

FORM

MARYLAND **APPLICATION FOR** CLASS C 369-1 SPECIAL LICENSE

To the Maryland Alcohol, Tobacco, and Cannabis Commission:

Application is made by the undersigned under the provisions of the Annotated Code of Maryland, Alcoholic Beverages Article, for Special Class C License for use on the following (check one):

| Boat / Name of Boat | |
|---------------------------------|--|
| Plane / Name of Airline | |
| Train / Name of Railroad | |
| Check one: | |
| Beer - \$5.00 per day | |
| Beer and Wine - \$10.00 per day | |

Beer, Wine and Liquor - \$15.00 per day

I (we) submit and certify to the following information and statements as required by the Annotated Code of Maryland, Alcoholic Beverages Article.

1. APPLICANTS *

| | 1 | 2 | 3 |
|--------------------------|---|---|---|
| Name | | | |
| Residence | | | |
| Cell Phone | | | |
| Date of Birth | | | |
| Place of Birth | | | |
| Social Security Number * | | | |

* The disclosure of applicant's Social Security Number is mandatory and will be used for background investigations, including a criminal history records checks, pursuant to the Annotated Code of Maryland, Alcoholic Beverages Article.

2. The club, society or association on behalf of which the license is desired:

| Name |
|---|
| Address |
| Federal Identification Number |
| Are the applicants citizens of the United States, and over 21 years of age? Yes 🗌 No |
| Have the applicants ever been convicted of a felony? |
| Have the applicants ever had a license for the sale of alcoholic beverages revoked? \ldots Yes \Box No |
| Have the applicants ever been adjudged guilty of violating the law for the prevention of gambling in the state of Maryland and/or adjudged guilty of violating the laws governing the sale of alcoholic beverages in the state of Maryland or the United States? Yes No |
| |

| OFFICE USE ONLY |
|-----------------|
| Check Number |
| Amount \$ |
| Deposit Date |
| License # |
| Date Issued |
| Approved |
| Date |





The applicants submit herewith a statement duly executed and acknowledged by the company on whose behalf the license is desired, assenting to the granting of the license applied for, authorizing the ATCC, its duly authorized deputies, inspectors and clerks, to inspect and search, without warrant, the boat, plane or train to which such license applies, at any and all hours, provided no such inspection or search shall be made at such time or in such manner as to delay or interfere with movement of said boat, plane or train.

| _and the applicant tenders here with the sum of (| per day) \$ | in payment for the license |
|---|-------------|----------------------------|
| Signature of applicar | t | |
| Signature of applicar | t | |
| Signature of applicar | t | |

Statement of Company Required in Connection with Annotated Code of Maryland, Alcoholic Beverages Article

I hereby certify that I am the owner of (Name of boat, plane, or train) ______

_____ named in the application made by ___

to the Maryland Alcohol, Tobacco, and Cannabis Commission under the Annotated Code of Maryland, Alcoholic Beverages Article Class C Special License for the day(s) set forth herein; and that I assent to the granting of the license applied for, and that I hereby authorize the Maryland Alcohol, Tobacco, and Cannabis Commission, its duly authorized deputies, inspectors and clerks to inspect and search, without warrant, any boat, plane or train to which such license applies, at any and all hours, provided no such inspection or search shall be made at such time or in such manner as to delay or interfere with the movement of such boat, plane or train.

Affidavit

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

Signature of applicant

Company Name and Title

Third Party Checks

Affidavit

I do solemnly declare and affirm under the penalties of perjury that the contents below are true and correct to the best of my knowledge, and that I am authorized and empowered to issue a check and make payment for the license/permit fee on behalf of the applicant.

Name of Corporation; Partners of Partnership; or Individual (include Trade Name)

Complete Mailing Address

Signature of Owner, Partner or Corporate Officer

Title

Federal Identification Number and/or Social Security Number

Date

Type or print name

Date