# December 16, 2021

Applicant(s): Judith Neff

Checkerspot Brewing, LLC, T/a Checkerspot Brewing,

175 W. Ostend Street, Suite B-1 21230

Class: "D" Beer License

Application to transfer ownership.

(a) Applicant(s) Information: (1) Judith Neff was born Honolulu, Hi in September of 1975. She lives in Baltimore, MD.

- (b) Ownership Breakdown: (1) Judith Neff (51%); (2) Robert Neff (43%); and see attachment for full breakdown
- (c) **Purchase Price of Business:** The purchase price of the business is \$400,000 in consideration for 35.5% of stock transfer in LLC. Upon approval by the Board, Judith Neff will hold 51% of the shares, which will make her majority owner.
- (d) Qualified Voters: Robert Neff, Dennis Nash, and David Wunder are qualified Baltimore City voters.
- (e) **Zoning**: Applicant has applied for a USE permit, for the use of the premise as a brewery with taprooms where beer brewed on premises is served.
- (f) **Corporate Standing:** Checkerspot Brewing, LLC is a MD LLC and as of 11/29/2021 is active and in good standing.
- (g) **Posting Report**: The location was posted on 11/17/2021, and checked on 11/26/2021. This meets the 10-day rule. There are 0 licensed liquor establishment(s) in the 2x2 area:
- (h) **Timeline**: Last Inspection by BLLC was performed 5/27/2021. At that time, the establishment was open and operating.
- (i) Letters of Support/Opposition: At this time the Board has no letter(s) of opposition or support.

In considering this request, under the provisions of Alcohol Beverages Article 4-210(A) the Board must consider the following factors: 1. The public need and desire for the license; 2. The number and location of existing license holders; 3. The potential effect on existing license holders of the license for which application is made; 4. The potential commonality or uniqueness of the services and products to be offered by the business of the applicant; 5. The impact of the license for which application is made on the health, safety, and welfare of the community, including issues relating to crime, traffic conditions, parking, or convenience; and 6. Any other factor that the local licensing Board considers necessary.

# **Board's Decision:**

# 2020 Application for Alcoholic Beverages License Board of Liquor License Commissioners for Baltimore City

# NEW/TRANSFER/EXPANSION/AMENDMENT(S) APPLICATION FEE - \$600.00

| Check: Yes No Are you currently s  2. Applicant B  (Fullname)  (Residence) Street  (Month/Year of Birth) Check: Yes No Are you currently s  3. Applicant C  (Fullname)  (Residence) Street  (Month/Year of Birth) Check: Yes No Are you currently s | (Tele<br>City<br>8 resident of the City of<br>(Tele<br>City | sphone no.)  State  ex: Male or Fer Bultimore?  State  ex: Nale or Fer | Zip Code                | E-mail (Require  (period of residency in Baltimore  (Place of Birth)  E-mail (Require  (period of residency in Baltimore) | City)        |
|---|---|--|-------------------------|---|--------------|
| Check:  Yes  No Are you currently a  2. Applicant B  (Full name)  (Residence) Street  (Month/Year of Birth) Check:  Yes  No Are you currently a  3. Applicant C  (Full name)  | (Tele<br>City<br>(Se<br>a resident of the City of<br>(Tele  | State  State  ex: Male or Fer Bultimore?                               | male)                   | E-mail (Require<br>(period of residency in Baltimore<br>(Place of Birth)<br>E-mail (Require                               | City)        |
| Check:  Yes  No Are you currently a  2. Applicant B  (Full name)  (Residence) Street  (Month/Year of Birth) Check:  Yes  No Are you currently a  3. Applicant C   | City<br>City<br>(Se<br>a resident of the City of            | sphoneno.)<br>State<br>ex: Male or Fer<br>Baltimore?                   | ·                       | E-mail (R e q u l r e<br>(period of residency in Baltimore<br>(Place of Birth)  | City)        |
| Check:  Yes  No Are you currently a  2. Applicant B  (Full name)  (Residence) Street  (Month/Year of Birth) Check:  Yes  No Are you currently a   | (Tele<br>City   | State<br>ex: Male or Fer   | ·                       | E-mail (Require<br>(period of residency in Baltimore  |              |
| Check: Yes No Are you currently a  2. Applicant B  (Full name)  (Residence) Street  (Month/Year of Birth)   | (Tele<br>City   | State<br>ex: Male or Fer   | ·                       | E-mail (Require<br>(period of residency in Baltimore  |              |
| Check: 12 Yes 13 No Are you currently a  2. Applicant B  (Full name)  | (Tele   | ephonena.)   | Zip Code                | E-mail (Require   |              |
| Check: Yes T No Are you currently a  2. Applicant B   |   |  |                         |   | <b>d</b> )   |
| Check: 🗵 Yes 🗖 No Are you currently s   | a resident of the Lify of                                   | Baltimore?   |                         | (FREE OF GROT)  |              |
| •   | e resident of the City of                                   | Battimore?   |                         | (Fides of GR III)   |              |
| (Month/Year of Birth)   |   | ex: Male or Fer  | nale)                   | (Place of Birth)  |              |
| 09/75   | F   |  |                         | Honolulu HI   |              |
| 2520 E Baltimore Street (Residence) Street  | Baltimore<br>City   | MD<br>State  | 21224<br>Zip Code       | (period of residency in Baltimore   | City)        |
| (Fullname)  | ·   | ephone no.)  |                         | E-mail (Require   | d)           |
| 1. Applicant A Judith Neff  | 4   |  | <b>\</b>                |   |              |
| ·   | nd/er verification from                                     |  |                         |   |              |
| ning Receipt or Corrent Certricate of Occupan<br>Please note that as per Alc. Bev. Art. 8 12-14   |   |  |                         |   | eined appro  |
| e Entertalament provided? 🖂 Yes 🖸 No. What<br>ning Receipt or Current Certificate of Occupan  |   |  |                         | <del>-</del>  | RY LJ Yes E  |
| rt of Premises Used (Note: Floors and Areas for S   |   |  |                         |   |              |
| ATTORNEY FOR THE APPLICANT: Stephan   |   |  |                         |   |              |
| BUSINESS PHONE NUMBER: 443-368-8912   | <del></del>   |  |                         |   |              |
| CORPORATE/LLG/LLP/PARTNERSHIP NAME  |   |  |                         |   |              |
| D) AMENDMENT OR EXPANSION REDUES  | ST: ADORESS OF THE LO                                       | CATION: <u>N/A</u>   |                         |   |              |
| TRANSFER OF OWNERSHIP AND LOCA  | I <b>tion</b> : Address of Pro                              | OPOSED RELOC   | CATION: N/A             |   |              |
| C) TRANSFER OF OWNERSHIP AND LOCA   | <b>ation</b> : Current Addre                                | SS OF LICENS   | ED LOCATION: <u>N/A</u> |   |              |
| B) TRANSFER OF OWNERSHIP ONLY: ADD  | DRESS OF CURRENT LIC  | ENSE: 175 W  | Ostend Street Su        | ite B-1 21230   |              |
| A) NEW LICENSE REQUEST: ADDRESS OF  | PROPOSED LOCATION:  | N/A  |                         |   |              |
|   | Please select one   | option and fill  | out the requested       | information   |              |
|   |   |  |                         | CLASS TY  | PE: <u>D</u> |
| EXPLANATION OF REQUEST: Partial owners  | ship transfer   |  |                         |   |              |
| INDICATE TYPE OF LICENSE APPLIESTED IN THE EXPLANATION OF REQUESTED Partial owners.   |   | FER 🗹 NE   | EW 🗆 EXPANSI            | ON OF PREMISES 🗆 AMENDMEN   | (S) 🗆        |

| Una the continue   | (e) boon o   | judged guilty of violeting the laws-governing the sele of any elcoholic-beverage or for gembling in any State, i  | includi            |
|--|--|---|--------------------|
|  |  | polyce guery of violating the laws guverning the size of any accition. Deval ege of the gamoning in any state, t<br>yes, merk applicent and provide explanation in edjacent space provided.<br>· C []   | IIFGMUUF           |
|  |  |   |                    |
|  | • •  | (s) has ever been adjudged guilty of any offense against the laws of the State of Maryland, any other Stat<br>the United States (Federal Crime)? □ Yes ☑ No - If yes, mark applicant and explain.   | e with             |
| oplicant A 🗆   | B 🗆  | CCI   |                    |
|  |  |   |                    |
|  |  | ad a license for the sale of alcoholic beverages in the State of Maryland? 🖸 Yes 🗖 No If yes, mark applica<br>lates that the applicant was a licensee, and the trade name).   | nt end             |
| plisant A 😿  | 8 🗆  | C 🗆   | 327.77.V.57        |
| CUITEH   | - l ten  | <b>50</b>   |                    |
|  |  |   |                    |
| Has the applice  | ne/n) n  |   |                    |
| • • •  | B 🗆  | ad a liquor license suspended or revoked? 🗆 Yes 🗹 No If yes, mark applicant and explain.<br>C 🗆   |                    |
| • • •  |  |   |                    |
| pplicent A 🗆   |  |   |                    |
| pplicent A 🗆   | B□<br>ent(s) have  | C 🗆<br>a financial interest in any other alcoholic beverage business or business for which an alcoholic beverage lic  | :ense              |
| pplicant A 🗆  Does the applicate ap  | B□<br>ent(s) have  |   | :8 <b>115</b> 8    |
| pplicant A 🗆  Does the applicate seems applied to the seems applied to   | 8 □<br>ent(s) have<br>or, granter  | C □  ### Common | :8 <b>115</b> 0    |
| pplicant A   Does the applicant A   pplicant A   | 8 □<br>ent(s) have<br>or, granter<br>B □   | C   ## Ginencial interest in any other alcoholic beverage business or business for which an elcoholic beverage lice and issued?   ## Yes   No If yes, mark applicant and explain (address of location and trade name).  ## C   ## Output  ## Description of the companies of the cattern and trade name).   |                    |
| pplicent A   Does the applices been applied for a pplicent A   Do the spouses of altimore City or a  | 8 □ ent(s) have or, granter B □ or depender  | © □  ### Financial interest in any other alcoholic beverage business or business for which an alcoholic beverage lice and issued? □ Yes ☑ No If yes, mark applicant and explain (address of location and trade name).  #### Children of any of the applicant(s) have a financial interest in any other alcoholic beverages license or business addiction in the State of Maryland? □ Yes ☑ No If yes, mark applicant and explain (address of location and trade   | in in              |
| Does the applicate the policant A   Does the applicate the policant A   Do the spouses of the policant a control of the spouses of the policant a control of the co | 8 □ ent(s) have or, granter B □ or depender  | © □  ### Financial interest in any other alcoholic beverage business or business for which an alcoholic beverage lice and issued? □ Yes ☑ No If yes, mark applicant and explain (address of location and trade name).  #### Children of any of the applicant(s) have a financial interest in any other alcoholic beverages license or business addiction in the State of Maryland? □ Yes ☑ No If yes, mark applicant and explain (address of location and trade   | ln                 |
| Does the applicate A Does the applicate A Does the applicant A Does the  | ent(s) heve<br>for, granter<br>B —<br>or depender<br>my other ju   | © □  a financial interest in any other alcoholic beverage business or business for which an alcoholic beverage lice and issued? □ Yes ☑ No If yes, mark applicant and explain (address of location and trade name).  © □  children of any of the applicant(s) have a financial interest in any other alcoholic beverages license or business is diction in the State of Maryland? □ Yes ☑ No If yes, mark applicant and explain (address of location and trade C □  | ln                 |
| Does the applicate A Does the applicate A Does the spouses of altimore City or a pplicant A Does to a policant A D  | 8  | e financial interest in any other alcoholic beverage business or business for which an alcoholic beverage lice and issued?  Yes No If yes, mark applicant and explain (address of location and trade name).  C  children of any of the applicant(s) have a financial interest in any other alcoholic beverages license or business is diction in the State of Maryland?  Yes No If yes, mark applicant and explain (address of location and trade C   ed in any other alcoholic beverages license applied, granted or issued?  Yes No If yes, please explain.   | ln                 |
| Does the applicate A Does the applicate A Does the spouses of a pplicate A Does the spouses of a pplicate A Does the applicate A Does t | ent(s) heve<br>for, granter<br>B —<br>or depender<br>my other ju   | © □  a financial interest in any other alcoholic beverage business or business for which an alcoholic beverage lice and issued? □ Yes ☑ No If yes, mark applicant and explain (address of location and trade name).  © □  children of any of the applicant(s) have a financial interest in any other alcoholic beverages license or business is diction in the State of Maryland? □ Yes ☑ No If yes, mark applicant and explain (address of location and trade C □  | ln                 |
| Does the applicate A Does the applicate A Does the spouses of the  | 8   ent(s) have or, granter b   ent(s) have or dependently other juices   enteres   en | e financial interest in eny other alcoholic beverage business or business for which an elcoholic beverage lice and issued?   Yes   No If yes, mark applicant and explain (address of location and trada name).  C   children of any of the applicant(s) have a financial interest in any other alcoholic beverages license or business is diction in the State of Maryland?   Yes   No If yes, mark applicant and explain (address of location and trada   C  | in<br>nente        |
| Does the applicate A Does the applicate A Does the spouses of the  | 8   ent(s) have or, granter b   ent(s) have or dependently other juices   enteres   en | e financial interest in any other alcoholic beverage business or business for which an alcoholic beverage lice and issued?  Yes No If yes, mark applicant and explain (address of location and trade name).  C  children of any of the applicant(s) have a financial interest in any other alcoholic beverages license or business is diction in the State of Maryland?  Yes No If yes, mark applicant and explain (address of location and trade C   ed in any other alcoholic beverages license applied, granted or issued?  Yes No If yes, please explain.   | in<br>nente        |
| Does the applicate A Does the applicate A Does the spouses of altimore City or a pplicant A Does the licent A Does the l | 8   ent(s) have for, granter   B   ent(s) have for dependent   enteres   ent | a financial interest in any other alcoholic beverage business or business for which an elcoholic beverage lice and issued?   Yes No If yes, mark applicant and explain (address of location and trade name).  C   children of any of the applicant(s) have a financial interest in any other alcoholic beverages license or business is diction in the State of Maryland?   Yes No If yes, mark applicant and explain (address of location and trade C   ed in any other alcoholic beverages license applied, granted or issued?   Yes No If yes, please explain.  C   rently open and operating?   Yes No If no, then provide date of last day of operation of the establishmen personally or through an antity — have any indebtedness or other financial obligations to any manufacture  | in<br>neme         |
| Does the applices been appliced to pplicent A   Do the spouses of a pplicent A   Are you finance pplicent A   Is the licensed of the a proper to the pplicent A   Is the licensed of the a pplicent A   Do any of the a proper to the a pplicent A   Do any of the a proper to the a pplicent A   Do any of the a  | ent(s) have or, granter B  or depender on depender eny other in B  or pplicant(s) or wholese   | a financial interest in any other alcoholic beverage business or business for which an elcoholic beverage lice and issued?   Yes  No If yes, mark applicant and explain (address of location and trade name).  C   children of any of the applicant(s) have a financial interest in any other alcoholic beverages license or business is soliction in the State of Maryland?  Yes  No If yes, mark applicant and explain (address of location and trade C   ed in any other alcoholic beverages license applied, granted or issued?  Yes  No If yes, please explain.  C   rently open and operating?  Yes  No If no, then provide date of last day of operation of the establishmen are at the time of making this application?  Yes  No If yes, please explain.  Yes, please explains and the time of making this application?  Yes  No If yes, please explain.  | in<br>neme<br>srt. |
| pplicent A   Does the applices been applied for a pplicent A   Do the spouses of altimore City or a pplicent A   Are you financing pplicent A   Is the licensed of the a rewer, distiller, i   | ent(s) have or, granter B  or depender on depender eny other in B  or pplicant(s) or wholese   | a financial interest in any other alcoholic beverage business or business for which an elcoholic beverage lice and issued?   Yes No If yes, mark applicant and explain (address of location and trade name).  C   children of any of the applicant(s) have a financial interest in any other alcoholic beverages license or business is diction in the State of Maryland?   Yes No If yes, mark applicant and explain (address of location and trade C   ed in any other alcoholic beverages license applied, granted or issued?   Yes No If yes, please explain.  C   rently open and operating?   Yes No If no, then provide date of last day of operation of the establishmen personally or through an antity — have any indebtedness or other financial obligations to any manufacture  | in<br>neme<br>srt. |

