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**APPLICATION FOR A  
CLASS 1 DISTILLERY ON-SITE PERMIT  
CARROLL COUNTY**



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**TO: Carroll County Board of License Commissioners  
Carroll County Office Building, Room 113  
225 North Center Street  
Westminster, Maryland 21157**

**RE: House Bill 549, Class 1 Distillery On-Site Consumption Permit**

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1. Application is hereby made by \_\_\_\_\_, under the provisions of  
*Name of Establishment*  
Alcoholic Beverages Articles, Section 2-202, of the Annotated Code of Maryland and the Rules and Regulations of Carroll County, for a special Class 1 Distillery On-Site Permit.
2. Applicant(s) agree that upon request, the Board of License Commissioners for Carroll County may inspect any records pertaining to the sale of mixed drinks for on-site consumption for which this license was issued.
3. This permit allows the Class 1 Distillery to sell mixed drinks for on-site consumption made from liquor that the holder of the distillery license produces mixed with other non-alcoholic ingredients.
4. The license fee of **\$500.00** is enclosed herewith. *(Please make checks payable to the Carroll County Commissioners and have all licensees sign (and have notarized) the application form. All completed applications are to be returned to the Board of License Commissioners.)*
5. The license must be renewed annually at the same fee as listed above. The license will expire on April 30 of each year.

NAME(S) \_\_\_\_\_  
Print or Type Signature

NAME(S) \_\_\_\_\_  
Print or Type Signature

NAME(S) \_\_\_\_\_  
Print or Type Signature

Name of Corporation/LLC/Partnership: \_\_\_\_\_

Trade Name: \_\_\_\_\_

Physical Address: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Email: \_\_\_\_\_

**STATE OF MARYLAND, COUNTY OF:** \_\_\_\_\_

**THIS CERTIFIES**, that on the \_\_\_\_\_ day of \_\_\_\_\_,  
20\_\_\_\_\_, before the subscriber, a Notary Public of the State of Maryland, personally appeared \_\_\_\_\_

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

**WITNESS my hand and official seal:**

\_\_\_\_\_  
Signature of Notary

\_\_\_\_\_  
My Commission Expires