



City of Annapolis
Office of the City Clerk
160 Duke of Gloucester Street
Annapolis, Maryland 21401

DepClerk@annapolis.gov • 410-263-7942 • Fax 410-280-1853 • TDD use MD Relay or 711 • www.annapolis.gov

Alcoholic Beverage Control Board Instructions and Application for an Alcoholic Beverage License

The Alcoholic Beverage Control Board (ABCB or Board) meets the first Wednesday of each month at 7:00 p.m. in the Council Chamber, City Hall, 160 Duke of Gloucester Street, Annapolis.

Filing Fee: Two Hundred and Twenty-Five Dollars (\$225.00). Payable to the City of Annapolis. Non-refundable.

Application Due: See attached Application Submission Deadline schedule below for current calendar year.

Definitions:

Any terms used in these application instructions and/or the application, which are not otherwise defined, shall have the meanings indicated in the ABCB [Rules and Regulations](#).

General Information:

1. Zoning Approval: Restaurants, or other establishments, seeking a License are required to submit a filled-in copy of the Zoning Approval Form (*page 9*) to the Department of Planning and Zoning, 145 Gorman Street, 3rd Floor, Annapolis, MD 21401 requesting confirmation that it is properly zoned for the applicable License **a minimum of three (3) business days (excluding City holidays and weekends) prior to submitting an application to the City Clerk's office.**
2. No more than one (1) Alcoholic Beverage License (License) shall be issued to any person in the City of Annapolis.
3. Any new License approved by the Board shall be placed in use within six (6) months of the date granting such License. If such License is not issued by the City Clerk within six (6) months of Board approval, the License shall be null and void unless extended by the Board pursuant to the ABCB [Rules and Regulations](#).
4. Each applicant for a License shall undergo, at its expense, fingerprinting and a State of Maryland criminal background check.
5. All Licenses expire on April 30th of each year. The fee for Licenses issued after May 1st shall be prorated on a quarterly basis.
6. Types and classes of Licenses and corresponding fees are found in Appendix A of the ABCB [Rules and Regulations](#), which are located on the City's website at www.annapolis.gov.
7. All matters pertaining to an Alcoholic Beverage License are governed by the Alcoholic Beverages Article of the Annotated Code of Maryland, [Title 7](#) of the Code of the City of Annapolis, and the ABCB [Rules and Regulations](#), all as may be amended.

Hearing before the Board:

All applicants for a License are required to be present at a hearing before the Board on their application, with or without an attorney, agent, or other representative. Please contact the City Clerk's Office with any questions or need for assistance.

Specific Information to Include with the Application (All Applicants):

The following information and documents shall be included with all applications, regardless of whether that application is submitted by an individual, sole proprietorship, partnership, corporation, limited liability company, Club, or other entity:

1. Names of the applicable number of qualified Licensees, and documentation evidencing satisfaction of Chapter 2 of the ABCB [Rules and Regulations](#) including proof of residency, voter registration and real property tax payment.

2. A cover sheet that addresses the criteria listed for approving an application plus eleven (11) copies

Criteria established in State of Maryland Code, Alcoholic Beverages Article

- Describe the public need and desire for the license
 - Discuss the number and location of existing licenses and the potential effect on existing licensees of the license applied for
 - Discuss the potential commonality or uniqueness of the services and products to be offered by the applicant's business
 - Describe the impact on the general health, safety, and welfare of the community, including issues relating to crime, traffic conditions, parking, or convenience
3. Original complete, signed and notarized application (*pages 1-8*), **plus** eleven (11) copies of the completed application.
 4. Zoning Approval Form (*page 9*) **plus** eleven (11) copies
 5. Transfer Authorization Form, **transfers only** (*page 10*) **plus** eleven (11) copies
 6. Certification of Bulk Transfer Compliance **transfers only** (*page 11*) **plus** eleven (11) copies
 7. Eleven (11) copies of professionally sealed plans (folded 8 ½ x 11) of the Premises and the Enclosed Premises to be licensed by the Board, and as further described in Chapter 2 of the ABCB [Rules and Regulations](#).
 8. Certificate(s) of completion of an Alcohol Training Awareness Program.
 9. A copy of Maryland Sales & Use Tax License.
 10. A copy of State of Maryland Traders' License.
 11. Copies of all applicable corporate and/or entity documentation, including, as the City Clerk deems applicable, articles of incorporation, articles of organization, by-laws, operating agreements, partnership agreements, registration of a trade name, certificate(s) of all shares/stock/interest issued, corporate/entity resolutions, and corporate/entity meeting minutes.
 12. Certificate of good standing with the Maryland State Department of Assessments and Taxation, as the City Clerk deems applicable.
 13. Names and addresses of all officers, members, partners, or sole proprietor, as the City Clerk deems applicable.

