

ATTACHMENT #2

Applicant(s) Name : _____

Name of Business for which application is made for an Alcoholic Beverages License: _____

Address for which application is made: _____ **Election District:** _____ **Precinct** _____

NOTICE TO APPLICANT: This certificate must be signed by at least ten (10) citizens, who shall be owners of real estate and registered voters of the precinct in which the business is to be conducted. The Election Board will not certify names that are not on this form and will not certify names they cannot read. Please make copies of this attachment if needed. The Election Board is located at 215 Bay St. Easton, MD - 410-770-8099.

***NOTICE TO PETITIONERS - By signing this form you are certifying to the following statement:**

We, the undersigned, hereby certify, we are owners of real estate and registered voters of the precinct in which the business is to be conducted have been acquainted with the applicant or, in the case of a corporation, with the individuals making the application for the length of time stated and have examined the application and have good reason to believe that all the statements contained in the application are true, that they are of the opinion that the applicant is a suitable person to obtain the license, and that they are familiar with the premises upon which the proposed business is to be conducted and believe the premises are suitable for the conduct of the business of a retail dealer in alcoholic beverages.

Signature:	Address of Voting Residence:	District:	Precinct:	Years Acquainted with Applicants:
Printed Name:	Address of Property Owned:	District:	Precinct:	
Signature:	Address of Voting Residence:	District:	Precinct:	Years Acquainted with Applicants:
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***NOTICE TO PETITIONERS – Please see statement on Page 1 before signing.**

Signature:	Address of Voting Residence:	District:	Precinct:	Years Acquainted with Applicants:
Printed Name:	Address of Property Owned:	District:	Precinct:	
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