



LIQUOR CONTROL BOARD FOR HARFORD COUNTY, MD

16 North Main Street, Bel Air, MD 21014

410-638-3028 / 410-638-4970 (Fax)

www.hclcb.org



RECEIPT OF RULES & REGULATIONS

DATE: _____

NAME OF APPLICANT: _____

BUSINESS NAME: _____

I CERTIFY THE FOLLOWING:

- That I have received this date one (1) written copy of the **Rules & Regulations of the Harford County Liquor Control Board** at a cost of \$10.00.

OR

- That I will / have electronically downloaded the **Rules & Regulations of the Harford County Liquor Control Board** from the Board's website at www.hclcb.org as of this date: _____
(Date Required)

SIGNATURE OF APPLICANT

WITNESS