



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

[DepClerk@annapolis.gov](mailto:DepClerk@annapolis.gov) • 410-263-7942 • Fax 410-280-1853 • TDD use MD Relay or 711 • [www.annapolis.gov](http://www.annapolis.gov)

## **Alcoholic Beverage Control Board Instructions and Application for a Change in 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 an upgrade or expansion to their License are required to contact the Department of Planning and Zoning at 410-263-7961 to confirm that it is properly zoned for the applicable License **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. All Licenses expire on April 30<sup>th</sup> of each year. The fee for Licenses issued after May 1<sup>st</sup> shall be prorated on a quarterly basis.
4. 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](http://www.annapolis.gov).
5. All matters pertaining to an Alcoholic Beverage License are governed by Article 2B 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. A cover sheet that addresses the criteria listed for approving an application and answers the zoning questions plus eleven (11) copies

Criteria established in State of Maryland code Article 2B 10-202

- Describe the public need and desire for the new type of license
- Discuss the number and location of existing licensees 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

## Zoning Questions

- Is this a new business or is the business currently operating?
  - What are the hours of operation of the business?
  - What types of Alcoholic Beverages are proposed to be served: (a) beer only, (b) beer and wine, or (c) beer, wine and liquor?
  - If this is a business currently in operation how is the current operation of the business different from the proposed operation of the business?
  - Is the type of License being applied for consistent with the actual operation of the business?
1. Original complete, signed and notarized application (*pages 1-3*), **plus** eleven (11) copies of the completed application.
  2. ***If there is a change in the Premises***, 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.
  3. ***If there is a change in the entity***, a copy of Maryland Sales & Use Tax License.
  4. ***If there is a change in the entity***, a copy of State of Maryland Traders' License.
  5. ***If there is a change in the entity***, 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.
  6. Certificate of good standing with the Maryland State Department of Assessments and Taxation, as the City Clerk deems applicable.



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**Alcoholic Beverage Control Board**

**Application for a Change in an Alcoholic Beverage License**

For the non-refundable application fee, please see the current [Fee Schedule](#).

Corporate/Legal Name of the Applicant \_\_\_\_\_

Trading as \_\_\_\_\_

Current Class of License \_\_\_\_\_ (Select from [Rules & Regulations](#) Appendix A)

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

**Addition to the license:**

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		

Expansion of licensed area (sq ft) \_\_\_\_\_

**Deletion from the license:**

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		

**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 \_\_\_\_\_

(Corporate Seal)

3. Licensee \_\_\_\_\_

**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 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, 3<sup>rd</sup> 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?      Yes      No

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		