

**STATE OF MARYLAND
CALVERT COUNTY**

Application for Special Beer, Wine and Spirits (BWST) License
Article 2B §8-404.1A

NOTE: License Year: July 1, 2019 through June 30, 2020. Failure by License Holder to fully complete the Application will result in denial of the requested License.

For the use of: (check one) Individual () ; Partnership () ; Corporation () ; Unincorporated Association () ; Limited Liability Company () .

Number and Type of Class A license now held: _____

Name of License Holder(s): _____

Doing Business As/Trade Name: _____

Address of Licensed Premise: _____

Application is made by the undersigned under the provisions of Article 2B Section 8-404.1A of the Annotated Code of Maryland, as amended, for the following Special Beer, Wine and Spirits Tasting (BWST) License:

1. Class of BWST license desired:

Wine Only (\$200.00) () ; Beer and/or Wine (\$250.00) () ; Beer, Wine and Liquor (\$300.00) ()

**2. All facts and information contained in the original application or renewal form as submitted are true and unchanged to this time. Yes _____ No _____
If No, please explain _____**

3. I understand that to hold a tasting, I shall provide alcoholic beverages to consumers at no charge. Yes _____

4. I am familiar with and have read Article 2B §8-404.1A in its entirety and understand the laws concerning quantity limits, timing of tastings and length of tastings. Yes _____

I hereby attest under the penalties of perjury that the foregoing responses and information provided hereinabove is true and accurate to the best of knowledge, information and belief.

Applicant

Applicant

Applicant

Corporations: List Officers and Directors:

Name Amt of Stock owned Address Tel# Position Held

Name Amt of Stock owned Address Tel# Position Held

Name Amt of Stock owned Address Tel# Position Held

Name Amt of Stock owned Address Tel# Position Held

Signature of President/Authorized Officer

Applicant

Applicant

Applicant

Limited Liability Companies:

Name Membership % Address Tel# Position Held

Signature of Managing Member

Member Applicant

Member Applicant

Member Applicant

STATE OF MARYLAND, COUNTY OF _____, to-wit;

THIS CERTIFIES that on the _____ day of _____, 2019, before the subscriber, a Notary Public of the State of Maryland, personally appeared

the applicant(s) named in this application, and made oath in due form of law that the information contained therein is true.

Notary Public