|   | Address   | Phon  | :   | Email  |
|---|---|---|---|--|
| Judith Neff   | 2520 E Baltimore St 212   | 224   |   | the state of the s |
| Applicants Applying as Business Entities - (list all authorized persons.) Places note the<br>places attach a list of the names and ada<br>bacar paration, partnership agraement on  | et all licensees MUST have a FMANCU<br>tress of all outstanding stock holders | AL INTEREST in the Roomee ep  | olled for se per Alc. Bev. )  | trt. § 4-108 (a)(ll). If pacessary,  |
| <sub>I) NAME:</sub> Judith Neff   | AODRESS: 2520 E Bal   | timore St 21224   | ™E.Mng Mem  | belgor stock HELD: 51  |
| 2) NAME: Robert Neff  | ADDRESS: 2520 E Bal   | timore St 21224   | <sub>∏∏£:</sub> Mng Mem   | be %OF STOCK HELD: 43  |
| 3) NAME: 5788   | ADDRESS: 2520 E Bal   | invation  |   | %OF STOCK HELD:  |
| 4 NAME:   | ADDRESS:  |   | _MTLE:  | %OF STOCK HELD:  |
| *Extract from Law: If any affidavit or out<br>guilty of parjury. And upon indictment i  |   |   |   | hall be deamed   |
|   | Delaharan 2 di  | dat d   |   |  |
| Signature of Applicant A  Thereby certify that on the 19 day of the personally apperatus that the matter and facts contained in said  Signature: A  Printed Name: Standard (J.  | application are true and correct. As wi                                       | tness, my hand and notarial se  | al.   | in end in end in end dication made ceth in due form of COSLEMAN, IR.  ATE OF MARYLAND  THE LITTLE TO THE STREET OF MARYLAND  THE S |
| hereby certify that on the 19 day of New York Supersonally apperains the metter and facts contended in said Signature: 4  | application are true and correct. As wi                                       | tness, my hand and notarial se  | al.   |  |
| hereby certify that on the 9 day of sersonally apperature and facts contained in said Signature: 4 Applicant B hereby certify that on the day of  | application are true and correct. As wi                                       | tness, my hand and notarial se<br>Motary Seal) My Commission ex<br>the subscriber, a notary public  | olies <u>4785-ANWP</u> MOTARY PUBLIC STATE  TO COMMITTEE OF   | OGLEMAN, JR. ATE OF MARYLAND INC. ILLIAN TO IN and   |
| hereby certify that on the 9 day of sersonally apperature and facts contained in said Signature: 4 Applicant B hereby certify that on the day of  | application are true and correct. As wi                                       | tness, my hand and notarial se<br>Motary Seal) My Commission ex<br>the subscriber, a notary public  | olies <u>4785-ANWP</u> MOTARY PUBLIC STATE  TO COMMITTEE OF   | OGLEMAN, JR. ATE OF MARYLAND INC. ILLIAN TO IN and   |
| hereby certify that on the day of bersonally appe hat the matter and facts contained in said day of day of day of personally appe hat the matter and facts contained in said  | application are true and correct. As wi                                       | tness, my hand and notarial se<br>Motary Seal) My Commission ex<br>the subscriber, a notary public  | pires <u>ATESTAN W P</u> ***CHARY PUBLIC STATE  ***CHARMING SC ENCOR  of the State of  blicant(s) named in this app | CIGLEMAIN, JR. ATE OF MARYLAND Ires 11/16/21  in end dication made oath in due form o  |
| hereby certify that on the day of bersonally appe hat the matter and facts contained in said day of day of day of day of hat the matter and facts contained in said day of personally appe hat the matter and facts contained in said day of   | application are true and correct. As wi                                       | thess, my hand and notarial se<br>Notary Seal] My Commission ex<br>the subscriber, a notary public<br>the ap<br>tness, my hand and notarial se<br>Notary Seal] My Commission ex | pires <u>ATESTAN W P</u> ***CHARY PUBLIC STATE  ***CHARMING SC ENCOR  of the State of  blicant(s) named in this app | CIGLEMAIN, JR. ATE OF MARYLAND INC. 11/16/22  in end dication made oath in due form of   |
| hereby certify that on the 19 day of hereby certify that on the personally appe that the matter and facts contained in said   | application are true and correct. As wi                                       | thess, my hand and notarial se<br>Notary Seal] My Commission ex<br>the subscriber, a notary public<br>the ap<br>tness, my hand and notarial se<br>Notary Seal] My Commission ex | pires <u>ATESTAN W P</u> ***CHARY PUBLIC STATE  ***CHARMING SC ENCOR  of the State of  blicant(s) named in this app | CIGLEMAIN, JR. ATE OF MARYLAND INC. 11/16/22  in end dication made oath in due form of   |
| hereby certify that on the Personally apperature:  Printed Name: Strong day of personally apperature of Applicant B hereby certify that on the day of personally apperature:  Printed Name: Strong day of personally apperature:  Printed Name: Signature: Dignature: Dignature: Dignature: Dignature of Applicant C day of Applicant C day of Dignature of Applicant C day of Dignature of Dignature day of | application are true and correct. As wi                                       | the subscriber, a notary public the subscriber, a notary public the aptness, my hand and notarial set the subscriber, a notary public the subscriber, a notary public           | of the State of   | CIGLEMAN, JR. ATE OF MARYLAND INC.  INC.  IN END  IN END  IN END  IN END  IN AND  IN AND   |
| hereby certify that on the 9 day of personally apperature of Applicant B hereby certify that on the day of personally apperature of Applicant B hereby certify that on the day of personally apperature:  Printed Name:  Signature:  Printed Name:  Signature:  Printed Name:   | application are true and correct. As wi                                       | the subscriber, a notary public the subscriber, a notary public the aptness, my hand and notarial set the subscriber, a notary public the subscriber, a notary public           | of the State of   | CIGLEMAN, JR. ATE OF MARYLAND INC.  IN I   |

# CHECKERSPOT LLC

# INVESTORS CONTINUATION SHEET

| Kristen Bates 2933 Eastern Avenue Baltimore MD 21224          | Member    | 1% |
|---|-----------|----|
| Thomas & Kelly Neff 2106 Knights Squire Road Mt. Airy, MD 217 | 71 Member | 1% |
| Cindy & John McCauley 434 Rose Ave Mill Valley, CA 94941      | Member    | 1% |
| Suzanne Amsbaugh & Dana Proulx 1011 Avery Ct SW Vienna V      | A 22180   |    |
|   | Member    | 1% |
| Jennifer Brown 1023 N Calvert Street #A Baltimore MD 21202    | Member    | 1% |
| Michael Nugent & Denise Bateman 729 E Fort Ave Baltimore M    | D 21230   |    |
|   | Member    | 1% |

| Name and Address of the owners of the premise/landlord: Spring Garden Associates, L. Phone Number  |
|--|
| Baltimore, MD 21209  |
| STATEMENT OF OWNER OF PREMISES REQUIRED IN CONNECTION WITH ALCOHOLIC BEVERAGES LAW OF MARYLAND   |
| WEN Samon Conceder Americal at 11 c  |
| That (I am we are) the events of the property leasted to 17 ( ) of the country.  |
| That (I am we are the owner(s) of the property located at 175 w. Ostend St. Suite B1. Baltimore. City with a Zip   |
| Code of 21230 , which is named in the present application made to the Board of Liquor License Commissioners of Baltimore City  |
| under the Alcoholic Beverage Laws of Maryland and assent to the granting of the license applied for and hereby authorize the State Comptender, blooming  |
| outy authorized deputies, inspectors and clerks, the board of Liquor License Commissioners of Baltimore City its duly authorized agents and  |
| ampleyees, and any peace officer of the City of Baltimore and State of Maryland, to inspect and search, without warrant, the greinise of the City of Baltimore and State of Maryland, to inspect and search, without warrant, the greinise of the City of Baltimore and State of Maryland, to inspect and search, without warrant, the greinise of the City of Baltimore and State of Maryland, to inspect and search, without warrant, the greinise of the City of Baltimore and State of Maryland, to inspect and search, without warrant, the greinise of the City of Baltimore and State of Maryland, to inspect and search, without warrant, the greinise of the City of Baltimore and State of Maryland, to inspect and search, without warrant, the greinise of the City of Baltimore and State of Maryland, to inspect and search without warrant and the greinise of the City of Baltimore and State of Maryland, the city of Baltimore and State of Maryland, the City of Baltimore and State of Baltimore and Baltimor |
| the business is to be conducted, and any and all parts of the building in which said business is to be conducted at any and all hours.   |
| 31787  |
|  |
| Signatures of the United States of the United State |
| Signature of Uwner of the Property   |
| thereby sartify that on the The day of October 2021 before me the subscriber a rotary public of the State of Mary Panatry whind the operanally appeared Samuel KHimmelrich Jr  |
| gersanally appeared Samuel Kittian melaich Jc  |
| andland property owner named in this application made oath in due form of law that the matter and facts contained in said application are true and correct.  |
|  |
| As witness, my h <b>and and</b> notional seat.   |
| Hotary Signature Deborah A. Johnson  [Notary Printed Hama: Deborah A. Johnson  |
| Notary Printed Name: Deborah A. Johnson  |

The following certificates must be signed by at least 3 persons.

We, the undersigned citizens, real estate owners and registered voters in the City of Baltimore in which the business covered by the present application is to be conducted. We certify that the qualifying applicant(s) is/are personally known to us and is a resident of Baltimore City and a resident of the State of Maryland at the time of this application.

| Maigras<br>2      | Althese<br>( Table ) And Andrews                                 | Signature |                  | Charles have |
|-------------------|--|-----------|------------------|--------------|
| Ryan M. Cree      | 1166 Narticoke St.<br>Baltimore M) 21230                         | Molad     | 1/2/82           | il .         |
| Tan Share Noronta |  |           | 3/83             | H Jeors      |
| Robert D. MAR     | 2520 E. Baltmar St.<br>Baltmore, ND 21224<br>1841 S. Chaples St. | DLD.W     | G/ <b>1</b> 76   | 15 years     |
| DEN'S E. NASH     | BAHMORE MDANSO   | Hun Charl | 9/0/68           | 10 Years     |
| David M. Wunder   | 2512E. Baltimorey<br>Baltimore, MD 21224                         | Duist     | OG/ <b>1</b> /74 | 12 years     |

Board of Liquor License Commissioners for the City of Baltimore I North Charles Street, Suite 1500, Baltimore, Maryland 21201 Phone: 410-396-4377 Fax: 410-396-4382

Please note that this is a public document and upon request will be provided to the general members of the public.



# **Liquor Board System**

Version 1.0

Annual-Renewal ♥ | License-Transfer ♥ | One-Day ♥ | Add New License ♥ | Query ▼

# License Detail

Close the License

Print License

Print Renewal Letter

<< Go Back

License Info

License Num: D 004

Cert Num: 0658

Fee: \$150.00

Status: Renewed

License Date:5/1/2021

License Year: 2021

CR Number: 16558047

Payment Date: 05-22-21

2020 - 2021 TPP Paid 🗆

2021 Trader's License 🗌

Update Info

Click to Start License Renewal

Add Adult Entertainment License

Add New Adult Entertainement License

### Location

Corp Name: CHECKERSPOT BREWING, LLC Trade Name: CHECKERSPOT BREWING

Zone Code: 27

Phone: 410-591-5527

City: BALTIMORE

Block Num: 175

Street: OSTEND STREET WEST SUITE B-1 State: MD Zip: 21230

CR Number: 16558047

Portion of Business Used:

BREWERY WITH TAPROOMS WHERE BEER BREWED ON PREMISES IS SERVED, REFERENCE

BUILDING PERMIT COM 2018-0331.

Restriction:

| Edit the License Location Info | Alternate Mailing Address |
|--------------------------------|---------------------------|
|--------------------------------|---------------------------|

### **License Owners**

|            | P 1111-1-1-0 |                          |           |       |       |        |              |
|------------|--------------|--------------------------|-----------|-------|-------|--------|--------------|
| First Name | Last Name    | Street                   | City      | State | Zip   | Action | Change Owner |
| STEPHEN    | MARSH        | 92 WILL-O-BROOK ROAD     | PASADENA  | MD    | 21122 | Edit   | Remove Owner |
| JUDITH     | NEFF         | 2520 E. BALTIMORE STREET | Baltimore | MD    | 21224 | Edit   | Remove Owner |

# **Comments**

| Date       | Comment  | Action |
|------------|--|--------|
| 11/03/2021 | Application for transfer of ownership filed on behalf of Checkerspot Brewing, LLC T/a<br>Checkerspot Brewing, Judith Neff on 11/2/2021 /kk   | Delete |
| 06/22/2020 | Issued Outdoor License extension starting from June 22, 2020 until the governor has lifted his executive order; Housing permit #TMP2020-50129/sb   | Delete |
| 07/23/2019 | The Expansion application check #385 was processed to wrong address 4800 Curtis Ave. on 06/27/19, inv. #117311. I noticed the error after the check was given to finance for deposit/mb.   | Delete |
| 07/11/2019 | 6/27/2019 - Public Hearing Re: Request to expand premises to include 2nd Floor taproom -<br>APPROVED (3-0 vote)/jr   | Delete |
| 07/01/2019 | Application to expand premise to include 2nd floor filed on behalf of Checkerspot Brewing, LLC T/a Checkerspot Brewing, Judith Neff and Stephen Marsh on 5/7/19 - May 2019 Ad. (Due to the ransomware attack that effected City Servers on 5/7/2019, the BLLC was not able to enter receipt of this application) /kk | Delete |
| 07/01/2019 | License expansion transfer completed; Invoice #117453/jr   | Delete |
| 06/28/2019 | Due to the ransomware attack that effected City Servers on 5/7/2019, the BLLC was not able to enter receipt of this expansion application until today's date. The expansion application was received and processed by the BLLC on 5/7/2019. Please check invoice # 117418k/r   | Delete |
| 06/22/2019 | Due to the ransomware attack that effected City Servers on 5/7/2019, the BLLC was not able to enter licensee issuance information until 6/22/2019. The license was initially issued on 5/7/2019/jr   | Delete |
| 09/20/2018 | New Class "D" Brewery License issued to Checkerspot Brewing LLC on 09/20/18/sb   | Delete |

Print History (Print Card)

| License num: D 004 | Address: 175 OSTEND STREET WEST SUITE B- |
|--------------------|--|
|--------------------|--|

Trade Name: CHECKERSPOT BREWING

| Comment: |             |  |
|----------|-------------|--|
|          |             |  |
|          |             |  |
|          |             |  |
|          | Add Comment |  |

**Hold Info** 



Department ID Number:

