

**APPLICATION FOR  
MANUFACTURER'S  
AND WHOLESALER'S  
LICENSES**

For the use of: (Check one)  An individual  Partnership  Corporation  Limited Liability Co.

New  Renewal \_\_\_\_\_ Date: \_\_\_\_\_  
License # \_\_\_\_\_

**CHECK CLASS OF LICENSE REQUIRED - USE A SEPARATE APPLICATION FOR EACH LICENSE**

**Manufacturer's Licenses**

**Wholesaler's Licenses**

<input type="checkbox"/>	Class 1 Distillery	Annual Fee	\$2,000.00
<input type="checkbox"/>	Class 2 Rectifying	Annual Fee	\$600.00 *
<input type="checkbox"/>	Class 3 Winery	Annual Fee	\$750.00 *
<input type="checkbox"/>	Class 4 Limited Winery	Annual Fee	\$200.00
<input type="checkbox"/>	Class 5 Brewery	Annual Fee	\$1,500.00 *
<input type="checkbox"/>	Class 6 Pub-Brewery	Annual Fee	\$500.00
<input type="checkbox"/>	Class 7 Micro-Brewery	Annual Fee	\$500.00
<input type="checkbox"/>	Class 8 Farm Brewery	Annual Fee	\$200.00
<input type="checkbox"/>	Class 9 Limited Distillery	Annual Fee	\$500.00

\* If you are going to sell to retailers, you will also need a Wholesaler's License of the proper class.

<input type="checkbox"/>	Class 1 Beer, Wine & Liquor	Annual Fee	\$2,000.00
<input type="checkbox"/>	Class 2 Wine and Liquor	Annual Fee	\$1,750.00
<input type="checkbox"/>	Class 3 Beer and Wine	Annual Fee	\$1,500.00
<input type="checkbox"/>	Class 4 Beer	Annual Fee	\$1,250.00
<input type="checkbox"/>	Class 5 Wine	Annual Fee	\$1,250.00
<input type="checkbox"/>	Class 6 Limited Wine	Annual Fee	\$50.00
<input type="checkbox"/>	Class 7 Limited Beer	Annual Fee	\$50.00
<input type="checkbox"/>	Class 8 Liquor	Annual Fee	\$100.00

- \$200.00 non-refundable application fee, made payable to Maryland Alcohol, Tobacco and Cannabis Commission, must be submitted with any initial license application.
- Upon approval of your initial application, you will be notified of the appropriate prorated license fee to submit.
- Wholesale licensees of any class using this form to apply for wholesale licenses for additional locations need not submit the \$200.00 non-refundable application fee.
- Application is made by the undersigned under the provisions of the Annotated Code of Maryland, Alcoholic Beverages Article for the Class of license as checked above, and the applicant(s) submit(s) and certify(ies) to the following information required by law.

**1. Applicants\***

(1)

(2)

(3)

Name			
Residence			
Cell Phone			
Date of Birth			
Place of Birth			
Social Security Number **			
Qualifying Maryland Resident? ***	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
MD Resident since			

- \* A license is issued to three applicants for the use of the company. If less than three applicants exist, then a license may be issued to those officers/members/partners. In such case, a letter so certifying must be submitted.
- \*\* The disclosure of applicant's Social Security Number is mandatory and will be used for background investigations, including a criminal history records check, pursuant to the Annotated Code of Maryland, Alcoholic Beverages Article.
- \*\*\* At least one applicant must be a voter and taxpayer in Maryland presently and for the two immediately preceding years. In case of partnership, all individuals must meet this requirement.

**2.** Company name and trade name \_\_\_\_\_

**3. a.** Location of proposed licensed premises (complete address, include nine digit ZIP code) \_\_\_\_\_

b. Additional location (if applicable) \_\_\_\_\_

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LICENSES**

4. Description of premises to be covered under license applied for (lot, type, size and construction of building) \_\_\_\_\_  
\_\_\_\_\_
5. Mailing Address (Street) \_\_\_\_\_  
(City, State, Zip Code) \_\_\_\_\_
6. Business phone number(s) \_\_\_\_\_ Fax Number \_\_\_\_\_  
E-mail address: \_\_\_\_\_
- a. Date business began \_\_\_\_\_
- b. Type of accounting period (calendar yr, fiscal yr, etc.) \_\_\_\_\_ Month FY begins \_\_\_\_\_
- c. If corporation or limited liability company, date chartered \_\_\_\_\_ State \_\_\_\_\_
- d. Federal Employer Identification Number \_\_\_\_\_
7. Name and address of the owner of premises \_\_\_\_\_
8. The applicants are presently the holders of the following alcoholic beverages licenses or permits issued by the state of Maryland, any other state or jurisdiction, or the United States government (if more space is needed, attach additional sheet).
- | Issuing Authority | Type  | Expiration Date | Number |
|-------------------|-------|-----------------|--------|
| _____             | _____ | _____           | _____  |
9. The applicants have previously held the following alcoholic beverage licenses or permits: \_\_\_\_\_  
\_\_\_\_\_
10. The applicants have applications pending for the following alcoholic beverage licenses or permits: \_\_\_\_\_  
\_\_\_\_\_

