquisition, preservation, and exchange of fingerprints and associated information is generally authorized under 28 U.S.C. 534. Depending on the nature of your application, supplemental authorities include Federal statutes, State statutes pursuant to Pub. L. 92-544, Presidential Executive Orders, and federal regulations. Providing your fingerprints and associated information is voluntary; however, failure to do so may affect completion or approval of your application.

Principal Purpose: Certain determinations, such as employment, licensing, and security clearances, may be predicated on fingerprint-based background checks. Your fingerprints and associated information/biometrics may be provided to the employing, investigating, or otherwise responsible agency, and/or the FBI for the purpose of comparing your fingerprints to other fingerprints in the FBI’s Next Generation Identification (NGI) system or its successor systems (including civil, criminal, and latent fingerprint repositories) or other available records of the employing, investigating, or otherwise responsible agency. The FBI may retain your fingerprints and associated information/biometrics in NGI after the completion of this application and, while retained, your fingerprints may continue to be compared against other fingerprints submitted to or retained by NGI.

Routine Uses: During the processing of this application and for as long thereafter as your fingerprints and associated information/biometrics are retained in NGI, your information may be disclosed pursuant to your consent, and may be disclosed without your consent as permitted by the Privacy Act of 1974 and all applicable Routine Uses as may be published at any time in the Federal Register, including the Routine Uses for the NGI system and the FBI’s Blanket Routine Uses. Routine uses include, but are not limited to, disclosures to: employing, governmental or authorized non-governmental agencies responsible for employment, contracting, licensing, security clearances, and other suitability determinations; local, state, tribal, or federal law enforcement agencies; criminal justice agencies; and agencies responsible for national security or public safety.

As of 03/30/2018

## NONCRIMINAL JUSTICE APPLICANT’S PRIVACY RIGHTS

As an applicant who is the subject of a national fingerprint-based criminal history record check for a noncriminal justice purpose (such as an application for employment or a license, an immigration or naturalization matter, security clearance, or adoption), you have certain rights which are discussed below. All notices must be provided to you in writing. <sup>1</sup> 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), 50.12, among other authorities.

- You must be provided an adequate written FBI Privacy Act Statement (dated 2013 or later) when you submit your fingerprints and associated personal information. This Privacy Act Statement must explain the authority for collecting your fingerprints and associated information and whether your fingerprints and associated information will be searched, shared, or retained. <sup>2</sup>
- You must be advised in writing of the procedures for obtaining a change, correction, or update of your FBI criminal history record as set forth at 28 CFR 16.34.
- You must be provided the opportunity to complete or challenge the accuracy of the information in your FBI criminal history record (if you have such a record).
- If you have a criminal history record, you should be afforded a reasonable amount of time to correct or complete the record (or decline to do so) before the officials deny you the employment, license, or other benefit based on information in the FBI criminal history record.
- If agency policy permits, the officials may provide you with a copy of your FBI criminal history record for review and possible challenge. If agency policy does not permit it to provide you a copy of the record, you may obtain a copy of the record by submitting fingerprints and a fee to the FBI. Information regarding this process may be obtained at <https://www.fbi.gov/services/cjis/identity-history-summary-checks> and <https://www.edo.cjis.gov>.
- If you decide to challenge the accuracy or completeness of your FBI criminal history record, you should send your challenge to the agency that contributed the questioned information to the FBI. Alternatively, you may send your challenge directly to the FBI by submitting a request via <https://www.edo.cjis.gov>. The FBI will then forward your challenge to the agency that contributed the questioned information and request the agency to verify or correct the challenged entry. Upon receipt of an official communication from that agency, the FBI will make any necessary changes/corrections to your record in accordance with the information supplied by that agency. (See 28 CFR 16.30 through 16.34.)
- You have the right to expect that officials receiving the results of the criminal history record check will use it only for authorized purposes and will not 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.<sup>3</sup>

Updated 11/6/2019

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I acknowledge receipt of the FBI Privacy Act Statement and Noncriminal Justice Applicant’s Privacy Rights.

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

<sup>1</sup> Written notification includes electronic notification, but excludes oral notification. <sup>2</sup> <https://www.fbi.gov/services/cjis/compact-council/privacy-act-statement>  
<sup>3</sup> 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) and 906.2(d).