W17233149

# CHECKERSPOT BREWING, LLC: W17233149

| Business Name:   |
|--|
| CHECKERSPOT BREWING, LLC   |
| Principal Office:  |
| 2520 E. BALTIMORE ST.  |
| BALTIMORE MD 21224   |
| Resident Agent:  |
| JUDITH NEFF  |
| 2520 E. BALTIMORE ST.  |
| BALTIMORE MD 21224   |
| Status:  |
| ACTIVE   |
| Good Standing:   |
| THIS BUSINESS IS IN GOOD STANDING  |
| Business Type:   |
| business type.   |
| DOMESTIC LLC   |
|  |
| DOMESTIC LLC   |
| DOMESTIC LLC  Business Code:   |
| DOMESTIC LLC  Business Code: 20 ENTITIES OTHER THAN CORPORATIONS   |
| DOMESTIC LLC  Business Code: 20 ENTITIES OTHER THAN CORPORATIONS  Date of Formation/ Registration:   |
| DOMESTIC LLC  Business Code: 20 ENTITIES OTHER THAN CORPORATIONS  Date of Formation/ Registration: 05/04/2016  |
| DOMESTIC LLC  Business Code: 20 ENTITIES OTHER THAN CORPORATIONS  Date of Formation/ Registration: 05/04/2016  State of Formation:                       |
| DOMESTIC LLC  Business Code: 20 ENTITIES OTHER THAN CORPORATIONS  Date of Formation/ Registration: 05/04/2016  State of Formation: MD                    |
| DOMESTIC LLC  Business Code: 20 ENTITIES OTHER THAN CORPORATIONS  Date of Formation/ Registration: 05/04/2016  State of Formation: MD  Stock Status:     |
| DOMESTIC LLC  Business Code: 20 ENTITIES OTHER THAN CORPORATIONS  Date of Formation/ Registration: 05/04/2016  State of Formation: MD  Stock Status: N/A |

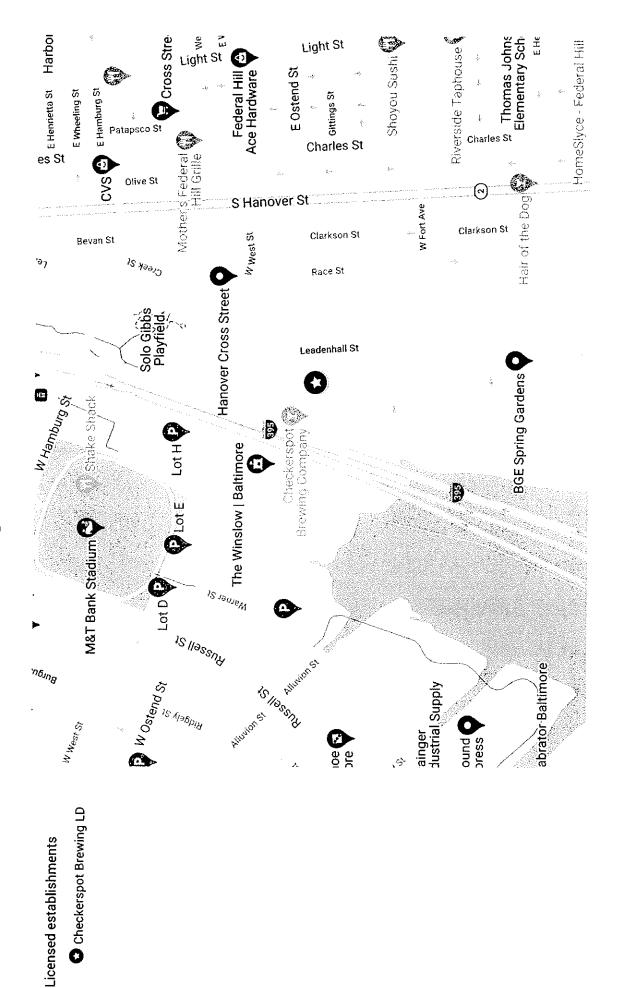
# PROPOSED LOCATION: 175 W. Ostend St. Suite B-1

# MAP SUMMARY (RECAPITULATION)

| TOTAL ESTABLISHMENTS IN MAP AREAO |   |
|-----------------------------------|---|
| "A" BEER & WINE                   |   |
| "B" BEER & WINE                   |   |
| "C" BEER & WINE                   | _ |
| "D" BEER & WINE                   | - |
| "A" BEER, WINE & LIQUOR           | _ |
| "A-2" BEER, WINE & LIQUOR         | - |
| "B" BEER, WINE & LIQUOR           | _ |
| "C" BEER, WINE & LIQUOR           |   |
| "D" BEER, WINE & LIQUOR           | _ |
| "BD7" BEER, WINE & LIQUOR         | _ |
| ARENA                             |   |
| HOTEL/MOTEL                       |   |
| RACING                            |   |
|                                   |   |

PREPARED BY: Steven Han DATE: 11/23/21

# 175 W. Ostend Street Suite B-1



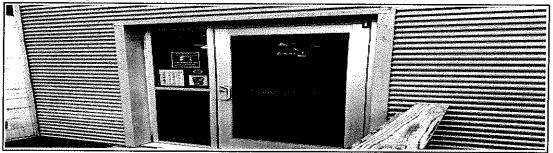
# **Board of Liquor License Commissioners**

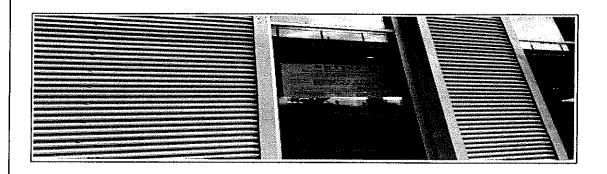
For Baltimore City
1 North Charles Street, 15th Floor
Baltimore, Maryland, 21201

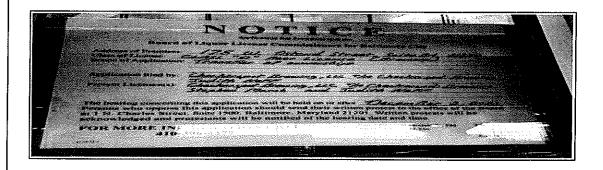
# **INSPECTORS REPORT - TRANSFERS/NEW APPLICATIONS**

| Licensee Information (Trade Name)  | Checkerspot Brewing             |
|--|---------------------------------|
| Corporation Name   | CHECKERSPOT BREWING LLC         |
| Location Address.  | 175 W. Ostend st Suite B-1      |
| License Type:  | Class "D" Beer, Wine and Liquor |
| Is the establishment open and operating in a safe and sanitary manner?<br>(If not open, not in comments - CLOSED or NOT OPERATING) |                                 |
| Is the location within 300 feet of Church and/or School?   | No 🗸                            |
| Date Posted?   | 11/17/2021                      |
| Estimated Date of Removal?   | 11/26/2021                      |
| Are there any other licensed establishments within a two block radius?   | No 🗸                            |
| Other licensed locations - Describe/Note:  | <u> </u>                        |
| N/A  |                                 |
| Comments and Follow-up Items(s) (please note any issues or concerns abo  | out the location!               |
| Partial ownership transfer   | at the locationy.               |
| ·  |                                 |
| ·  |                                 |
|  |                                 |
|  |                                 |
|  |                                 |
|  |                                 |

Insert Photo of Sign and location:







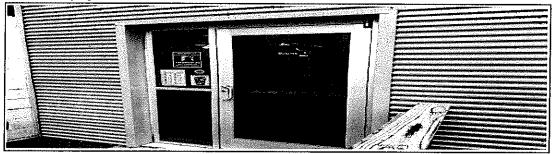
|     | spector Name                 |  | Date and Time |            |  |
|-----|------------------------------|--|---------------|------------|--|
| i:t | 0#.w baltimore\steven.han    |  | 11/23/2021    | 1:59:31 PM |  |
| Na  | nme of Licensee (if present) |  |               |            |  |
|     |                              |  |               |            |  |

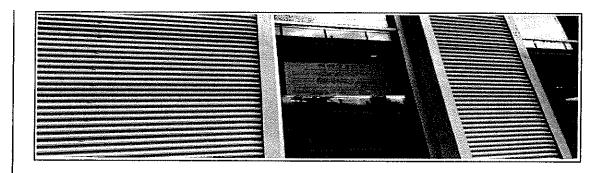
# **Board of Liquor License Commissioners**

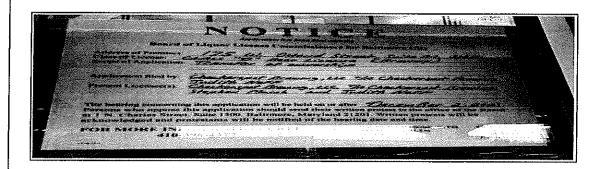
For Baltimore City 1 North Charles Street, 15th Floor Baltimore, Maryland, 21201

| POSITING SIGN   | S REPORT                    |
|---|-----------------------------|
| Applicant(s) Name:  | Judith Neff                 |
| Address of Premises:  | 175 W. Ostend St. sulte B-1 |
| Inspector:  | i:0#.w baltimore\steven.han |
| Date Posted:  | 11/17/2021                  |
| Time Posted:  |                             |
| Date Rechecked:   | 11/26/2021                  |
| Time Rechecked:   |                             |
| Manager or Owner when sign posted:                          |                             |
| Summary on location of sign posted:                         |                             |
| FRONT WINDOW  |                             |
|   |                             |
| Summary on location of sign rechecked:  Was up for ten days |                             |
|   |                             |

Insert Photo of Sign and location:







Attach Additional Photos

Approve Disapprove

# きようこうと

Board of Liquor License Commissioners for Baltinane Tr

Tes of Promises: 175 W. Ostend Street Suite A-Tiense: CLASS "D" Beer License Coldoplication: Transfer of ourverships

Checkerspot Brewing, LLC The Checkerspot Brewin tion filed by: Checkerspot Brewing, LLC The Checkerspot Sta Stephen Marsh and Judith NeFF Judith NeFF

Persons who oppose this application should send their written protest to the office of the Bear The hearing concerning this application will be held on or after Tlecen Ser. 2, 202 at I N. Charles Street, Suite 1500, Baltimore, Maryland 21201. Written protests will be actionaledged and protestants will be notified of the hearing date and time.

Hon. Albert & Millicolan - L. Esq. Auron Committee Esq.

# **BLLC Compliance Inspection**

|   | ricewas illinustrion                        |
|---|---|
| Address:  | 175 OSTEND STREET WEST SUITE B-1 21230      |
| Trade Name:                                     | CHECKERSPOT BREWING                         |
| Corporation Name                                | CHECKERSPOT BREWING, LLC                    |
| Type of License:                                | Distillery                                  |
| Date/Time of Inspection:                        | 7/30/2021 1:44:18 PM                        |
| Manager/Licensee                                |   |
| Open/Closed:                                    | Open/Closed Status  Closed   ✓              |
| Closed Date:                                    | 7/30/2021                                   |
| Clean and Free of Debris:                       | N/A   Susiness Records                      |
| Traders License:                                | N/A   ◆                                     |
| Alcohol Awareness Certification Date<br>Issued: |   |
|   | Public Safety                               |
| Exits Marked, Unobstructed:                     | N/A 🗸                                       |
| Fire Capacity:                                  |   |
| Outdoor Seating Capacity:                       |   |
| License is Valid:                               | Adult Entertainment - If Applicable  N/A  ✓ |
| Violation Issued:                               | Violations No   ✓                           |
| Violations Noted:                               |   |

|                                 | Wrap-Up                                    |
|---------------------------------|--|
| Instructions Given to Licensee: |  |
|                                 |  |
|                                 |  |
|                                 |  |
| Inspector's Comments:           | closed at the time of inspection 7/30/2021 |
|                                 |  |
|                                 |  |
|                                 |  |
| Photo Taken:                    |  |
|                                 | CHECKERSPOT                                |
|                                 |  |
|                                 | P ST. ST.                                  |
|                                 |  |

Attach Additional Photos

Owner Email:

Submitted by Inspector i:O#.w|baltimore\steven.han

# **Certificate of Occupancy**

THIS WRITTEN INSTRUMENT, WHEN PROPERLY VALIDATED, CONSTITUTES AUTHORITY FOR DOING OR RECEIVING THE THINDS INDICATED BY THE ITES OR CHARGES SHOWN IN THE APPROPRIATE SPACES DELOW. ANY AND ALL THINDS TO BE DONE OR RECEIVED IN STRICT COMPLIANCE WITH THE APPLICATION HEREITOFOR FILED IN THIS DEPARTMENT FOR THE ALTHORITY CONTAINED HEREIT, INCLUDING ANY AND ALL APPROVED DRAWINGS AND GIVE AND OTHER DATA OR INFORMATION ATTRIBUTED THEREIT, INCLUDING ANY AND ALL LAWS, ORDINANCES, BURLES AND RECEIVED IN THE CITY OF A STRINGAL AND THE STATE OF MARYLAND, WARNING IT IS UM AWFULT TO WORK BETWEEN THE HOURS OF TOO PM AND THE DATA OF A STRINGAL AND THE STATE OF MARYLAND, WARNING IT IS UM AWFULT TO WORK BETWEEN THE HOURS OF TOO PM AND THE DATA OF TH

WARNING: IT IS UNLAWFUL TO CONCEAL ANY WORK UNTIL INSPECTED AND APPROVED BY THIS DEPARTMENT.

| WARD | SEC. | BLOCK | LOT | ISSUE DATE | DISTRICT |
|------|------|-------|-----|------------|----------|
| 23   | 07   | 0974  | 001 | 6/10/19    | 901      |

PROPERTY ADDRESS:

175 W OSTEND ST B-1

OWNER:

SPRING GARDEN, LLC

ADDR:

1340 SMITH AVENUE SUITE 200 BAL

LESSEE:

**CHECKER SPOT BREWING** 

ADDR:

175 W. OSTEND ST B-1 BALTIMORE M

No: USE2018-52885

LAND USE CODES 3-56 0000 0000 0000

BREWERY WITH TAPROOMS WHERE BEER BREWED ON PREMISES IS SERVED. REFERENCE BUILDING PERMIT COM 2018 - 0331.

| \$60;-@q\$60k-260k-159690-400560    | 1601-000-00-2000-15009-400-400           | 3001-800000-2504-158094-458489        | 1961-009000-2500-158301-400490              | 100;-600000-2696-153362-40049        |       |
|-------------------------------------|--|---------------------------------------|---|--------------------------------------|-------|
| PER. INSP.                          | MISC                                     | CH. USE                               | NEW BLDG.                                   | 0                                    |       |
|                                     |  | 45                                    | 5.00  | ADDITIONS                            |       |
| 1501-000000-2600-158362-400450      | 1001-000989-2500-158304-460490           | 1801-800000-2600-15x394-400499        | 1001-000000-2600-158800-400500              | 1601-000000-2660-158901-400510       |       |
| ALTERATIONS                         | REPAIRS                                  | MESC, CONST.                          | ELECT.                                      | HYDRONIC STLAM HEAT                  |       |
| 166 (-674880 k.26(8 k.458502-4185)) | (ca) -18/48c4(-24(d-15)x4*(2-444)51))    | 5801-000001-2631-158902-494549        | \$401_\$#\$###\~2663\~\\\$\\$\\$\$\\$\\$\\$ | [18]:-1.2488884-26645-1588-6-400\$10 |       |
| DISTRIB FXH                         | AIR COND                                 | DISP FANES                            | FIRE  | FUEL-BURNING EQUIPMENT               |       |
| 11015-60-0000-2600-150300-406530    | 1961-949000;-2 <i>66</i> 4-159604-469520 | 106.1-000000-3900-157900-400520       | 1001-000000-5700-508801-401813              | 1601-000000-1500-102500-400330       |       |
| ELEVATOR                            | PLUMBING                                 | S.A.E.CONTROL                         | CHAP  | ±AX                                  |       |
|                                     | 0.0                                      | 00                                    |   |                                      | 3.00  |
| 1/00/40/00009-2600-1583/04-400490   | (00)-00(880-2886-1)989-4(8640            | 1001-08/500-3608-15/44/0-4/0349       | 1001-06060-2600-156009-400450               | TOTAL FLES                           |       |
| PAZING                              | FILING FEE                               | CON YOUR AGE/TULL CONTILINION TO DONS | PENALTY                                     | 1                                    |       |
|                                     | 50.0                                     | n l                                   | İ   | 1                                    | 98.00 |

THE AUTHORITY CONTAINED HEREIN MAY NOT BE VALIDLY EXERCISED UNTIL AND AFTER ALL OF THE FEES APPEARING HERE HAVE BEEN PAID.