Specific Information to Include with the Application (Clubs Only):

In addition to the information to be provided above in numbers 1 through 13, a Club shall also submit:

1. An Affidavit of Non-Discrimination.
2. Documentation that the Club has been in existence and operation for a period of one (year) prior to the date of the application, as deemed satisfactory by the City Clerk.
3. Documentation that the Club was not formed for the purpose of obtaining a License, as deemed satisfactory by the City Clerk.
4. Documentation that the Club has sufficient members to support its operation with a License, and without the patronage of guests and other non-members.



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Alcoholic Beverage Control Board
Application for Alcoholic Beverage License (New or Transfer)

For the non-refundable application fee, please see the current Fee Schedule.

Corporate/Legal Name of the Establishment _____

Trading as _____

Desired License location and address _____ Phone _____

Class of License desired. _____ (Select from [Rules & Regulations](#) Appendix A)

Categories	Beer	Beer, Wine and Liquor	Wine & Beer (Wine Bar)
	Beer and Light Wine	Refillable Container	
	Beer and Wine Tasting	Sidewalk Café	
Applicant	Club	Corporation	Individual
			LLC
			Partnership
	Institution for the care of the aged		

Type of license New Transfer

If transferring a License, provide both the legal name and the trade name of previous License Holder:

To the Alcoholic Beverage Control Board:

Application is made by the undersigned proposed Licensees for the applicant (Licensees) under the provisions of the Alcoholic Beverage Article of the Annotated Code of Maryland, [Title 7](#) of the Code of the City of Annapolis, and the ABCB [Rules and Regulations](#), all as may be amended, for the above applied for License, and the Licensees submit and certify to the following information required by the Article:

1. Name _____ Age _____ Sex _____
 Residence _____ State _____ Zip _____
 How long? _____ Day Phone _____ Driver's license _____ State _____
 Birth date _____ Birth Place _____ Naturalized at _____ Year _____

2. Name _____ Age _____ Sex _____
 Residence _____ State _____ Zip _____
 How long? _____ Day Phone _____ Driver's license _____ State _____
 Birth date _____ Birth Place _____ Naturalized at _____ Year _____

3. Name _____ Age _____ Sex _____
 Residence _____ State _____ Zip _____
 How long? _____ Day Phone _____ Driver's license _____ State _____
 Birth date _____ Birth Place _____ Naturalized at _____ Year _____

1. The Licensees are citizens of the United States. True False
2. Has each Licensee been a resident of the City of Annapolis and/or Anne Arundel County, a real property taxpayer of the City of Annapolis and/or Anne Arundel County, and a City of Annapolis and/or Anne Arundel County voter for more than two (2) years prior to filing this application? *Licensee one **must** meet these requirements.*
- Licensee 1. Yes No 2. Yes No 3. Yes No
3. Workmen's Compensation Binder or Policy number _____
4. Contact Person for Establishment _____
Cell Phone _____ Email Address _____
5. Premises description Lot size _____ Size and type of construction and building or area applied for:

