				ſ	Office U	se Only
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 ote: • Read instructions of • File a separate app 	arefully. Incomplete or ind ilication for each type of p		e returned.		Check #	
 All applicants must 	complete Sections 1 and	10.		iana	Check Amount	t
	tions received after Octob		new applicat	ions.	Deposit Date	
¬	ou are applying for: (See			L		
ND-Non-resident Dealer	\$200.00 IT-I	ndividual Transportation	\$10.00		e of Domicile	\$!
NS-Non-resident Storage	\$500.00 IS-I	ndividual Storage	\$50.00	NC-Non-b	everage "C"	\$50
IE-Import-Export	\$75.00 PS-F	Public Storage	\$75.00	NE-Non-b	everage "E"	G
PT-Public Transportation	\$75.00 ST-S	Storage & Transportation	\$200.00	Vehicle Id	entification Card	(each) \$ 10
NW-Non-resident Winery	\$50.00 FP-F	amily Beer and Wine Facilit	y \$400.00	RD-Reside	ent Dealer	\$ 200
NB-Non-Resident Brewery	/ \$50.00 🗌 NL-N	Ion-Resident Distillery	\$100.00			
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 G. Has the applicant ever been convicted of a felony by any state or federal court? H. Does the applicant agree to conform to all the laws, rules, and regulations of the state of Maryland relating to the business proposed under this permit? I. Does the applicant authorize the Comptroller of Maryland and the his duly authorized personnel to search
the business proposed under this permit?
I. Does the applicant authorize the Comptroller of Maryland and the his duly authorized personnel to search
without warrant any vehicle, railroad cars, vessel, aircraft or premises used in the business to be conducted under this permit at any and all hours agreeable to the laws of the state of Maryland?
J. Has the applicant ever been convicted of a violation of the laws of the United States, Maryland or any other state concerning alcoholic beverages, gaming, or gambling? (If yes, explain in detail on separate paper - list offense, court, date, etc.)
K. Does the applicant have an interest in a Maryland alcoholic beverage wholesale or retail license, either issued or applied for? Provide particulars on separate attachment
L. The Annotated Code of Maryland, Alcoholic Beverages Article, Section 1-404 titled "Compliance with Workers' Compensation Act", requires the evidence of such compliance prior to the issuance of any permit by this office. The applicant hereby affirms (complete one):
a. Applicant is not an employer required to provide coverage by the Maryland Workers' Compensation Law; or
b. Applicant is an employer required to provide employee coverage by the Maryland Workers' Compensation Law and has secured such coverage. As evidence of such coverage, the following is submitted:
1. Name of insurance company
2. Policy or binder number

- A. Alcohol purchased under this permit is to be used for ____
- B. If the applicant is a hospital, educational or charitable organization qualified for Non-Beverage "E" gratis permit, set forth the nature of the organization and operation.

Section 3 - Change of Domicile Permit Applicants Complete This Section in Addition to Sections 1 & 10

A. I am changing my domicile and moving my household effects from

	Street and Number	City	County	State	Nine - digit ZIP Code
to	Street and Number	City	County	State	Nine - digit ZIP Code

B. Attach an inventory of the alcoholic beverages you wish to bring into this state showing container size, brand name, type and proof or alcoholic content. Maryland tax at the following rates should accompany this application: Wine 40 cents per gallon, Beer 9 cents per gallon, Distilled Spirits (alcoholic beverages other than wine or beer) \$1.50 per gallon up to 100 proof plus .015 cents per 1 proof over 100 proof.

Section 4 - Public Storage, Individual Storage and Family Beer and Wine Facility Applicants Complete This Section in Addition to Section 1 & 10. Non-beverage Applicants Complete This Section in Addition to Section 1, 2, & 10. Public Storage and Transportation Applicants Complete This Section in Addition to Section 1, 5, & 10.

A. If premises is in Maryland give exact site location (do not give P.O. address).

	Street and Number	City	County	State	Rear, Front, 2nd Floor, etc.
		Other site location	5		
в.	Physical description of premises applied for (gi building is to be covered by the permit if all of		ominent landmark and speci	fy whic	ch portion of the
c.	The premises is owned by				

D. Whose mailing address is ____



PERMIT APPLICATION



Yes

No

- E. If authorized by a manufacturer's license, will you be manufacturing at this location?
- F. (I, We) certify that (I am, we are) the owner(s) of the above described premises, and (I, we) hereby consent to the use of the premises in the conduct of the business to be engaged in under the permit applied for and (I, we) authorize the Comptroller of Maryland and his duly authorized inspectors to inspect and search without warrant, the premises so described at any and all hours.

Your signature below indicates explicit consent to warrantless searches of the property in compliance with the Annotated Code of Maryland, Alcoholic Beverages Article, for as long as the regulated activity is authorized under this permit at this location and said consent shall remain in effect until the permit is invalidated or until the property undergoes a change of ownership.

WITNESS (My, Our) hand(s) and seal(s) this	day of	20			
WITNESS					
		signature			
WITNESS	Owner's signature				
Section 5 - Public Transportation, Public Storage & This Section in Addition to Section 1 &		portation Applicants Complete			
A. Will you operate as a common or contract carrier trans	porting for other persons?	Yes No			
B. If your answer to question A above is "Yes," are you pr	esently committed to transport for and	other person? Yes No			
C. Will you be the owner of the alcoholic beverages to be	transported?	Yes No			
D. If your answer to question C above is "Yes," state the	source and destination of the alcoho	lic beverages hauled.			
E. Each vehicle operating under a permit must carry ide addition to the permit fee.	ntification. A fee of \$10.00 per vehicl	e must accompany this application in			
F. Number of vehicles requiring a vehicle identification of	ard at \$10.00 each: Total				
Section 6 - Non-resident Winery Applicants Comple	ete This Section in addition to Sec	tions 1 & 10.			
A. Do you produce less than 27,500 gallons of your own v	vine annually?	Yes No			
Section 7 - Non-resident Brewery Applicants Comp	lete This Section in addition to Se	ections 1 & 10.			
A. Do you produce less than 22,500 barrels of your own b	eer annually?	Yes No			

Section 8 - Resident Dealer Applicants Complete This Section in addition to Sections 1 & 10.					
A.	. Has the applicant been a resident of Maryland for at least 2 years prior to making application? Yes	No			

Section 9 - Non-Resident Distillery Applicants Complete This Section in addition to Sections 1 & 10. A. Do you produce less than 100,000 gallons of your own liquor annually?

Section 10 - All Applicants Must Complete This Section

Your signature below indicates your agreement to the terms of this Affidavit in compliance with the Annotated Code of Maryland, Alcoholic Beverages Article for as long as the regulated activity is authorized under this permit at this location, and these terms shall remain in effect until the permit is invalidated or until the property undergoes a change of ownership.

Affidavit

I do solemnly declare and affirm under the penalties of perjury that the contents of this foregoing document are true and correct to the best of my knowledge, information, and belief.

Date

Signature of owner, partner or corporate officer

Type or print name of owner, partner or corporate officer

MD Resident Since

Title



No



Maryland PERMIT APPLICATION Form EXPLANATION OF PERMITS AND FEES