DEFARTMENT OF HOLSING & COMMENTY DEVILOPMENT Please be advised that there is a presumption of lead-based paint in properties constructed prior to 1950. Protect workers and tenants by using the lead-safe work practices found in the Code of Maryland Regulations Section 26.02.07.

THE AUTHORITY CONTAINED HEREIN DOES NOT AUTHORIZE THE PERFORMANCE OF ANY WORK IN, ON, UNDER OR OVER ANY STREET, HIGHWAY, ALLEY, SIDEWALK OR ANY OTHER PUBLIC WAY, UNLESS PERMISSION TO DO SO HAS BEEN FIRST SECURED FROM THE PROPER AUTHORITY.

## **December 16, 2021**

Applicant(s): Nedine Tarby-Richards, Denzil Richards, and Ronald A. Daire

Tarby-Richards, Inc., T/a Denzel's Shark Bar & Grill

801 S. Broadway 21231

Class: "B" Beer, Wine, & Liquor License

Request to add live entertainment.

- (a) **Applicant(s) Information:** (1) Nedine Tarby-Richards was born St. Mary, Jamaica in April of 1962. She lives in Baltimore, MD; (2) Denzil Richards was born Kingston, Jamaica in April of 1958. He lives in Baltimore, MD; and (3) Ronald A. Daire was born in Jamaica in February of 1967. He lives in Baltimore, MD.
- (b) **Ownership Breakdown**: (1) Nedine Tarby-Richards (100%); (2) Denzil Richards (0%); and (3) Ronald A. Daire (0%).
- (c) Purchase Price of Business: N/A
- (d) Qualified Voters: N/A
- (e) **Zoning**: Applicant has applied for a USE permit, for the continued use of the premise 1<sup>st</sup> floor as a restaurant and outdoor table service on sidewalk in front of restaurant per BMZA 2017194 approved with conditions and live entertainment.
- (f) **Corporate Standing:** Tarby-Richards, Inc. is a MD Corporation and as of 11/29/2021 is active and in good standing.
- (g) **Posting Report**: The location was posted on 11/17/2021, and checked on 11/26/2021. This meets the 10-day rule. There are 41 licensed liquor establishment(s) in the 2x2 area: "D" BW- 2; "B" BWL-19; and "BD7" BWL-20.
- (h) **Timeline**: Last Inspection by BLLC was performed 11/23/2021. At that time, the establishment was open and operating.
- (i) Letters of Support/Opposition: At this time the Board has no letter(s) of opposition or support.

In considering this request, under the provisions of Alcohol Beverages Article 4-210(A) the Board must consider the following factors: 1. The public need and desire for the license; 2. The number and location of existing license holders; 3. The potential effect on existing license holders of the license for which application is made; 4. The potential commonality or uniqueness of the services and products to be offered by the business of the applicant; 5. The impact of the license for which application is made on the health, safety, and welfare of the community, including issues relating to crime, traffic conditions, parking, or convenience; and 6. Any other factor that the local licensing Board considers necessary.

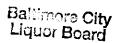
### **Board's Decision:**

# 2020 Application for Alcoholic Beverages License Board of Liquor License Commissioners for Baltimore City

# NEW/TRANSFER/EXPANSION/AMENOMENT(S) APPLICATION FEE - \$600.00

| EVOLANIATION OF DECUEOT   |   |  | I L EVI HILO                         | INN OL LICENI959 🗀  | AMENDMENT(S)   |
|---|---|--|--------------------------------------|---|--|
| EXPLANATION OF REQUEST:   | addition of live  | e entertainme  | ent and dancing                      |   | CLASS TYPE: LB   |
|   | Please select one i   | option and fill d  | out the requested                    | information   |  |
| A) NEW LICENSE REQUEST: ADDRESS OF PROF   | POSED LOCATION: _   |  |                                      |   |  |
| B) TRANSFER OF OWNERSHIP ONLY: ADDRESS  |   |  |                                      |   |  |
| C) TRANSFER OF OWNERSHIP AND LOCATION   |   |  |                                      |   |  |
|   |   |  |                                      |   |  |
| TRANSFER OF OWNERSHIP AND LOCATION  D) AMENDMENT OR EXPANSION REDUEST: AD   |   |  |                                      |   |  |
| O) PARCHOPICHT OR EXT AND GRACEBEET. NO   | DULLING OF THE COU  | MHU0.  | OOT O. OIOLO                         | way, bossiloro, maryini   | 10 2 12 3 1  |
| CORPORATE/LLC/LLP/PARTNERSHIP NAME:   | Tarby-Richa   | rds, Inc.  | TRADI                                | E NAME: Denzel's Sh   | ark Bar & Grill  |
| BUSINESS PHONE NUMBER: 410-327-3273   |   |  |                                      |   |  |
| ATTORNEY FOR THE APPLICANT: Melvin J. Kod   |   |  |                                      |   |  |
| rt of Premises Used ( <i>Nate: Flaars and Areas for Storege</i>   |   |  |                                      |   |  |
| s Extertainment provided? ☑Yes ☐ No. What Kind  |   |  |                                      |   |  |
| ing Receipt or Current Certificate of Occupancy Pe  |   |  |                                      |   | , ,  |
| Please note that as per Alc. Bev. Art. \$ 12-1407(A   |   |  |                                      |   |  |
|   | verification from t   |  |                                      |   | ,,   |
| I. Applicent A  |   |  |                                      | _   |  |
| Nedine Tarby-Richards   | 17  |  |                                      |   |  |
| (Full name)<br>9043 Saracen Drive   | (Telep<br>Baltimore   | honeno.)<br>Maryland   | 21208                                |   | (N t 1 \   |
| (Residence) Street  |   | ,  |                                      | n/a   | (Required)   |
|   | City  | State  | Zip Code                             | n/a<br>(period of residenc  |  |
| 04/1962   | Fei   | male   | Zip Code                             | (period of residenc<br>St. Mary, Jam  | y in Baltimore City)   |
| (Month/Year of Birth)   | Fer<br>(Sex   | male<br>c Male or Feme   | Zip Code                             | (period of residenc   | y in Baltimore City)   |
| ·   | Fer<br>(Sex   | male<br>c Male or Feme   | Zip Code                             | (period of residenc<br>St. Mary, Jam  | y in Baltimore City)   |
| (Month/Year of Birth)   | Fer<br>(Sex   | male<br>c Male or Feme   | Zip Code                             | (period of residenc<br>St. Mary, Jam  | y in Baltimore City)   |
| (Month/Year of Birth)<br>Check: □ Yes ☑ No Are you currently a resid<br>2. Applicant B<br>Denzil Richards   | Fei<br>(Sex<br>Jent of the City of B  | male<br>: Male or Fema<br>altimore?  | Zip Code                             | (period of residenc<br>St. Mary, Jam<br>(Place of Birth)  | y in Baltimore City)<br>naica  |
| (Month/Year of Birth)<br>Chack:   Yes   No Are you currently a resid<br>2. Applicant B<br>Denzil Richards<br>(Full name)                                  | Fer<br>(Sex<br>Jent of the City of B  | mate<br>c: Male or Fema<br>altimore?<br>hone no.)  | Zip Code<br>le)                      | (period of residenc<br>St. Mary, Jam<br>(Plece of Birth)<br>E-mail  | y in Baltimore City)   |
| (Month/Year of Birth)<br>Chack:   | Fei<br>(Sex<br>Jent of the City of B<br>(Telep<br>Bakimore  | male<br>c: Male or Fema<br>altimore?<br>hone no.)<br>Maryland                                      | Zip Code<br>le)<br>21208             | (period of residenc<br>St. Mary, Jam<br>(Place of Birth)<br>E-mail<br>r/a   | y in Baltimore City) naica (Required)  |
| (Month/Year of Birth) Chack:  | Fer<br>(Sex<br>Jent of the City of B<br>(Telep<br>Bakimore<br>City  | male<br>c: Male or Fema<br>altimora?<br>hone no.)<br>Maryland<br>State                             | Zip Code<br>le)                      | (period of residence St. Mary, Jam (Place of Birth)  E-mail n/a (period of residency                                  | y in Baltimore City) naica  (Required) y in Baltimore City)                    |
| (Month/Year of Birth)<br>Chack:   | Fei<br>(Sex<br>Jent of the City of B<br>(Telep<br>Bakimore<br>City  | male o: Male or Fema altimore? hone no.) Maryland State tale                                       | Zip Code<br>Je)<br>21208<br>Zip Code | (period of residence<br>St. Mary, Jam<br>(Place of Birth)<br>E-mail<br>n/a<br>(period of residency<br>Kingston, Ja    | y in Baltimore City) naica  (Required) y in Baltimore City)                    |
| (Month/Year of Birth) Chack: □ Yes ☑ No Are you currently a resid  2. Applicant B Denzil Richards (Full name) 9043 Saracen Drive Residence)Street 04/1958 | Fei (Sex Jent of the City of Baltimore City  M (Sex   | male o: Male or Fema altimore? hone no.) Maryland State tale : Male or Femal                       | Zip Code<br>Je)<br>21208<br>Zip Code | (period of residence St. Mary, Jam (Place of Birth)  E-mail n/a (period of residency                                  | y in Baltimore City) naica  (Required) y in Baltimore City)                    |
| (Month/Year of Birth) Check:  | Fei (Sex Jent of the City of Baltimore City  M (Sex   | male o: Male or Fema altimore? hone no.) Maryland State tale : Male or Femal                       | Zip Code<br>Je)<br>21208<br>Zip Code | (period of residence<br>St. Mary, Jam<br>(Place of Birth)<br>E-mail<br>n/a<br>(period of residency<br>Kingston, Ja    | y in Baltimore City) naica  (Required) y in Baltimore City)                    |
| (Month/Year of Birth) Chack:  | Fei (Sex Jent of the City of Bo (Telep Bakkmore City M (Sex   | male o: Male or Fema altimore? hone no.) Maryland State tale : Male or Femal                       | Zip Code<br>Je)<br>21208<br>Zip Code | (period of residence<br>St. Mary, Jam<br>(Place of Birth)<br>E-mail<br>n/a<br>(period of residency<br>Kingston, Ja    | y in Baltimore City) naica  (Required) y in Baltimore City)                    |
| (Month/Year of Birth) Check:  | Fer (Sex fent of the City of Baskimore  City  Sex lent of the City of Baskimore   | male<br>c: Male or Fema<br>altimore?<br>hone no.)<br>Maryland<br>State<br>tale<br>c: Male or Femal | Zip Code<br>Je)<br>21208<br>Zip Code | (period of residence St. Mary, Jarr (Place of Birth)  E-mail n/a (period of residency Kingston, Jarr (Place of Birth) | y in Baltimore City) naica  (Required) y in Baltimore City) amaica             |
| (Month/Year of Birth) Chack:  | Fer (Sex fent of the City of Baskimore  City  Sex lent of the City of Baskimore   | male o: Male or Fema altimore? hone no.) Maryland State tale : Male or Femal                       | Zip Code<br>Je)<br>21208<br>Zip Code | (period of residence St. Mary, Jarr (Place of Birth)  E-mail n/a (period of residency Kingston, Jarr (Place of Birth) | y in Baltimore City) naica  (Required) y in Baltimore City)                    |
| (Month/Year of Birth) Chack:  | Fer (Sex (Sex (Sex (Ent of the City of Bakimore City Note that of the City of Bakimore (Sex (Sex (Sex (Ent) of the City of Bakimore)) | male o: Male or Fema altimora?  hone no.)     Maryland     State dale o: Male or Femal altimora?   | Zip Code  de)  21208 Zip Code        | (period of residence St. Mary, Jarr (Place of Birth)  E-mail n/a (period of residency Kingston, Jarr (Place of Birth) | y in Baltimore City) naica  (Required) y in Baltimore City) amaica  (Required) |

