



APPLICATION FOR TALBOT COUNTY ALCOHOLIC BEVERAGE

Name & Telephone # of President or Vice-President:

\_\_\_\_\_

Names and Addresses of all other officers:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

1. Address / County / Telephone # / Years of Residency at this address of Applicant(s):

a. \_\_\_\_\_  
Address of Applicant

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
County of Applicant Telephone Yrs. of Residency

b. \_\_\_\_\_  
Address of Applicant

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
County of Applicant Telephone Yrs. of Residency

2. Are you a citizen of the United States?

a. \_\_\_\_\_ Yes \_\_\_\_\_ No

b. \_\_\_\_\_ Yes \_\_\_\_\_ No

3. If naturalized, when and where?

a. \_\_\_\_\_

b. \_\_\_\_\_

4. Place of birth.

a. \_\_\_\_\_ / \_\_\_\_\_  
City/County State

b. \_\_\_\_\_ / \_\_\_\_\_  
City/County State

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5. Are you over 21 years of age?

a. \_\_\_\_\_ Yes \_\_\_\_\_ No

b. \_\_\_\_\_ Yes \_\_\_\_\_ No

6. Owner(s) of the premises where the alcoholic beverages will be sold:

\_\_\_\_\_ Full Name of Owner(s) of the Premises

\_\_\_\_\_ Mailing Address of Owner(s)

\_\_\_\_\_ Telephone Number(s) of Owner(s)

7. Have you ever been convicted of a felony, misdemeanor involving moral turpitude, been adjudged guilty of violating the laws governing the sale of alcohol beverages, controlled dangerous substances, gambling in Maryland or any other state in the United States or foreign country?

a. \_\_\_\_\_ Yes \_\_\_\_\_ No

b. \_\_\_\_\_ Yes \_\_\_\_\_ No

If you answered yes, give details:

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

8. Have you ever had a license for the sale of an alcoholic beverage (a) Suspended or (b) Revoked?

a. \_\_\_\_\_ Yes \_\_\_\_\_ No

b. \_\_\_\_\_ Yes \_\_\_\_\_ No

If you answered yes, give details:

\_\_\_\_\_

9. Does any other person have a financial interest in the license applied for, or in the business to be conducted hereunder?

a. \_\_\_\_\_ Yes \_\_\_\_\_ No

b. \_\_\_\_\_ Yes \_\_\_\_\_ No

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If you answered yes, give details:

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10. Do you hold a financial interest in any other alcoholic beverage business or license in Talbot County?

- a. \_\_\_\_\_ Yes \_\_\_\_\_ No
- b. \_\_\_\_\_ Yes \_\_\_\_\_ No

If you answered yes, give details:

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11. Do you or the entity applying for the license hold or ever held a license for the sale of alcoholic beverages and, if so, in what state and at what location?

- a. \_\_\_\_\_
- b. \_\_\_\_\_

12. Does any manufacturer, brewer, distiller or wholesaler, directly or indirectly have any financial interest in the premises or business of the applicants?

- a. \_\_\_\_\_ Yes \_\_\_\_\_ No
- b. \_\_\_\_\_ Yes \_\_\_\_\_ No

If you answered yes, give details:

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13. Will you convey or grant any such interest to any manufacturer, brewer, distiller or wholesaler at the time of making this application?

- a. \_\_\_\_\_ Yes \_\_\_\_\_ No
- b. \_\_\_\_\_ Yes \_\_\_\_\_ No

14. If granted a license will you incur any indebtedness or other financial obligation, directly or indirectly, to any manufacturer, brewer, distiller or wholesaler other than for the purchase of alcoholic beverages?

- a. \_\_\_\_\_ Yes \_\_\_\_\_ No
- b. \_\_\_\_\_ Yes \_\_\_\_\_ No

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15. If granted a license will you conform to all laws and regulations relating to the business in which you propose to engage?

a. \_\_\_\_\_ Yes \_\_\_\_\_ No

b. \_\_\_\_\_ Yes \_\_\_\_\_ No

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Signature of Applicant

STATE OF MARYLAND, TALBOT COUNTY to wit:

I HEREBY CERTIFY, that on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, before me, the subscriber, a Notary Public of the State and County aforesaid, personally appeared \_\_\_\_\_, known to me (or satisfactorily proven) to be the person whose name is subscribed to the within instrument, and acknowledged that \_\_\_ executed the foregoing instrument for the purposes therein contained and further acknowledged it to be his/her act.

AS WITNESS my hand and Notarial seal.

(Seal)

\_\_\_\_\_  
Notary Public

My commission expires: \_\_\_\_\_

STATE OF MARYLAND, TALBOT COUNTY to wit:

I HEREBY CERTIFY, that on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, before me, the subscriber, a Notary Public of the State and County aforesaid, personally appeared \_\_\_\_\_, known to me (or satisfactorily proven) to be the person whose name is subscribed to the within instrument, and acknowledged that \_\_\_ executed the foregoing instrument for the purposes therein contained and further acknowledged it to be his/her act.

AS WITNESS my hand and Notarial seal.

(Seal)

\_\_\_\_\_  
Notary Public

My commission expires: \_\_\_\_\_