

**STATE OF MARYLAND**  
**APPLICATION FOR CLASS C, BEER, WINE AND LIQUOR LICENSE**  
**APPLICATION DUE: TEN (10) DAYS PRIOR TO THE DATE OF SCHEDULED EVENT**  
**BOARD OF LICENSE COMMISSIONERS OFFICE**  
**9200 BASIL COURT, SUITE 420, LARGO, MARYLAND 20774**

**LICENSE FEE**

( ) Beer, Wine and Liquor - \$200.00 per day  
**(Limited to no more than three consecutive days in a  
single calendar year; or two consecutive years.)**  
**On and Off Sale of Beer, Wine and Liquor**

**In order to file an application the following items must be submitted (Pursuant to Section 7-101(x)):**

- Applicant must be a resident of Maryland
- Applicant must be a bona-fide nonprofit organization and provide a copy of the 501(C)(3), constitution and by-laws.
- Site Plan indicating the area within a Waterfront Entertainment Complex indicating the outlet for alcoholic beverages sales.
- Written permission from the location officials where alcoholic beverages are to be sold.
- Appropriate fee (Fees are to be paid by certified check, cashier's check or money order made payable to Prince George's County. No cash will be accepted)

**DATE AND TIME OF EVENT:**

**Date(s):** \_\_\_\_\_ **Time(s):** \_\_\_\_\_

**NAME AND ADDRESS OF ORGANIZATION:** \_\_\_\_\_  
\_\_\_\_\_

**NAME AND ADDRESS OF APPLICANT:** \_\_\_\_\_  
\_\_\_\_\_

**LOCATION OF EVENT:** \_\_\_\_\_  
\_\_\_\_\_

**DESCRIBE THE EVENT:** \_\_\_\_\_  
\_\_\_\_\_

1. Has a Band been contracted to perform at this function? Yes ( ) No ( ); If yes, furnish specific details \_\_\_\_\_
2. Indicate manner in which alcoholic beverages are being sold: CASH BAR ( ) ADMISSION CHARGE ( ) TICKET SALES ( )

\_\_\_\_\_  
Signature of Applicant (Agent)

STATE OF MARYLAND, COUNTY OF \_\_\_\_\_; SS

This certifies that on this \_\_\_\_\_ day of \_\_\_\_\_ before me the subscriber, a Notary Public of the State of Maryland, aforesaid, personally appeared \_\_\_\_\_, who made oath in due form of law that he/she is the duly authorized agent for the aforesaid non-profit organization, social club, society or association.

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

My Commission expires \_\_\_\_\_

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**OFFICIAL USE ONLY**

HOW LICENSE ISSUED: Picked up, Date \_\_\_\_\_ License # \_\_\_\_\_

Mailed, Date \_\_\_\_\_ Approved by \_\_\_\_\_