PPT 2 4 2021



| 2. Nos the applicant(s) bean adjudged guilty of violating the lows governing the sale of any alcoholic beverage or for gambbing in any State, Inclur Maryland?   Yas   No - If yas, mark applicant and provide azplanation in adjacent space provided.    State whether the applicant(s) has ever been adjudged guilty of any offence against the laws of the State of Maryland, any other State will be United States, or against the United States (Federal Crime)?   Yas   No - If yas, mark applicant and explain.    As the applicant A   B   C   |  | rt A 🖂                                   | 8 🗆  | edjudged guilty of a felony in the State of Maryland or any other? [<br>C []   |  |
|--|--|--|--|--|--|
| Are you financially interested in any other skoholic beverages license or obspicant and explain.   |  | 50 00 <b>5</b> 2<br>50 00 00<br>50 00 00 |  |  |  |
| State whether the applicant(s) has ever been adjudged guilty of any offense against the laws of the State of Maryland, any other State with the United States (Federal Crime)?   Yes   No - If yes, mark applicant and explain, any other State with publicant A   8   C    When the applicant(s) ever had a license for the sale of elacholic beverages in the State of Naryland?   Yes   No If yes, mark applicant end explain, dates that the applicant was a licensee, and the trade name).  Point   S   |  |  |  |  |  |
| L. State whether the applicant(s) has ever been adjudged guilty of any offense against the laws of the State of Maryland, any other State with he United States, or against the United States (Federal Crime)?   Yes   No - If yes, coark applicant and explain.    No - If yes, coark applicant and explain.   No If yes, mark applicant and explain dothers of location, dates that the applicant was a licensea, and the trade norms), policant   No If yes, mark applicant and   No If yes, mark applicant and explain.    No   No If yes, mark applicant(s) ever had a liquor licensea suspended or ravoked?   Yes   No If yes, mark applicant and explain.    No   No If yes, mark applicant(s) ever had a liquor licensea suspended or ravoked?   Yes   No If yes, mark applicant and explain.    No   No If yes, mark applicant(s) have a financial interest in any other elcoholic beverage business or business for which an alcoholic beverage license as been applicant   No If yes, mark applicant and explain (address of facation and trade norms).    No   No If yes, places explain.   No If yes, mark applicant and explain (address of facation and trade norms).    No   No If yes, places explain.   No If yes, plac |  |  |  |  | rovided.   |
| Has the applicant(s) ever had a license for the sele of elcoholic beverages in the State of Maryland?  Vas  No H yes, mark applicant and explain.  Has the applicant(s) ever had a license for the sele of elcoholic beverages in the State of Maryland?  Vas  No H yes, mark applicant and explain, dollars that the applicant was a licensee, and the trade name), applicant A  B  C  No H I S   |  |  |  |  |  |
| The United States, or against the United States (Federal Crime)?   Yes   No - If yes, mark applicant and explain.    Has the applicant(s) ever had a license for the sale of alcoholic beverages in the State of Maryland?   Yes   No If yes, mark applicant and explain, dotted that the applicant was a licensee, and the trade name).    Popicant A   B   C   SINCE   SINCE   O5/03/21   801   S. Broad Maryland?   Yes   No If yes, mark applicant and explain.    Has the applicant(s) ever had a liquor license suspended or revoked?   Yes   No If yes, mark applicant and explain.    Has the applicant(s) ever had a liquor license suspended or revoked?   Yes   No If yes, mark applicant and explain.    Does the applicant(s) have a financial interest in any other alcoholic beverage business or business for which an alcoholic beverage license as been applied for, granted, and issued?   Yes   No If yes, mark applicant and explain (address of facetion and trade name).    Doe the spouses or dependent children of any of the applicant(s) have a financial interest in any other alcoholic beverages license as been applicant A   B   C      Doe the spouses or dependent children of any of the applicant(s) have a financial interest in any other alcoholic beverages license as the litimore City or any other production in the State of Maryland?   Yes   No If yes, mark applicant and explain (address of facetion and trade name uplicant A   B   C      Are you financially interested in any other alcoholic beverages license applied, granted or Issued?   Yes   No If yes, please explain.    Po any of the applicant(s) - personally or through an entity - have any indebtadoess or other financial obligations to any manufacturer, awar, distiller, or wholesaler at the time of making this application?   Yes   No If yes, please explain. If yes, please provide information as a spolicant(s) indebtad - personally or through an entity - the amount of the indebtadoess, and the name of the manufacturer, brawer, distiller wholesaler.                                    | . State (  | whether t                                | he applica   | ıt(s) has ever been adjudged guilty of any offense against the lav   | ws of the State of Maryland, any other State within  |
| xplain (address of location, dates that the applicant was a licenses, and the trade name), opticant A B C C C SINCE SINCE 05/03/21 801 S. Broad N  Has the applicant(s) ever had a liquor license suspended or revoked? Yes No If yes, mark applicant and explain.  Does the applicant(s) have a financial interest in any other alcoholic beverage business or business for which an alcoholic beverage license as been applied for, grented, and issued? Yes No If yes, mark applicant and explain (address of location and trade name).  Do the spauses or dependent children of any of the applicant(s) have a financial interest in any other alcoholic beverage license as been applied for grented, and issued? Yes No If yes, mark applicant and explain (address of location and trade name).  Do the spauses or dependent children of any of the applicant(s) have a financial interest in any other alcoholic beverages license as being a financially interested in any other purisdiction in the State of Maryland? Yes No If yes, mark applicant and explain (address of location and trade name).  Are you financially interested in any other alcoholic beverages license applied, granted or issued? Yes No If yes, please explain.  Are you financially interested in any other alcoholic beverages license applied, granted or issued? Yes No If yes, please explain.  Is the licensed premise currently open and operating? Yes No If no, then provide date of last day of operation of the establishment.  On any of the applicant(s) - personally or through an entity - have any indebtadness or other financial obligations to any manufacturer, ever, distiller, or wholeselar at the time of making this application? Yes No If yes, please explain. If yes, please provide information as a spelicant(s) indebted - personally or through an entity - the amount of the indebtedness, and the name of the manufacturer, brewer, distiller wholeselar?   | he Unite   | d States,                                | or against   | the United States (Federal Crime)? $\square$<br>Yes $\boxdot$ No - If yes, mark a  |  |
| policant A   |  | 181 (181 (181 (181 (181 (181 (181 (181   |  | <ul> <li>A second of the s</li></ul> |  |
| ON HUIS   cense since 05/03/21 801 S. Broad M  Hes the applicant (s) ever had a liquor license suspended or revoked?   Yes   No if yes, mark applicant and explain.  Does the applicant (s) have a financial interest in any other alcoholic beverage business or business for which an alcoholic beverage license as been applied for, granted, and issued?   Yes   No if yes, mark applicant and explain (address of location and trade name).  Do the spauses or dependent children of any of the applicant(s) have a financial interest in any other elcoholic bevarages because or business in address of location and trade name).  Do the spauses or dependent children of any of the spolicant(s) have a financial interest in any other elcoholic bevarages because or business in address of location and trade name.  Do the spauses or dependent children of any of the spolicant(s) have a financial interest in any other elcoholic bevarages because or business in address of location and trade name.  Both the spauses or dependent children of any of the spolicant (s) have a financial interest in any other elcoholic bevarages because in any other elcoholic bevarages because in the spalicant and explain (address of location and trade name.)  Are you financially interested in any other elcoholic bevarages because applied, granted or issued?   Yes   No If yes, please explain.  Figure 1 to any of the applicant(s) - personally or through an entity - have any indebtedness or other financial obligations to any menufacturer, rever, distiller, or wholessler of the time of making this application?   Yes   No If yes, please explain. If yes, please provide information as a supplicant(s) indebted - personally or through an entity - the amount of the indebtedness, and the name of the manufacturer, brewer, distiller, wholessler?  |  |  |  |  | aryland? 🗹 Yes 🗆 No If yes, mark epplicent end   |
| Has the applicant (s) ever had a liquor license suspended or revoked?  | pplicant   | A 🗹                                      | 8 🗹  | CI   |  |
| i. Has the applicant(s) ever had a liquor license suspended or revoked?   Yes   No if yes, mark applicant and explain.    S  | on   | th                                       | is   | icense since 05/03/2   | 1 801 S. Broadwo   |
| Does the applicant(s) have a financial interest in any other elcoholic beverage business or business for which an alcoholic beverage license as been applied for, granted, and issued?   | . Has the  | e applica:                               | nt(s) ever   | nad a liquor license suspended or revoked? 🗀 Yes 🖂 No If yes, :  |  |
| is been applied for, grented, and issued?  |  |  |  |  | Mariana  |
| as been applicant A  |  |  |  |  |  |
| as been applied for, granted, and issued?  Yes No If yes, mark applicant and explain (address of location and trade name).  Do the spouses or dependent children of any of the applicant(s) have a financial interest in any other alcoholic beverages license or business in altimore City or any other jurisdiction in the State of Maryland? Yes No If yes, mark applicant and explain (address of location and trade name pplicant A   | Does t   | re ennlies                               | nt(s) have   | a financial interest in any other alcoholic haverage bysiness or h   | uvinase for which an alcoholic havenage license  |
| Do the spouses or dependent children of eny of the applicant(s) have a financial interest in any other alcoholic bevarages license or business in eliment in any other jurisdiction in the State of Meryland?   Yes   No If yes, mark applicant and explain (address of location and trade name applicant A   B   C    Are you financially interested in any other alcoholic beverages license applied, granted or issued?   Yes   No If yes, please explain.  Policant A   B   C    Is the licensed premise currently open and aperating?   Yes   No If no, then provide date of last day of operation of the establishment.  So any of the applicant(s) - personally or through an entity - have any indebtedness or other financial obligations to any manufacturer, newer, distiller, or wholeseler at the time of making this application?   Yes   No If yes, please explain. If yes, please provide information as a applicant(s) indebted - personally or through an entity - the amount of the indebtedness, and the name of the manufacturer, brewer, distiller wholeseler?   | es been  | applied fo                               | or, grented  | , and issued? 🗔 Yes 🖸 No If yes, mark applicant and explain (ad  |  |
| ektimore City or any other jurisdiction in the State of Maryland?   Yes   No If yes, mark applicant and explain (address of location and trade name pplicant A   B   C    Are you financially interested in any other alcoholic beverages license applied, granted or Issued?   Yes   No If yes, please explain.  Are you financially interested in any other alcoholic beverages license applied, granted or Issued?   Yes   No If yes, please explain.  Is the licensed premise currently open and operating?   Yes   No If no, then provide date of lest day of operation of the establishment.  1. Do any of the applicant(s) - personally or through an entity - have any indebtedness or other financial obligations to any manufacturer, rewer, distiller, or wholeseler at the time of making this application?   Yes   No If yes, please explain. If yes, please provide information as a applicant(s) indebted - personally or through an entity - the amount of the indebtedness, and the name of the manufacturer, brewer, distiller wholeseler?   | իկա <b>ւց</b> ու                                     | #U                                       |  | ULI T  |  |
| ektimore City or any other jurisdiction in the State of Maryland?   Yes   No If yes, mark applicant and explain (address of location and trade name applicant A   B   C    Are you financially interested in any other elcoholic beverages license applied, granted or Issued?   Yes   No If yes, please explain.  Are you financially interested in any other elcoholic beverages license applied, granted or Issued?   Yes   No If yes, please explain.  Is the licensed premise currently open and operating?   Yes   No If no, then provide date of lest day of operation of the establishment.  Do any of the applicant(s) - personally or through an entity - have any indebtedness or other financial obligations to any manufacturer, rewer, distiller, or wholeseler at the time of making this application?   Yes   No If yes, please explain. If yes, please provide information as a applicant(s) indebted - personally or through an entity - the amount of the indebtedness, and the name of the manufacturer, brewer, distiller wholeseler?   |  | t(#)*#<br># 1976                         |  |  |  |
| Are you finencially interested in any other elcoholic beverages license epplied, granted or issued?   Yes No If yes, please explain.  Is the licensed premise currently open and operating?  Yes No If no, then provide date of last day of operation of the establishment.  Do any of the applicant(s) – personally or through an entity – have any indebtedness or other financial obligations to any manufacturer, newer, distiller, or wholeseler at the time of making this application?  Yes No If yes, please explain. If yes, please provide information as a applicant(s) indebted – personally or through an entity – the amount of the indebtedness, and the name of the manufacturer, brewer, distiller wholeseler?  |  |  | n donnadaa   | t abilities of our of the anning to be a firm of its and its and   |  |
| Is the licensed premise currently open and operating?  Yes  No If no, then provide data of last day of operation of the establishment.  Do any of the applicant(s) - personally or through an entity - have any indebtedness or other financial obligations to any manufacturer, newer, distiller, or wholeseler at the time of making this application?  Yes  No If yes, please explain. If yes, please provide information as a applicant(s) indebted - personally or through an entity - the amount of the indebtedness, and the name of the manufacturer, brewer, distiller wholeseler?  | Itimore  | City or a                                |  |  |  |
| Is the licensed premise currently open and operating?  Yes  No If no, then provide data of last day of operation of the establishment.  Do any of the applicant(s) - personally or through an entity - have any indebtedness or other financial obligations to any manufacturer, ewer, distiller, or wholeseler at the time of making this application?  Yes  No If yes, please explain. If yes, please provide information as a applicant(s) indebted - personally or through an entity - the amount of the indebtedness, and the name of the manufacturer, brewer, distiller wholeseler?   |  | -  | ny other jw  | isdiction in the State of Maryland? 🗖 Yes 🗖 No If yes, mark applica  |  |
| Is the licensed premise currently open and operating?  Yes No If no, then provide date of lest day of operation of the establishment.  Do any of the applicant(s) - personally or through an entity - have any indebtedness or other financial obligations to any manufacturer, awar, distiller, or wholeseler at the time of making this application?  Yes No If yes, please explain. If yes, please provide information as applicant(s) indebted - personally or through an entity - the amount of the indebtedness, and the name of the manufacturer, brewer, distiller wholeseler?   |  | -  | ny other jw  | isdiction in the State of Maryland? 🗖 Yes 🗖 No If yes, mark applica  |  |
| . Do any of the applicant(s) – personally or through an entity – have any indebtedness or other financial obligations to any manufacturer, ewer, distiller, or wholeseler at the time of making this application?   Yes  No If yes, please explain. If yes, please provide information as applicant(s) indebted – personally or through an entity – the amount of the indebtedness, and the name of the manufacturer, brewer, distiller wholeseler?  | plicant  | A□                                       | ny other jur<br>B 🗆  | isdiction in the State of Maryland?   Yes   No If yes, mark applica<br>  C   | nt and explain (address of location and trade name).   |
| . Do any of the applicant(s) – personally or through an entity – have any indebtedness or other financial obligations to any manufacturer, ewer, distiller, or wholeseler at the time of making this application?   Yes  No If yes, please explain. If yes, please provide information as applicant(s) indebted – personally or through an entity – the amount of the indebtedness, and the name of the manufacturer, brewer, distiller wholeseler?  | oplicant<br>Ara you                                  | A 🗆                                      | ny other jur<br>B 🗆<br>By interest                                 | isdiction in the State of Maryland?    Yes    No If yes, mark applica<br>C   | nt and explain (address of location and trade name).   |
| ewer, distiller, or wholeseler at the time of making this application? 🗔 Yes 🗹 No If yes, please explain. If yes, please provide information as<br>applicant(s) indebted – personally or through an entity – the amount of the indebtedness, and the name of the manufacturer, brewer, distille<br>wholesaler?   | plicant<br>Ara you                                   | A 🗆                                      | ny other jur<br>B 🗆<br>By interest                                 | isdiction in the State of Maryland?    Yes    No If yes, mark applica<br>C   | nt and explain (address of location and trade name).   |
| ewer, distiller, or wholeseler at the time of making this application? 🗔 Yes 🗹 No If yes, please explain. If yes, please provide information as<br>a applicant(s) indebted – personally or through an entity – the amount of the indebtedness, and the name of the manufacturer, brewer, distille<br>wholeseler?   | Are you  | A 🗆                                      | B C  By interest  B C  | isdiction in the State of Maryland?   Yes   No If yes, mark applica<br>  C    <br>   | int and explain (address of location and trade name).  Sued?  Yes  No If yes, please explain.  |
| e applicant(s) indebted - personally or through an entity - the amount of the indebtedness, and the name of the manufecturer, brewer, distille<br>wholesaler?  | oplicant<br>Ara you<br>oplicant                      | A 🗆                                      | B C  By interest  B C  | isdiction in the State of Maryland?   Yes   No If yes, mark applica<br>  C    <br>   | int and explain (address of location and trade name).  Sued?  Yes  No If yes, please explain.  |
| wholesaler?  | Are you plicant Is the li                            | A ::  ifinancia A ::  censed p           | Hy interest B   remise cw  | isdiction in the State of Maryland?  | int and explain (address of location and trade name).  sued?  Yes  No If yes, please explain.  of last day of operation of the establishment.  er financial obligations to any manufacturer, |
| plicent A L B L C L F  | Are you plicant is the li                            | A  | ily interest  B ::  B ::  B ::  remise cu  uplicant(s) r wholaseli | isdiction in the State of Maryland?   Yes   No If yes, mark applica   C  | sued?   Yes   No If yes, please explain.  The financial obligations to any manufacturer, as explain.   |
|  | Are you pplicant  Is the li  Do eny rewer, de        | A  | lly interest B C remise cu pplicant(s) r wholeseld                 | isdiction in the State of Maryland?    Yes    No If yes, mark applica C  | sued?   Yes   No If yes, please explain.  The financial obligations to any manufacturer, as explain.   |
|  | Are you plicant  Is the li  Do eny rewer, de explice | A  | lly interest B C remise cu pplicant(s) r wholeseld                 | isdiction in the State of Maryland?    Yes    No If yes, mark applica C  | establishment.  The financial obligations to any manufacturer, assess explain.   |

