

Application for Pub Tour Promoter's Permit

Board of Liquor License Commissioners for Baltimore City

PUB TOUR APPLICATION FEE (PAID AT SUBMISSION): <input type="checkbox"/> (\$50.00) PUB TOUR ISSUANCE FEE (PAID WHEN PERMIT ISSUED): <input type="checkbox"/> (\$120.00) LICENSE HOLDER PARTICIPATION FEE (\$100.00 PER LICENSEE) TOTAL AMOUNT OWED FOR LICENSE HOLDERS: _____ DATE(S) OF EVENT: _____ TOTAL DAYS: _____ TOTAL COST OF PERMIT: _____	STAFF ONLY USE – USE AT ISSUANCE: DATE: _____ INITIALS: _____ <input type="checkbox"/> FLYER <input type="checkbox"/> DOT - SPECIAL EVENTS PERMIT <input type="checkbox"/> PRIVATE BUSINESS <input type="checkbox"/> NON-PROFIT <input type="checkbox"/> IF NON-PROFIT, VERIFICATION COMPLETED
<div style="border: 1px solid black; padding: 5px; width: fit-content; margin: 0 auto;"> <p>Please note that this is a public document and upon request will be provided to the general members of the public.</p> </div>	

1. Applicant (MUST BE 21 YEARS OF AGE AND AUTHORIZED VIA LETTER/LD. TO APPLY FOR THE LICENSE BY THE ORGANIZATION/COMPANY)

(Name of Organization/Company/Promoter)	(Address.)	(City/State)	(Zip)
(full name)	(telephone no.)	(date of Birth)	E-mail (Required)
(residence) Street	Apt#	City	State Zip Code

2. Information about the Event (FILL OUT ONLY ENTRIES THAT ARE APPLICABLE)

NAME OF EVENT _____ TOTAL ESTIMATED PERSONS IN ATTENDANCE _____
PARTICIPATING LICENSE HOLDERS INVOLVED IN PUB-TOUR (FILL OUT BELOW, IF ADDITIONAL ENTRIES THEN USE ADDITIONAL PAGES, ALL LICENSEE SIGNATURES MUST BE NOTARIZED)

A) _____
 (Trade Name) (Address of Business) (Printed Name of Licensee) (Signature)

I hereby certify that on the _____ day of _____, 20____, before me, the subscriber, a notary public of the State of Maryland, in and for _____, personally appeared _____ the applicant(s) named in this renewal application made oath in due form of law that the matter and facts contained in said application are true and correct.

As witness, my hand and notarial seal.
 Signature: _____ [Notary Seal] My Commission expires _____
 Printed Name: _____

B) _____
 (Trade Name) (Address of Business) (Printed Name of Licensee) (Signature)

I hereby certify that on the _____ day of _____, 20____, before me, the subscriber, a notary public of the State of Maryland, in and for _____, personally appeared _____ the applicant(s) named in this renewal application made oath in due form of law that the matter and facts contained in said application are true and correct.

As witness, my hand and notarial seal.
 Signature: _____ [Notary Seal] My Commission expires _____
 Printed Name: _____

C) _____
 (Trade Name) (Address of Business) (Printed Name of Licensee) (Signature)

I hereby certify that on the _____ day of _____, 20____, before me, the subscriber, a notary public of the State of Maryland, in and for _____, personally appeared _____ the applicant(s) named in this renewal application made oath in due form of law that the matter and facts contained in said application are true and correct.

As witness, my hand and notarial seal.
 Signature: _____ [Notary Seal] My Commission expires _____
 Printed Name: _____