6. Name of the owner of Premises described above _____
7. The Licensees have never been convicted of a felony. True False
8. The Licensees have never been adjudged guilty of violating the laws governing the sale of Alcoholic Beverages or for the prevention of gambling in the State of Maryland. True False
If false, give Licensee names, dates and offenses. _____
9. The Licensees have a pecuniary interest in the business to be conducted under the License. True False
10. The Licensees have not had a License for the sale of Alcoholic Beverages revoked. True False
11. The Licensees are not pecuniary interested in any other place of business in the City of Annapolis or Anne Arundel County where, or for which, a License has been applied for, granted or issued under the Alcoholic Beverages Article, except as otherwise permitted by the Alcoholic Beverages Article. True False
12. The Licensees have never been adjudged guilty of any offense against the laws of the State of Maryland or United States. True False
13. Have the Licensees ever held a License for the sale of Alcoholic Beverages? True False
If yes, in what state and at what location therein? _____
14. No person except the Licensees is in any way pecuniary interested in the License applied for or in the business to be conducted thereunder during the continuance of the License, if issued. True False
- a. What financial interest does each of the Licensees have in the business/applicant?
Percentage for Licensee: 1. _____ 2. _____ 3. _____
- b. If any persons other than the Licensees are pecuniary interested in the business/applicant, please provide names, title or position in business/applicant, *percentage* of interest, shares of stock or membership (as applicable), and a statement if each such person holds an interest in any other Alcoholic Beverage License.
15. No manufacturer, brewer, distiller, or wholesaler, directly or indirectly, has any financial interest in the Premises, the applicant, or the business of the applicant and the Licensees, and the applicant and the Licensees shall not convey or grant to any manufacturer, brewer, distiller or wholesaler any such interest, except as otherwise permitted by the Alcoholic Beverages Article; and the applicant and the Licensees do not have, at the time of making this application, any indebtedness or other financial obligation and shall not incur any such indebtedness or other financial obligation, directly or indirectly, to any manufacturer, brewer, distiller or wholesaler other than for the purchase of Alcoholic Beverages. True False

- 16. The applicant and the Licensees shall, if granted a License, conform to all laws and regulations relating to the business in which the applicant proposes to engage. True False
- 17. The applicant submits herewith a statement duly executed and acknowledged by the owner of the Premises in which the business under the License is to be conducted, assenting to the granting of the License applied for, authorizing the State Comptroller, its duly authorized deputies, inspectors, and clerks, the City, its duly authorized clerks, agents and employees, and any peace officer of the City of Annapolis to inspect and search, without warrant, the Premises upon which the business is to be conducted, and any and all parts of the Enclosed Premises (i.e. building) in which said business is to be conducted, at any and all hours. True False
- 18. The License for which this application is made is to be for the period beginning and ending April 30th next from the date hereof: _____.
- 19. The applicant tenders herewith a non-refundable application fee, and the applicant and the Licensees hereby agree to be responsible for any and all expenses incurred in connection with the publication of the notice of this application in a newspaper published in the City of Annapolis and for the posting of a sign upon the Premises and sending letters of notification. True False

Extract from Law:

If any affidavit or oath required under the provisions of this application 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.

Names and addresses of applicant's officers/members/partners/sole proprietor:

Name _____ Title _____

Address _____

E-mail Address _____

Name _____ Title _____

Address _____

E-mail Address _____

Name _____ Title _____

Address _____

E-mail Address _____

Signatures * Note: If President or Vice-President of the applicant is one of the Licensees, he/she must also sign as a Licensee.

* President or Vice-President _____

1. Licensee _____

2. Licensee _____

3. Licensee _____

(Corporate Seal)

Certifications

1. STATE OF MARYLAND, ANNE ARUNDEL COUNTY, to wit:

I HEREBY CERTIFY, that on this _____ day of _____, _____, before me, the subscriber, a Notary Public of the State and County aforesaid, personally appeared _____ Licensee for the applicant named in the foregoing application, and made oath in due form of law that the statements therein are true to the best of (his/their) knowledge and belief.

WITNESS my hand and Notarial Seal.

Notary Public _____ My Commission expires _____

2. STATE OF MARYLAND, ANNE ARUNDEL COUNTY, to wit:

I HEREBY CERTIFY, that on this _____ day of _____, _____, before me, the subscriber, a Notary Public of the State and County aforesaid, personally appeared _____ Licensee for the applicant named in the foregoing application, and made oath in due form of law that the statements therein are true to the best of (his/their) knowledge and belief.

WITNESS my hand and Notarial Seal.

Notary Public _____ My Commission expires _____

3. STATE OF MARYLAND, ANNE ARUNDEL COUNTY, to wit:

I HEREBY CERTIFY, that on this _____ day of _____, _____, before me, the subscriber, a Notary Public of the State and County aforesaid, personally appeared _____ Licensee for the applicant named in the foregoing application, and made oath in due form of law that the statements therein are true to the best of (his/their) knowledge and belief.