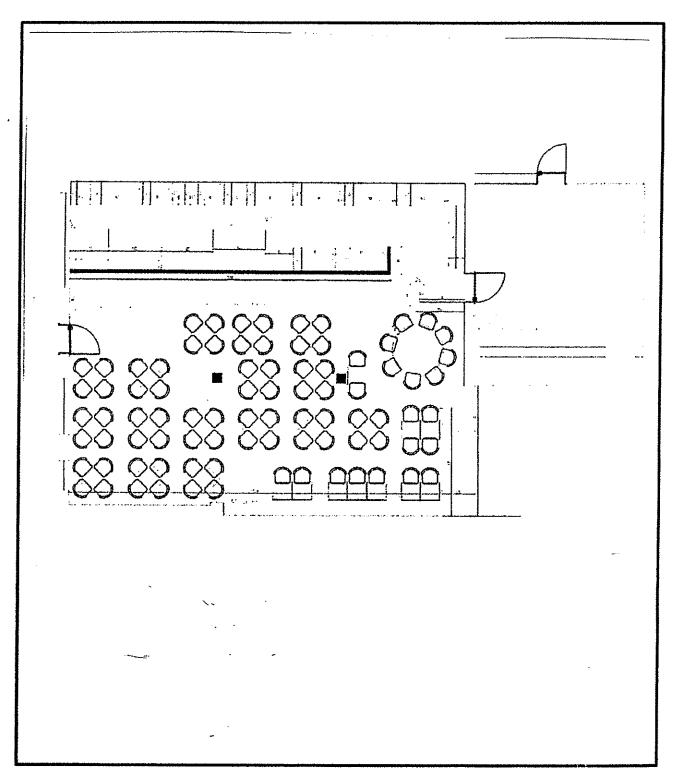
| . Please list the following Information fo<br>Name   | Address  | Phone  | Email   |                          |
|--|--|--|---|--------------------------|
|  |  |  |   |                          |
| st all authorized persons.) <i>Please note that</i>  | all licensees MUST have a FHANL<br>ess of all outstanding stock helder   | "IAL INTEREST in the license applied for   | ary) or in Limited Liebility Company/Partnerships<br>as per Alc. Bov. Art. S 4-105 (a)(II). If nacessary,<br>y stock of the corporation and the erticles of   |                          |
| NAME: Nedine Tarby-Richard   | sADDRESS: 9043 S   |  |   | 0]                       |
| ) NAME: Denzil Richards  | ADORESS: 9043 S  | aracen Drive IIILE   | Pres. %OF STOCK HELD: 100<br>7.P. and Treas. %OF STOCK HELD:  | ľ                        |
| Ronald A. Daire  | ADDRESS: 2302 A  | llendale Road INE:   | Secretary %DF STDCK HELD: 0%  |                          |
| NAME:  | ADDRESS:   | TITLE:   |   |                          |
| Extract from Law: If any affidavit or ceth   | required under the provisions of t   | his Act shell contain any faisa statement  | s. the offender shell be deemed   |                          |
| uilty of perjury. And upon indictment en   | d conviction thereof, shall be so  | rbject to penalties provided by Law fo   | r that crima.   |                          |
| egulations relating to the sole of elcoholic<br>rents permission to the State Comptrollo<br>authorized egents and employees, and any | : beverages, as well as to the rule<br>r. his duly authorized deputies, in:<br>peacs officer of Baltimore City or<br>on and in which seid business is to | s and regulations of the Beard of Licens<br>spectors and clerks. The Beard of Licen<br>• the State of Maryland to inspect and :                              | he/she will conform to all State and County laws as Commissioners for Beltimore City, and hereby se Commissioners for Beltimore City, as dilly search at any and all hours, without wayreat; the applicants must easure that a jeest one incesses |                          |
| Medice ary   | Delaids  |  |   | 41                       |
| ignature of Applicant A Honor day of Balton and Balton Grandly appear at the matter and facts contained in said ap                   | OCT., 20 before me<br>ed Nedine Tai<br>plication are true and correct. As w  | , the subscriber, e <sub>t</sub> notary public of the Sta<br><b>BY - R<sub>1</sub> Ch <i>Qr Q</i> (13</b> applicant(s)<br>itness, my hand and notarial seal. | te of Mary and or and for named in this application made cath in due form of ta   | r<br>g.cv<br>ąw∈<br>~ ⊕\ |
| ignature: Elaine   | Pappat Papa  | Notary Seal) My Commission expires   | 11/19/22  |                          |
| / V  | r y p  | .и Ј   | 45 PAS  | i i                      |
| ignature of Applicant B 14+6<br>Agreely certify that on the 14 say of  | 0 + 21 before me.  | the subscriber, e notary public of the Sta   | marylant in and for   | , t                      |
| 120 (10) CO , personally appears<br>at the matter and facts contained in said app  | d Denzil Ri  | chardS the applicant(s):   | named in this application made cath in due form of la   | iw<br>Z                  |
| gnature: "Claime"  | appad 1  | Notary Seal] My Commission expires   | 1119/22   |                          |
| Ronald A   |  | νης  |   | 1157                     |
| gnature of Applicant C   | 0 CF. 20 before me,  | the subscriber, a notary public of the Sta   | e of Mary and for   |                          |
| 69 to CO personally appears of the matter and facts contained in said app gnature:   | dicetion are true and correct. As wi   | tness, my hand and notarial seal.  | amed in this application made path in due form at lan   | <b>₩</b> ૽<br><b>\</b>   |
| inted Name: Elaine   | Davoas   | Yotary Seal] My Commission expires   | भागाताहर अ  |                          |
|  |  |  |   |                          |

| Name and Address of the owners of the premise/landlord:  | 801 S. Broadway, LLC   | Phone Number:  |
|--|--|--|
|  | 9043 Sarocen   | Dr. Balto, MD 21208  |
| STATEMENT OF DWNER OF PREMISES REQUIRED  |  |  |
| (I.WE) Denzil Richards,  | member,  | HEREBY CERTIFY,  |
| That (I am, we are) the owner(s) of the property located at  |  |  |
| Code of $21231$ , which is named in the present  | t application made to the Board of Liquor Lice   | fise Commissioners of Baltimore City   |
| under the Alcoholic Beverage Laws of Maryland and assent t   | to the granting of the license applied for, and  | hereby authorize the State Comptroller, his  |
| duly authorized deputies, inspectors and clerks, the Board o   | it Liquor License Commissioners of Baltimore   | City, its duly authorized agents and   |
| employees, and any peace officer of the City of Baltimore an<br>the business is to be conducted, and any and all parts of the  | 10 State of Maryland, to inspect and search, w   | rithout warrant, the premises upon which   |
| 4  | ounding in which sale desiness is to de condi  | icted, at any and all notirs.  |
| Signature of twner of the Property   | -  | n. losed   |
| I hereby certify that on the 14th day of 0 degree 2 for Bolto Co. personally appeared Den 2  | 21<br>0_, before me, the subscriber, a notary public<br>2;1 Richards, Membe<br>due form of law that the matter and facts contain | of the State of  |
| landlord/property owner named in this application made oath in o   | due form of law that the matter and facts contain  | ed in said application are true and correct.   |
| As witness, my hand and notarial seal.   |  | 1 1  |
| Pelaline XI. N   | 1  | 1110/02  |
| Notery Signature:  | (Notery Seal) My Commission expire   | es 11 1 2 2  |
| Notary Printed Hame: EQNE U  | MANNAC   |  |
| The state of the s | <del>- 1/4</del>   |  |
|  | $\mathcal{H}(\mathcal{H})$   | sons.  |
| The following certifi<br>We, the undersigned citizens, real estate owners ar   | icates must be signed by at least 3 per<br>nd registered voters in the City of Balt  | imore in which the business  |
| The following certifi<br>We, the undersigned citizens, real estate owners ar<br>covered by the present application is to be conducte   | nd registered voters in the City of Balt<br>ed. We certify that the qualifying applic  | imore in which the business<br>ant(s) is/are personally known to   |
| The following certifi<br>We, the undersigned citizens, real estate owners ar   | nd registered voters in the City of Balt<br>ed. We certify that the qualifying applic  | imore in which the business<br>ant(s) is/are personally known to   |
| The following certifi<br>We, the undersigned citizens, real estate owners ar<br>covered by the present application is to be conducte   | nd registered voters in the City of Balt<br>ed. We certify that the qualifying applic  | imore in which the business<br>ant(s) is/are personally known to   |
| The following certifi<br>We, the undersigned citizens, real estate owners ar<br>covered by the present application is to be conducte   | nd registered voters in the City of Balt<br>ed. We certify that the qualifying applic<br>It of the State of Maryland at the time | imore in which the business<br>ant(s) is/are personally known to   |
| The following certifi<br>We, the undersigned citizens, real estate owners ar<br>covered by the present application is to be conducte<br>us and is a resident of Baltimore City and a residen   | nd registered voters in the City of Balt<br>ed. We certify that the qualifying applic<br>It of the State of Maryland at the time | imore in which the business ant(s) is/ere personally known to of this application.  DOB Length of time (Month/Year) Acquiring with the |
| The following certifi<br>We, the undersigned citizens, real estate owners ar<br>covered by the present application is to be conducte<br>us and is a resident of Baltimore City and a residen   | nd registered voters in the City of Balt<br>ed. We certify that the qualifying applic<br>It of the State of Maryland at the time | imore in which the business ant(s) is/ere personally known to of this application.  DOB Length of time                                 |
| The following certifi<br>We, the undersigned citizens, real estate owners ar<br>covered by the present application is to be conducte<br>us and is a resident of Baltimore City and a residen   | nd registered voters in the City of Balt<br>ed. We certify that the qualifying applic<br>It of the State of Maryland at the time | imore in which the business ant(s) is/ere personally known to of this application.  DOB Length of time (Month/Year) Acquiring with the |
| The following certifi We, the undersigned citizens, real estate owners ar covered by the present application is to be conducte us and is a resident of Baltimore City and a residen  Names Addres  | nd registered voters in the City of Balt<br>ed. We certify that the qualifying applic<br>It of the State of Maryland at the time | imore in which the business ant(s) is/ere personally known to of this application.    DOB   Length of time                             |
| The following certifi We, the undersigned citizens, real estate owners ar covered by the present application is to be conducte us and is a resident of Baltimore City and a residen  Names Addres  | nd registered voters in the City of Balt<br>ed. We certify that the qualifying applic<br>It of the State of Maryland at the time | imore in which the business ant(s) is/ere personally known to of this application.    DOB   Length of time                             |
| The following certifi We, the undersigned citizens, real estate owners ar covered by the present application is to be conducte us and is a resident of Baltimore City and a residen  Names Addres  | nd registered voters in the City of Balt<br>ed. We certify that the qualifying applic<br>It of the State of Maryland at the time | imore in which the business ant(s) is/ere personally known to of this application.    DOB   Length of time                             |
| The following certifi We, the undersigned citizens, real estate owners ar covered by the present application is to be conducte us and is a resident of Baltimore City and a residen  Names Addres  | nd registered voters in the City of Balt<br>ed. We certify that the qualifying applic<br>It of the State of Maryland at the time | imore in which the business ant(s) is/ere personally known to of this application.    DOB   Length of time                             |
| The following certifi We, the undersigned citizens, real estate owners ar covered by the present application is to be conducte us and is a resident of Baltimore City and a residen  Names Addres  | nd registered voters in the City of Balt<br>ed. We certify that the qualifying applic<br>It of the State of Maryland at the time | imore in which the business ant(s) is/ere personally known to of this application.    DOB   Length of time                             |
| The following certifi We, the undersigned citizens, real estate owners ar covered by the present application is to be conducte us and is a resident of Baltimore City and a residen  Names Addres  | nd registered voters in the City of Balt<br>ed. We certify that the qualifying applic<br>It of the State of Maryland at the time | imore in which the business ant(s) is/ere personally known to of this application.    DOB   Length of time                             |
| The following certifi We, the undersigned citizens, real estate owners ar covered by the present application is to be conducte us and is a resident of Baltimore City and a residen  Names Addres  | nd registered voters in the City of Balt<br>ed. We certify that the qualifying applic<br>It of the State of Maryland at the time | imore in which the business ant(s) is/ere personally known to of this application.    DOB   Length of time                             |
| The following certifi We, the undersigned citizens, real estate owners ar covered by the present application is to be conducte us and is a resident of Baltimore City and a residen  Names Addres  | nd registered voters in the City of Balt<br>ed. We certify that the qualifying applic<br>It of the State of Maryland at the time | imore in which the business ant(s) is/ere personally known to of this application.    DOB   Length of time                             |

Board of Liquor License Commissioners for the City of Baltimore I North Charles Street, Suite 1500, Baltimore, Maryland 21201 Phone: 410-396-4377 Fax: 410-396-4382

Please note that this is a public document and upon request will be provided to the general members of the public.

\*Please present/draw a Floor Plan/Rendering of the Licensed Premises here. If you have a professionally drafted rendering, please attach it to the application.\*





# **Liquor Board System**

Version 1.0

Annual-Renewal ▼ | License-Transfer ▼ | One-Day ▼ | Add New License ▼ | Query ▼

# License Detail

Close the License

Print License

Print Renewal Letter

<< Go Back

License Info

License Num: LB 293

Cert Num: 1079

....

Fee: \$1,520.00 Status: Renewed

License Date:5/1/2021

License Year: 2021

CR Number: 18499373

Payment Date: 08-26-21

2020 - 2021 TPP Paid 🔲

2021 Trader's License 🗌

Update Info

Click to Start License Renewal

## Add Adult Entertainment License

Add New Adult Entertainement License

### Location

Corp Name: TARBY-RICHARDS, INC.
Trade Name: DENZEL'S SHARK BAR & GRILL

Zone Code: 23

Phone: 410-327-3273

Block Num: 801 Street: BROADWAY SOUTH

City: BALTIMORE State: MD Zip: 21231

CR Number: 18499373

Portion of Business Used:

(CHANGE OF OPERATOR) CONTINUE TO USE ENTIRE FIRST FLOOR AS A RESTAURANT WITH CLASS "B" BEER, WINE AND LIQUOR LICENSE AND OUTDOOR TABLE SERVICE ON SIDEWALK IN FRONT OF RESTAURANT PER BMZA 2017-194, APPROVED06/06/17 WITH

CONDITIONS

Restriction:

| Edit the License Location Info | Alternate Mailing Address |
|--------------------------------|---------------------------|
|                                |                           |

### **License Owners**

| First Name | Last Name      | Street              | City      | State | Zip   | Action | Change Owner |
|------------|----------------|---------------------|-----------|-------|-------|--------|--------------|
| RONALD A.  | DAAIRE         | 2302 ALLENDALE ROAD | BALTIMORE | MD    | 21216 | Edit   | Remove Owner |
| DENZIL     | RICHARDS       | 9043 SARACEN DRIVE  | Baltimore | MD    | 21208 | Edit   | Remove Owner |
| NEDINE     | TARBY-RICHARDS | 9043 SARACEN DRIVE  | BALTIMORE | MD    | 21208 | Edit   | Remove Owner |

# **Comments**

| Date       | Comment  | Action |
|------------|--|--------|
| 11/05/2021 | Application to add live entertainment filed on behalf of Tarby-Richards, Inc. T/a Denzel's Shark<br>Bar & Grill, Nedine Tarby-Richards, Denzil Richards, and Ronald A. Daire on 10/26/2021 /kk   | Delete |
|            | Application for Transfer of Ownership issued to TARBY-RICHARDS, INC.t/a DENZEL'S SHARK BAR & GRILL, NEDINE TARBY-RICHARDS, DENZIL RICHARDS and RONALD A. DAAIRE on MAY 03, 2021; see Invoice #121579 /sb   | Delete |
|            | Received statement from Chesapeake Beverage that they have cleared debt due to bankruptcy/sb   | Delete |
|            | Received fax from Chesapeake Beverage stating that Kuru, Inc. t/a Jiimmy's Restaurant is indebted for the amount of \$563.50/sb  | Delete |
| 04/19/2021 | ****Processed 2021-2022 Renewal Application; Invoice #121327/sb***   | Delete |
| 03/03/2021 | 2/25/2021 - Virtual Public Hearing Re: Application to transfer of ownership with continuation of outdoor table service, requesting off-premise catering - APPROVED (3-0 vote)/jr   | Delete |
| 02/25/2021 | 2/25/2021 Transfer Hearing Preliminary Approval Letter mailed today to Attorney Melvin<br>Kodenski/jr  | Delete |
|            | Received fax from Chesapeake Beverage stating that Kuru, Inc. t/a Jiimmy's Restaurant is indebted for the amount of \$563.50/sb  | Delete |
| 01/12/2021 | Application for transfer of ownership with continuation of outdoor table service, requesting off-<br>premise catering filed on behalf of Tarby-Richards, Inc. 1/a Denzel's Shark Bar Grill, Nedine<br>Tarby-Richards, Denzil Richards, and Ronald A. Daire on 1/5/2021 /kk   | Delete |
| 02/24/2020 | Received documentation from Mr. Jordan Spivok on 2/11/2020. Attempted to contact Mr. Spivok multiple times. on 2/14 his secretary stated he was out of town. On 2/24/2020 left message to general voicemail. As per documentation filed, this location was/is set to go to auction on 1/21/2020. There may be a further secured creditor action. However, due to the lack of communication by Mr. Spivok, the BLLC is unaware of the next steps. Copy of communication sent to file. Will send an email out today and place copy in file. TRA. | Delete |
| 01/28/2020 | ****STATE OF MD TAX HOLD, letter sent to the Business address on January 28, 2020.****/mb  | Delete |
| 11/01/2019 | Personal Property Tax Owed to City of Baltimore was cleared as per the email received from Law Department on October 31, 2019/mb.  | Delete |
|            | ***PERSONAL PROPERTY TAX OWED TO CITY OF BALTIMORE Letter sent to Licensee/s Home<br>Address on September 26, 2019.*** /mb   | Delete |
| 04/22/2019 | Submitted 2019 Trader's License /sb  | Delete |
| 04/05/2019 | FOOD FORM WAS SUBMITTED WITH 2019 RENEWAL APPLICATION /kr  | Delete |
| 03/12/2018 | *****RELEASED STATE OF MD TAX HOLD***** /sb  | Delete |