**11. Class 5 Brewery - Refillable Container Permit**

A Refillable Container permit authorizes the holder to sell draft beer for consumption off the licensed premises in a refillable container that:

1. Has a capacity of not less than 32 ounces and not more than 128 ounces
2. The container shall:
  - a. Be saleable
  - b. Branded with an identifying mark of the license holder
  - c. Bear the federal health warning statement required for containers of alcoholic beverages under 27 C.F.P. 16.21
  - d. Display instructions for cleaning the container
  - e. Label stating cleaning the container is the responsibility of the consumer
  - f. Label stating contents of the container are perishable and should be refrigerated immediately and consumed within 48 hours after purchase
3. The hours of sale for a refillable container permit are the same as the hours for a guided tour, a promotional event or other organized activity at the licensed premise.
4. A holder of a refillable container permit may refill only a refillable container that was branded by the permit holder.

The applicant would like to have the Refillable Container Permit option added to my Manufacturers License . . .  Yes  No

The applicant agrees to comply with the requirements for a Refillable Container . . .  Yes  No

**12. Please answer each of the following questions applicable to all individual applicants:**  
(attach explanation if "Yes" to (\*) questions):

- \*a. Has any applicant ever been convicted of a felony by any state or federal court? . . .  Yes  No
- \*b. Has any 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? . . .  Yes  No
- \*c. Has any applicant ever been denied or had revoked an alcoholic beverage license or permit? . . .  Yes  No



**This Section Must be Completed by the Owner of the Premises**

**15. Statement of owner of premises required in connection with the Annotated Code of Maryland, Alcoholic Beverages Article.**

(I/we) hereby certify, that (I am/we are) the owner(s) of property known as named in the foregoing application made to the Maryland Alcohol, Tobacco, and Cannabis Commission under the Annotated Code of Maryland, Alcoholic Beverages Article; that (I/we) assent to the granting of the license applied for, and that (I/we) hereby authorize the Maryland Alcohol, Tobacco, and Cannabis Commission, its duly authorized deputies, inspectors and clerks, the Board of License Commissioners of the jurisdiction in which the place of business is located, its duly authorized agents and employees, and any peace officer of such jurisdiction to inspect and search, without warrant, the premises upon which the business is to be conducted, and any and all parts of building in which said business is to be conducted, at any and all hours.

**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

\_\_\_\_\_  
Type or print name

\_\_\_\_\_  
Company Name and Title

\_\_\_\_\_  
Date

**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

**Maryland Alcohol, Tobacco,  
and Cannabis Commission**  
Regulatory & Research Section  
1215 E Fort Ave, Ste 300  
Baltimore, Maryland 21230  
  
**410-260-7314**  
**atcc.licensing@maryland.gov**  
**atcc.maryland.gov**

<p><b>OFFICE USE ONLY</b></p> <p>Check Number _____</p> <p>Amount \$ _____</p> <p>Deposit Date _____</p> <p>Approved _____</p> <p>Date _____</p> <p>License # _____</p> <p>Date Issued _____</p>
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**CHECKLIST FOR  
MANUFACTURER AND  
WHOLESALE LICENSE  
APPLICATION**

***I. The following MUST be submitted with your initial application. NO application will be issued until all documentation has been received and approved. Submit only the \$200.00 non-refundable application fee, if applicable. Make checks or money orders payable to Maryland Alcohol, Tobacco, and Cannabis Commission***

- \_\_\_\_\_ Application Form 367. (See notes on filing application for license on page 2.)
- \_\_\_\_\_ Occupation Record and Financial Statement Form 367-3 for each of the INDIVIDUAL applicants.
- \_\_\_\_\_ A copy of the company, corporate, or partnerships most recent financial statement. (basic balance sheet)
- \_\_\_\_\_ A copy of the Articles of Incorporation or Organization Operating Agreement. Must include an official list of all officers, members or partners.
- \_\_\_\_\_ A copy of your Federal Basic Permit or Brewers Notice or application for same.  
(NOTE: A license will not be issued until we have received your Federal Permit or Brewers Notice.)
- \_\_\_\_\_ A copy of your Sales & Use Tax License issued by the Comptroller of Maryland
- \_\_\_\_\_ A copy of zoning certification for the physical license location. Must indicate the location is properly zoned to operate as a Manufacture / Wholesale business. See notes page 2
- \_\_\_\_\_ A statement of proposed business activities.
- \_\_\_\_\_ List of the brands you propose to sell and distribute in Maryland.
- \_\_\_\_\_ Letter(s) of certification or other appropriate documentation that indicates you are the brand owner, United States importer or designated Maryland agent for said brand owner or United States importer for each brand.
- \_\_\_\_\_ A sample copy of the invoice you plan to use as a Maryland licensee. Invoice must show the licensee name, and address, which match the application.