WITNESS my hand and Notarial Seal.

Notary Public _____ My Commission expires _____

Signatures

Owner of Premises _____

Statement of owner of Premises required in connection with Alcoholic Beverages Law of Maryland.

I hereby certify that I am the owner of the Premises known as _____ in the foregoing application made to the City of Annapolis Alcoholic Beverage Control Board under the Alcoholic Beverages Law of Maryland, that I assent to the granting of the License applied for, and that I hereby authorize the State Comptroller, its duly authorized deputies, inspectors, and clerks, the Annapolis City Council, its duly authorized clerks, agents and employees, and any peace officer of the City of Annapolis to inspect and search without warrant, the Premises upon which the business is to be conducted, and any and all parts of the Enclosed Premises (i.e. building) in which said business is to be conducted at any and all hours.

I HEREBY CERTIFY, that on this _____ day of _____, _____, before me, the subscriber, a Notary Public of the State and County aforesaid, personally appeared _____ the owner of the Premises named in the foregoing application, and made oath in due form of law that the statements therein are true to the best of (his/their) knowledge and belief.

WITNESS my hand and Notarial Seal.

Notary Public _____ My Commission expires _____



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**Alcoholic Beverage Control Board
Financial Information Form
LICENSEE ONE – QUALIFYING APPLICANT**

Any proposed Licensee for the applicant must have a pecuniary interest in the Licensed Premises.

Licensee's name _____

Address _____

How long at address? _____ Date of birth _____

Most recent employer _____

Employer's Address _____

Position or title _____

How long employed? _____ Type of business _____

List any and all business interests.

I am or will be the owner partner stockholder member in the Licensed Premises.

If a stockholder, how many shares? _____

My personal contribution will be \$ _____

Of this amount, \$ _____ will be in cash and will be or has been derived from the following sources:

If a LLC member, contribution is cash property services.

A false statement and/or a falsification of any information on this Financial Information Form may constitute grounds for denial or revocation of any applied for or granted License by the Board.

I HEREBY CERTIFY on this _____ day of _____, _____, under the penalties of perjury, that the matters and facts set forth above are true and correct to the best of my information and belief.

Applicant _____ Witness _____

Date _____



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**Alcoholic Beverage Control Board
Financial Information Form
LICENSEE TWO**

Any proposed Licensee for the applicant must have a pecuniary interest in the Licensed Premises.

Licensee's name _____

Address _____

How long at address? _____ Date of birth _____

Most recent employer _____

Employer's Address _____

Position or title _____

How long employed? _____ Type of business _____

List any and all business interests.

I am or will be the owner partner stockholder member in the Licensed Premises.

If a stockholder, how many shares? _____

My personal contribution will be \$ _____

Of this amount, \$ _____ will be in cash and will be or has been derived from the following sources:

If a LLC member, contribution is cash property services.

A false statement and/or a falsification of any information on this Financial Information Form may constitute grounds for denial or revocation of any applied for or granted License by the Board.

I HEREBY CERTIFY on this _____ day of _____, _____, under the penalties of perjury, that the matters and facts set forth above are true and correct to the best of my information and belief.

Applicant _____ Witness _____

Date _____



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**Alcoholic Beverage Control Board
Financial Information Form
LICENSEE THREE**

Any proposed Licensee for the applicant must have a pecuniary interest in the Licensed Premises.

Licensee's name _____

Address _____

How long at address? _____ Date of birth _____

Most recent employer _____

Employer's Address _____

Position or title _____

How long employed? _____ Type of business _____

List any and all business interests.

I am or will be the owner partner stockholder member in the Licensed Premises.

If a stockholder, how many shares? _____

My personal contribution will be \$ _____

Of this amount, \$ _____ will be in cash and will be or has been derived from the following sources:

If a LLC member, contribution is cash property services.

A false statement and/or a falsification of any information on this Financial Information Form may constitute grounds for denial or revocation of any applied for or granted License by the Board.

I HEREBY CERTIFY on this _____ day of _____, _____, under the penalties of perjury, that the matters and facts set forth above are true and correct to the best of my information and belief.