Print History (Print Card)

License num: LB 293 Address: 801 BROADWAY SOUTH

Trade Name: DENZEL'S SHARK BAR & GRILL

| Comment: |             |  |
|----------|-------------|--|
|          |             |  |
|          |             |  |
| L        | Add Comment |  |

**Hold Info** 



STOCK

YES

Close Status:

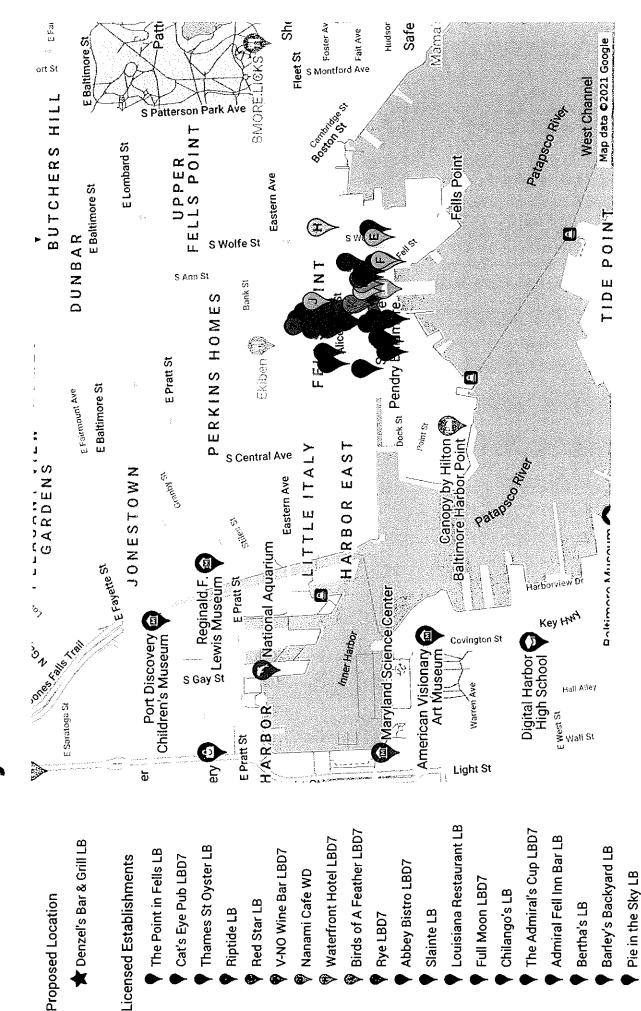
# TARBY-RICHARDS, INC.: D21110226 Department ID Number: D21110226 **Business Name:** TARBY-RICHARDS, INC. Principal Office: 801 S. BROADWAY BALTIMORE MD 21201 Resident Agent: **NEDINE TARBY** 9043 SARACEN DRIVE PIKESVILLE MD 21208 Status: **INCORPORATED Good Standing:** THIS BUSINESS IS IN GOOD STANDING **Business Type:** CORPORATION **Business Code:** 03 ORDINARY BUSINESS - STOCK Date of Formation/Registration: 11/17/2020 State of Formation: MD Stock Status:

# MAP SUMMARY (RECAPITULATION)

| TOTAL ESTABLISHMENTS | SIN MAP AREA 4               |
|----------------------|------------------------------|
|                      |                              |
| "A" BEF              | ER & WINE                    |
| "B" BEE              | R & WINE                     |
|                      | R & WINE                     |
| "D" BEE              | er & wine2                   |
| "A" BEE              | ER, WINE & LIQUOR            |
| "A-2" B              | EER, WINE & LIQUOR           |
| "B" BEE              | R, WINE & LIQUOR             |
| -C" BEE              | R, WINE & LIQUOR             |
| "D" BEE              | R, WINE & LIQUOR             |
| "вр7" в              | eer, wine & liquor <u>20</u> |
|                      | ARENA                        |
| I                    | HOTEL/MOTEL                  |
| I                    | RACING                       |
|                      |                              |
|                      |                              |
| PREPARED BY: Perez   | DATE: 11/24/21               |

# 801 S. Broadway

Proposed Location



Red Star LB

Riptide LB

Alexander's Tavern LB

Bertha's LB

Full Moon LBD7 Chilango's LB

Slainte LB

Rye LBD7

Todd Conner's LBD7

- Broadway Liquors LBD7
- Kippo Ramen LB
- Max's Taphouse LBD7
- W Moby's LBD7
- DogWatch Tavern LBD7
- The Choptank LB
- Sammy's Enoteca LB
- Broadway Market LB
- Rye LBD7
- Parcocina LBD7
- Fells Point Tavern LBD7
- The Horse LBD7
- The Sound Garden WD
- One-Eyed Mike's LBD7
- The Black Olive LB
- Bondhouse LBD7
- Pitango Bakery LB
- The Wharf Rat LBD7

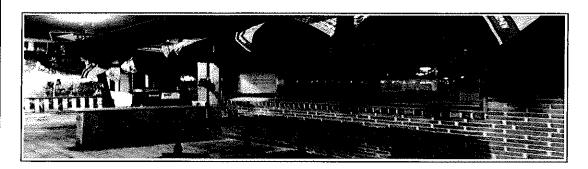
# **Board of Liquor License Commissioners**

For Baltimore City
1 North Charles Street, 15th Floor
Baltimore, Maryland, 21201

| INSPECTORS REPORT - TRANSFERS/NEW APPLICATIONS |
|--|
|--|

| Licensee Information (Trade Name):   | Denzel's Shark Bar & Grill             |
|--|--|
| Corporation Name:  | Tarby-Richards, Inc.                   |
| Location Address:  | 801 S. Broadway                        |
| License Type:  | Class "B" Beer, Wine and Liquor        |
| Is the establishment open and operating in a safe and sanitary manner?<br>(If not open, not in comments - CLOSED or NOT OPERATING) | Yes 💙                                  |
| Is the location within 300 feet of Church and/or School?   | No 🗸                                   |
| Date Posted?   | 11/17/2021                             |
| Estimated Date of Removal?   | 11/26/2021                             |
| Are there any other licensed establishments within a two block radius?   | Yes 💙                                  |
| Other licensed locations - Describe/Note:  | <u> </u>                               |
| see attached map   |  |
|  | ······································ |
| Comments and Follow-up Items(s) (please note any issues or concerns abo  | out the location):                     |
| Request to add live entertainment  | at the issueson,                       |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
| Insert Photo of Sign and location:   |  |



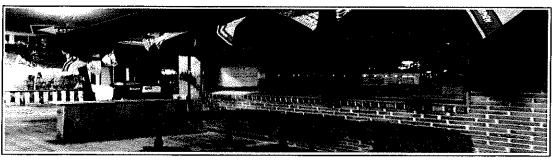




| <b>*</b> | Attach | Additional | Photos |
|----------|--------|------------|--------|
|----------|--------|------------|--------|

| Inspector Name             |     |         |   | Date and Time |            |  |
|----------------------------|-----|---------|---|---------------|------------|--|
| i:0#.w baltimore\andy.pe   | rez |         |   | 11/23/2021    | 1:33:11 AM |  |
| Name of Licensee (if prese | nt) |         |   |               |            |  |
|                            |     |         |   |               |            |  |
|                            |     | Approve | 7 | Disapprove    |            |  |

| Board of Liquor Licens                                   |  |  |  |  |
|--|--|--|--|--|
| For Baltimore City                                       |  |  |  |  |
| 1 North Charles Stree<br>Baltimore, Marylai              |  |  |  |  |
|  |  |  |  |  |
| POSTING SIGN   | S REPORT   |  |  |  |
| Applicant(s) Name:                                       | Nedine Tarby-Richards, Denzil Richards, Ronald Daire |  |  |  |
| Address of Premises:                                     | 801 S. Broadway                                      |  |  |  |
| Inspector:   | i:0#.w baltimore\andy.perez                          |  |  |  |
| Date Posted:   | 11/17/2021   |  |  |  |
| Time Posted:   |  |  |  |  |
| Date Rechecked:  | 11/26/2021   |  |  |  |
| Time Rechecked:  |  |  |  |  |
| Manager or Owner when sign posted:                       |  |  |  |  |
| Summary on location of sign posted:                      |  |  |  |  |
| Sign posted on front window                              |  |  |  |  |
| Summary on location of sign rechecked:                   |  |  |  |  |
| Sign remained as posted for the required 10 days period. |  |  |  |  |
| Insert Photo of Sign and location:                       |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |



Attach Additional Photos

Approve

Disapprove

Back

# **BLLC Routine Inspection**

|                                | <br>Ucensee Information   |     |
|--------------------------------|---|-----|
| Address:                       | 801 BROADWAY SOUTH 21231  | ··· |
| Trade Name:                    | DENZEL'S SHARK BAR & GRILL  |     |
| Corporation Name               | TARBY-RICHARDS, INC.  |     |
| Type of License:               | Class "B" Beer, Wine and Liquor   | ~   |
| Date/Time of Inspection:       | 11/23/2021 3:06:49 PM   |     |
| Manager/Licensee               | Denzil Richards   |     |
| Open/Classed                   | Open/Closed Status  |     |
| Open/Closed:                   | Open 🗸  |     |
| Closed Date:                   | OCCUPATION OF THE PROPERTY OF |     |
| Clean and Free of Debris:      | External Appearance  Satisfactory   ✓   |     |
| Location of Bar:               | Internal Appearance  Front   ✓  |     |
| Shape of Bar:                  | straight  |     |
| Condition of Bar Area/Floors:  | Satisfactory  |     |
| Hot Water:                     | Yes 💙   |     |
| Disinfectant Solution:         | Yes 🗸   |     |
| Three Compartment/Washer;      | Yes 🗸   |     |
|                                | Package Goods/8D7 Checklist   |     |
| Bulletproof Partitioning:      | N/A 🗸   |     |
| Separate Pkg. Goods Dept.:     | N/A ✓   |     |
| Separate Pkg. Goods Store:     | N/A 🗸   |     |
| Bar/Tavern Open and Operating: | N/A ✓   |     |

| Selling Household/Grocery                                 | : N/A            |                                   | •                         |
|---|------------------|-----------------------------------|---------------------------|
|   |                  |                                   | Photo a Association       |
| Community   |                  |                                   | Dining Areo               |
| Capacity  |                  |                                   |                           |
| Location of Dining Area.                                  | front            |                                   | $\neg$                    |
| , ,   | <i>y.o</i>       |                                   |                           |
| Condition of Dining Area/Floors.                          | Satisfactory     |                                   | *                         |
| Sanitation:   | Satisfactory     |                                   | •                         |
| Menu:   | Yes              |                                   | •                         |
|   |                  |                                   | Business Records          |
| Traders License:  | Yes              | ~                                 |                           |
|   | 163              | •                                 |                           |
| Alcohol Awareness Certification Date<br>Issued:           |                  |                                   |                           |
| Employee Records:   | Yes              | ~                                 |                           |
| Alcohol Beverage Information Invoice<br>Numbers and Date: | Southern# 2034   | 649                               | 11/17/2021                |
|   |                  |                                   | Krichen                   |
| Inspector Comments:                                       | Rear/satisfactor | 77                                |                           |
| •   | neur/sutisjuctor | ,                                 |                           |
|   |                  |                                   |                           |
|   |                  |                                   |                           |
|   |                  |                                   |                           |
|   |                  |                                   |                           |
|   |                  |                                   | Restroom                  |
| Inspector Comments:                                       | C / C            |                                   |                           |
| inspector comments.                                       | Center/Satisfact | tory                              |                           |
|   |                  |                                   |                           |
|   |                  |                                   |                           |
|   |                  |                                   |                           |
|   |                  |                                   |                           |
|   |                  |                                   |                           |
|   |                  |                                   | Public Safety             |
| Exits Marked, Unobstructed:                               | Yes              |                                   | •                         |
| Plan Annual Val   | <del></del>      |                                   |                           |
| Fire Capacity:  | Not available    |                                   |                           |
| Outdoor Seating Capacity:                                 | Not available    |                                   |                           |
|   | Adio             | lt Enter                          | rtainment - If Applicable |
|   | A17111           | 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | COMPTENS * N. MINDE WIFE  |

License is Valid:

N/A

Dancers Present 18 and older:

Cleanliness of Dressing Room: N/A

Ancillary Services

| Live Entertainment (Describe): | no |
|--------------------------------|----|
|                                |    |
|                                |    |
|                                |    |

Outdoor Table Service

Violutions

Violation Issued:

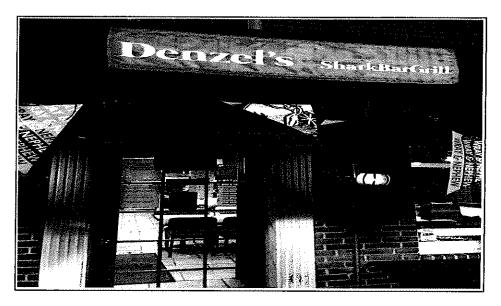
Violations Noted:

Wrop-Up

Instructions Given to Licensee:

Inspector's Comments: Inspected 11/17/21

Photo Taken:



Disapprove

|                        | Attach Additional Photos    |
|------------------------|-----------------------------|
| Owner Email:           |                             |
| Submitted by Inspector | i:0#.w baltimore\andy.perez |
|                        |                             |

Approve

# Department Of Housing And Community Development Division Of Construction And Building Inspection

Property Address: Block/Lo

Block/Lot: 1861/001

Online Use & Occupancy Permit

Application

801 S BROADWAY

Applicant:

ELAINE PAPPAS

Owner/Lessee:

Owner 801 S. BROADWAY LLC

Lessee TA

TARBY-RICHARDS, INC.