File an appropriate security bond, or cash bond. Use the appropriate bond form(s):

_____ Form 364	Wine and Liquor Bond	\$5000
_____ Form 365-1	Beer Bond	\$1000
_____ Form 366	Wine Bond	\$1000

***II. Notes on filing applications for licenses:***

1. A license is issued to three applicants for the use of the company. If less than three officers exist (e.g. Closed Corporation), then a license may be issued to less than three individuals. In such case a letter so certifying that there are less than three officers / members or partners must be submitted.
2. At least one of the applicants must be a Maryland resident, taxpayer and registered voter currently and for the immediate two preceding years. So designate in Section 1 of form 367, Application for Manufacturer's and Wholesaler's Licenses.
3. In Section 14 of the license application, all officers/members/partners must be listed whether or not they are license applicants (attach separate sheet if necessary). However, **ONLY** the three applicants should sign under Signature of Applicants and only the applicants need fill out the Form 367-3 Occupational Record and Financial Statement of Individual License Applicant.
4. In the case of a corporation, the President or Vice-President of the company must sign under Signature of President or Vice-President, and if he/she is also an applicant, he/she must sign under Signature of Applicant.
5. The actual owner of the proposed license premises must sign the Owner of Premises section. Unless a Power of Attorney form is submitted, a real estate agent, etc., may not sign this section.
6. In accordance with ABA 1-405, we require certification from the local zoning authorities indicating your premises is properly zoned for the operation of a wholesaler's or manufacturer's alcoholic beverage business.

**CONTACT INFORMATION:**

**Maryland Alcohol, Tobacco,  
and Cannabis Commission**  
Regulatory & Research Section  
1215 E Fort Ave, Ate 300  
Baltimore, Maryland 21230

**410-260-7314**

**atcc.licensing@maryland.gov**

**atcc.maryland.gov**

**OCCUPATION RECORD  
AND FINANCIAL  
STATEMENT OF  
INDIVIDUAL LICENSE  
APPLICANT**

Full name in which license is applied for (individual, partnership, corporation or limited liability company):

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Name of individual applicant completing form: \_\_\_\_\_

**Instructions:** This form must be filed by the individual license applicant. It is not for use by the corporation or partnership. Each applicant must complete a separate form. Both pages must be completed and the form signed. If more space is needed for any section, attach additional sheets.

**I. Work history** - List below your complete work history for at least the last ten (10) years. Include full-time paid positions.

<b>Title of position held</b>	<b>From</b>	<b>To</b>	<b>Name of employer</b>	<b>Address of employer</b>

**OCCUPATION RECORD  
AND FINANCIAL  
STATEMENT OF  
INDIVIDUAL LICENSE  
APPLICANT**

**II. Personal financial statement** - List below your personal assets and liabilities. Include real estate, bank deposits, stock, bonds, personal property, loans, mortgages, etc. If none, so state.

<b>Describe assets</b>	<b>Amount</b>
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
<b>Total assets</b>	<b>\$</b> _____
<b>Describe liabilities</b>	<b>Amount</b>
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
<b>Total liabilities</b>	<b>\$</b> _____

**III. Personal investment in business**

(a) Amount to be invested by applicant:      Cash \$ \_\_\_\_\_

Equipment \$ \_\_\_\_\_

Goodwill \$ \_\_\_\_\_

Other \$ \_\_\_\_\_      Total \$ \_\_\_\_\_

(b) Is applicant's investment in business to be financed solely from assets listed in Part II above?       Yes       No

(c) If "No" to "b", list below the amount of additional monies to be invested in the business, the source of same and the name and address of any person who has undertaken or will undertake to advance monies to the applicant to assist in financing said business and the relationship, if any, of each person to the applicant.

Amount \_\_\_\_\_

Source \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

Relationship \_\_\_\_\_

The applicant whose signature appears below represents under penalty of perjury that the foregoing statements are true and agrees that they shall be made a part of the application for a license. It is understood that information reported may be used for background investigation pursuant to the Annotated Code of Maryland, the Alcoholic Beverages Article.

\_\_\_\_\_

Date

\_\_\_\_\_

Signature of applicant