Applicant _____ Witness _____

Date _____



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Alcoholic Beverage Control Board Zoning Approval Form

Corporate/Legal Name of the Establishment _____

Trading as _____

Desired License location and address _____ Phone _____

Restaurants, or other establishments, seeking a License are required to submit a filled-in copy of this Zoning Approval Form to the Department of Planning and Zoning, 145 Gorman Street, 3rd Floor, Annapolis, MD 21401 requesting confirmation that it is properly zoned for the applicable License **a minimum of three (3) business days (excluding City holidays and weekends) prior to submitting an application to the City Clerk's office.**

The City Clerk will not place any application on the Board's schedule or agenda for a hearing until (1) the above submittal requirement is met, AND (2) the Department of Planning and Zoning has recommended that the application's proposed location is either in complete or conditional zoning compliance. If the Department of Planning and Zoning only gives conditional zoning compliance, the Board's approval of the new application and License may only be approved contingent upon satisfaction of such conditions.

Please provide the following information before submitting this form to the Department of Planning and Zoning or the City Clerk:

Is this an existing business with a valid use permit? Yes No
 If there is a change of ownership or it is new business, a Use Permit application, the associated fee, and all required documentation must be submitted to the Department of Planning and Zoning prior to submitting this form to that Department.

What is the proposed use of the property?
 If this is an existing business, are there any proposed changes to the current approved use and/or floor plan, including hours of operation, a bar and or live entertainment?
 If yes, please describe the proposed changes and/or provide a copy of the proposed floor plan. Any changes to the existing operation of the business or the existing floor plan must be approved by the Department of Planning and Zoning prior to submitting this form to that Department.

Number of Seats to be provided?
 What types of Alcoholic Beverages are proposed to be served? beer only beer and wine beer wine and liquor
 What are the hours of operation of the business?

Applicant Signature _____ Date _____

Print Name _____

FOR CITY USE ONLY		
Department	Recommendation	Date
Planning and Zoning, Director	<input type="checkbox"/> Complete Zoning Compliance <input type="checkbox"/> Conditional Zoning Compliance** <input type="checkbox"/> Not Compliant/Failed to Meet Deadlines	
City Clerk		
Alcoholic Beverage Control Board		

**See attached pages for conditions to be met prior to approval of application and License.



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Alcoholic Beverage Control Board Transfer Authorization

I (We), _____ (transferor), Holder of an Alcoholic Beverages License No. _____ issued by the Alcoholic Beverage Control Board in accordance with the Alcoholic Beverages Laws of the State of Maryland for the Premises known as _____ Annapolis, Maryland do hereby request, consent to and authorize the Alcoholic Beverage Control Board for the City of Annapolis to transfer said Alcoholic Beverage License and all privileges thereunder to:

_____(transferee).

IN WITNESS WHEREOF this Transfer Authorization is signed this _____ day of _____, _____.

Witness _____
Transferor _____

Address _____

Witness _____
Transferor _____

Address _____

Witness _____
Transferor _____

Address _____

Settlement was made on _____

ACKNOWLEDGED AND AGREED BY:

Legally Authorized Representative(s) of Transferee



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**Alcoholic Beverage Control Board
Affidavit of Transferor
Certification of Title 6 Bulk Transfer Compliance
Pursuant to Annotated Code of Maryland, Alcoholic Beverages Article**

I, _____ (transferor), do hereby swear and affirm that I have complied in all respects with the Maryland Annotated Code, Commercial Law Article, Title 6 (Bulk Transfer Act) insofar as it relates to the sale of my business, known as

_____ (legal or corporate name), which does business as
_____ (trade name), and which business I am selling to
_____ (transferee).

Signature of transferor _____

STATE OF MARYLAND, ANNE ARUNDEL COUNTY, to wit:

I HEREBY CERTIFY, that on this _____ day of _____, _____, before me, the subscriber, a Notary Public of the State and County aforesaid, personally appeared the transferor named above, and made oath in due form of law that the matters and facts stated above are true to the best of his/her knowledge, information and belief.

WITNESS my hand and Notarial Seal.

Notary Public _____ My Commission expires _____