Permit No: USE2021-54961

 1001-000000-2600-159400-400540 Filing Fee
 50.00

 1001-000000-1500-102800-400230 Tax
 3.00

 1001-000000-2600-158009-400480 Use&Occupancy
 45.00

Total:

98.00

# Please pay the Use & Occupancy permit fee before scheduling inspections.

Property Use & Occupancy Information:

Existing Use: (Commercial) Restaurant

Proposed Use: (Commercial) Restaurant

Dwelling: Roomming: Efficiency:
Existing Count: 000 000 000

Proposed Count: 0 0 0

Created Description Completed Assigned To CHESAPEAKE CRITICAL 10/20/2021 BATT AREA FIRE DEPARTMENT 10/20/2021 LDZI REFERRAL Application Received 10/20/2021 One Stop Permit Office 10/20/2021 WILCOXL Review HEALTH DEPARTMENT 10/20/2021 JWEL INSPECTION MINOR PRIVILEGE 10/20/2021 MPRV Zoning Sign-off 10/20/2021 10/20/2021

District:201

MINOR PRIVILEGE:

THIS IS NOT A PERMIT. THIS DOCUMENT IS PROOF OF APPLICATION FOR A PERMIT. YOU MUST OBTAIN THE ACTUAL PERMIT OR CERTIFICATE OF OCCUPANCY BEFORE THE BELOW STATED WORK OR USE CAN BEGIN, FOR MORE INFORMATION CONTACT THE ONE STOP SHOP PERMIT CENTER AT 443-984-1809.

CONTINUE TO USE ENTIRE FIRST FLOOR AS A RESTAURANT WITH CLASS 'B' BEER, WINE AND LIQUOR LICENSE AND OUTDOOR TABLE SERVICE ON SIDEWALK IN FRONT OF RESTAURANT PER BMZA 2017-194, APPROVED 06/06/17 WITH CONDITIONS AND ADDITION OF LIVE ENTERTAINMENT.

### **AFFIDAVIT BY: ELAINE PAPPAS**

THE OWNER OF THE DESCRIBED PROPERTY FOR THE PROJECT NAMED BELOW HEREBY APPROVED THIS PERMIT APPLICATION AND AGREES TO COMPLY WITH ALL ORDINANCES OF THE MAYOR AND CITY COUNCIL OF BALTIMORE AND TO DO NO WORK NOT SPECIFICALLY COVERED BY THIS APPLICATION. "I DECLARE UNDER PENALTIES OF PERJURY THAT THIS APPLICATION, INCLUDING ANY ACCOMPANYING PLANS, SPECIFICATIONS, ETC. HAS BEEN EXAMINED BY ME AND TO THE BEST OF MY KNOWLEDGE AND BELIEF IS A TRUE, CORRECT AND COMPLETE STATEMENT OF THE WORK TO BE COVERED BY THIS APPLICATION. I ALSO DECLARE THAT I AM THE OWNER OR HAVE SPECIFIC APPROVAL OF THE OWNER TO ACT AS AGENT FOR THIS APPLICATION.

Project Name:

801 S. BROADWAY

Owner First Name:

Role:

Agent

Owner Last Name Or 801 S. BROADWAY

Appicant:

PAPPAS, ELAINE

Company Name: Phone:

Project Note:

Address1: Address2: City:

State: Zip:

### December 16, 2021

Applicant(s): Christian Wilkens

Happy Dog, Inc., T/a Todd Conner's,

700 S. Broadway 21231

Class: "BD7" Beer, Wine & Liquor License

Application to transfer ownership with continuation of outdoor table service.

(a) **Applicant(s) Information**: (1) Christian Wilkens was born Portsmouth, VA in March of 1975. He lives in Baltimore, MD.

- (b) Ownership Breakdown: (1) Christian Wilkens (100%).
- (c) Purchase Price of Business: The purchase price of the business is \$500 (intra-family stock transfer).
- (d) **Qualified Voters**: Charles Uttenreither, Mary Uttenreither, and Abraham Hurdle are qualified Baltimore City voters.
- (e) **Zoning**: Applicant has applied for a USE permit, for the continued use of the premise as a restaurant/tavern, basement for storage and continued use of outdoor table service.
- (f) Corporate Standing: Happy Dog, Inc. is a MD Corporation and as of 11/29/2021 is active and in good standing.
- (g) **Posting Report**: The location was posted on 11/17/2021, and checked on 11/26/2021. This meets the 10-day rule. There are 40 licensed liquor establishment(s) in the 2x2 area: "D" BW-1; "B" BWL-19; "C" BWL-2; D" BWL-3; and "BD7" BWL-15.
- (h) **Timeline**: Last Inspection by BLLC was performed 10/31/2021. At that time, the establishment was open and operating.
- (i) Letters of Support/Opposition: At this time the Board has no letter(s) of opposition or support.

In considering this request, under the provisions of Alcohol Beverages Article 4-210(A) the Board must consider the following factors: 1. The public need and desire for the license; 2. The number and location of existing license holders; 3. The potential effect on existing license holders of the license for which application is made; 4. The potential commonality or uniqueness of the services and products to be offered by the business of the applicant; 5. The impact of the license for which application is made on the health, safety, and welfare of the community, including issues relating to crime, traffic conditions, parking, or convenience; and 6. Any other factor that the local licensing Board considers necessary.

### Board's Decision:

# 2020 Application for Alcoholic Beverages License Board of Liquor License Commissioners for Baltimore City

# NEW/TRANSFER/EXPANSION/AMENOMENT(S) APPLICATION FEE - \$600.00

| INDICATE TYPE OF LICENSE APP                                 | LICATION: TRANSFI                       | R 🖸 NE                   | W 🗆 EXPANS          | SION OF PREMISES 🗆 AMENDMENT(S) 🗆                   | ]            |
|--|---|--------------------------|---------------------|---|--------------|
| EXPLANATION OF REQUEST:transfe                               | r of stock ownership ar                 | nd removal/r             | resignation of lic  | censees/officers CLASS TYPE: LBD7                   | _            |
|  | Please select one o                     | ption and fill i         | out the requested   | I information                                       |              |
| A) NEW LICENSE REQUEST: ADDRESS O                            | F PROPOSED LOCATION:                    |                          |                     |   |              |
| B) TRANSFER OF OWNERSHIP DNLY: A                             |   |                          |                     |   |              |
|  |   |                          |                     |   |              |
|  |   |                          |                     |   | l l          |
|  |   |                          |                     |   |              |
| ·  |   |                          |                     |   |              |
| CORPORATE/LLC/LLP/PARTNERSHIP NAM                            | Е: Нарру Dog                            | j, inc.                  | TRAI                | DE NAME: Todd Conner's                              |              |
| BUSINESS PHONE NUMBER: 410-537                               | -5005 BUSINESS E                        | MAIL ADDRESS             | S:                  |   |              |
|  |   |                          |                     |   |              |
| Part of Premises Used (Nate: Floors and Areas for            | Charana 1st floor and basem             | ent for Da               | tdaar Table Sorvice | Provided? ☑ Yes ☐ No Delivery of alcahol? ☐ Yes ☐   | 7 No.        |
| Live Entertainment pravided?   Yes   No Who                  | at Kind ( <i>Ex. D.J. Band. Etc.</i> )? | Storag                   | 2.                  | Off Premise Cetering of Food and Alcohol? 🗀 Yes [   | zmu<br>ZNa ∠ |
| Zoning Receipt or Current Certificate of Occupe              |   |                          |                     | d Senting Capacity: 83 Occubar                      | acy capacity |
| Please note that as per Alc. Boy. Art. 8 12-                 | 1407(A)(2), an application              | for the issuen           | ice or transfer, is | not complete unless the applicant has obtained appr | oval /       |
|  | and/or varification from t              | he Baltimora i           | Municipal Zoning A  | ppeals (BMZA)                                       | /            |
| Applicant A     Christian Wilkins                            |   |                          |                     |   |              |
| (Full name)  | (Teleph                                 | топепа.)                 |                     | E-mail (Required)                                   |              |
| 231 S. Chapel Street (Residence) Street                      | Baltimore<br>City                       | MD<br>State              | 21231<br>Zip Code   | 13 years<br>(period of residency in Baltimore City) |              |
| 03/1975  | ,                                       | fale                     | չւի գորբ            | Portsmouth, VA                                      |              |
| (Month/Year of Birth)  |   | Male or Fema             | ale)                | (Place of Birth)                                    |              |
| Check: 🖾 Yes 🗖 No Are you currently                          | a resident of the City of Ba            | timere?                  |                     |   |              |
| 2. Applicant B   |   |                          |                     |   |              |
| (Full name)  | (Teleph                                 | ione no.)                |                     | E-mail (Required)                                   |              |
| (Residence)Street  | City                                    | State                    | Zip Code            | (period of residency in Baltimore City)             |              |
| (Month/Year of Birth) Check:  Yes  No Are you currently      |   | Male or Fema<br>timore?  | de)                 | (Place of Birth)                                    |              |
| 3. Applicant C   |   |                          |                     |   |              |
| (full name)  | (Teleph                                 | опе по.)                 | ····                | E-mail (Required)                                   |              |
| (Residence) Street   | City                                    | State                    | Zip Code            | ECEIVED City)                                       |              |
| (Month/Year of Birth)<br>Chack: ☐ Yes ☐ No Are you currently |   | Male or Fema<br>Itimere? | le)                 | (Place of Birth) MAR 0 4 2021                       |              |
|  |   |                          |                     | 0 - 7051  |              |

Liquor Board

|  | B 🗆   |  | 4 S.S. S. F. S.S.  |
|--|---|--|--|
|  |   |  |  |
| ryland? 🗆 Ye   | s <b>He</b> No - H  | ijudged guilty of violating the laws-governing the sale of any alcoholic-beverage or for gambling in any S<br>yes, one was applicant and provide explanation in adjacent space provided.   | tete, includ   |
| plicant A 🗆  |   |  |  |
| A.   | DU:   | [ Portsmouth, VA. in 2006  |  |
| e United States  | , or against  | t(s) has ever been adjudged guilty of any offense against the laws of the State of Maryland, any other<br>the United States (Federal Crime)? 🖬 Yes 🗆 No - If yes, mark applicant and explain.  | State with   |
| plicant A 🗆  | 8 🗆   |  |  |
| plain (address   | of location,  | ned a license for the sele of elcoholic beverages in the State of Maryland? 🗹 Yes 🗆 No If yes, mark a<br>dates that the applicant was a licensee, and the trade name).   | plicant and  |
| plicent A 🗆<br>Chrìst  | eo<br>Lian  | Wilkins has had this license since   | 2015   |
|  |   |  |  |
|  |   | a financial interest in any other alcoholic beverage business or business for which an alcoholic bevera  | ge license   |
| s been applied i   |   |  | ge license   |
| s been applied t<br>plicant A 🗆  | or, grantec<br>8 🗀  | e finencial interest in any other elcoholic beverage business or business for which an elcoholic bevera<br>and issued?  Yes <b>12</b> No If yes, mark applicant and explain (address of location and trade name). C  |  |
| s been applied t<br>plicent A []<br>Do the spouses o<br>Utimore City or a  | or, granted<br>B 🗀<br>or dependen                         | a financial interest in any other alcoholic beverage business or business for which an alcoholic bevera<br>and issued?   Yes W No If yes, mark applicant and explain (address of location and trade name).   | ness in  |
| s been applied to<br>plicent A []<br>Do the spouses of<br>Itimore City or a<br>plicent A []  | or, granted B   Or dependen Iny other jun B               | a financial interest in any other alcoholic beverage business or business for which an alcoholic bevera and issued?   Yes 12 No If yes, merk epplicant and explain (address of location and trade name).  C   children of any of the applicant(s) have a financial interest in any other elcoholic beverages license or busing the state of Maryland?   Yes 12 No If yes, mark applicant and explain (address of location and C  | ness in<br>trade name  |
| s been applied i<br>plicant A []<br>Oo the spouses o<br>ltimore City or a<br>plicant A []<br>Are you financia                                | or, granted B   Or dependen Iny other jun B               | a financial interest in any other elcoholic beverage business or business for which an alcoholic bevera and issued?   Yes Mo If yes, mark applicant and explain (address of location and trade name).  C   children of any of the applicant(s) have a financial interest in any other elcoholic beverages license or busing the state of Maryland?   Yes Mo If yes, mark applicant and axplain (address of location and  | ness in<br>trade name  |
| s been applied in plicent. A []  Do the spouses of timore City or a plicent. A []  Are you finance plicent. A []                             | or, granted B   or dependen my other jur B   ally interes | a financial interest in any other alcoholic beverage business or business for which an alcoholic bevera and issued?  Yes 12 No If yes, merk applicant and explain (address of location and trade name). C  C  C  C  C  C  C  C  C  C  C  C  C  | ness in<br>trade name<br>slain.                                      |
| s been applied in plicent. A []  Do the spouses of timore City or a plicent. A []  Are you finance plicent. A []                             | or, granted B   or dependen my other jur B   ally interes | a financial interest in any other alcoholic beverage business or business for which an alcoholic bevera and issued?  Yes 12 No If yes, mark applicant and explain (address of location and trade name).  C   children of any of the applicant(s) have a financial interest in any other elcoholic beverages license or busing license of Maryland?  Yes 12 No If yes, mark applicant and explain (address of location and C   ed in any other alcoholic beverages license applied, granted or issued?  Yes 12 No If yes, plaase explain and explain the state of the st | ness in<br>trade name<br>Jain.                                       |
| s been applied it plicant A []  Do the spouses of timore City or a plicant A []  Are you financia plicant A []  Is the ficensed plicant A [] | or, granted B   | a financial interest in any other alcoholic beverage business or business for which an alcoholic beverage and issued?   Yes Mo If yes, mark applicant and explain (address of location and trade name).  C   children of any of the applicant(s) have a financial interest in any other elcoholic beverages license or busing is diction in the State of Maryland?   Yes Mo If yes, mark applicant and explain (address of location and C   rantly open and operating? Mo Yes   No If no, then provide data of last day of operation of the establicant and explain through an entity — have any indebtodness or other financial obligations to any manufaction at the time of making this application?   Yes Mo If yes, please explain. If yes, please provide information of the establicant and explain.  | ness in<br>trade name<br>slain.<br>slament.<br>cturer,<br>rmation as |
| s been applied it plicant A []  Do the spouses of timore City or a plicant A []  Are you financia plicant A []  Is the ficensed plicant A [] | or, granted B   | a financial interest in any other alcoholic beverage business or business for which an alcoholic beverage and issued?   Yes 12 No If yes, merk applicant and explain (address of location and trade name).  C   children of any of the applicant(s) have a financial interest in any other alcoholic beverages license or busing solution in the State of Maryland?   Yes 12 No If yes, mark applicant and explain (address of location and C   ed in any other alcoholic beverages license applied, granted or issued?   Yes 14 No If yes, plaase explain operating?   No If no, then provide data of last day of operation of the establicant and | ness in<br>trade name<br>slain.<br>slament.<br>cturer,<br>rmation as |

| Name   | Address   | Phon   | e  | Email  |
|--|---|--|--|--|
| CHRISTIAN WILKINS Z  | SI S CHAPELSTO<br>ALTIMORE MD 7   | 123  |  |  |
| Applicants Applying as Business Entities - (Give n<br>list all authorized persons.) Phase note that all<br>plass attach a list of the names and address<br>incorporation, partnership agreement or arti  | ame(s) and addresses - in Gi<br>licensees MI/ST have a FIHA<br>of all outstanding stock how<br>iclas of organization. | orporation list all officers (attach lis<br>INCIAL INTEREST in the license ap<br>Iders who at the time of applicati    | optied for as par Alc. B<br>ion own any stock of th<br>Pres: C | lay, Art. § 4-109 (a) (11), If nacessary,<br>in ecorporation and the articles of<br>CC TyP QS. |
| 1) NAME CHRYSLIAN WILLIAMS   | _ADDRESS: Z31S  | CHAPEL STREET<br>IMPRE, MP 21231   | MILE OWNER   | %OF STOCK HELD: 100 70   |
| 2) NAME:   | ADDRESS:  |  | NTLE:  | %OF STOCK HELO:  |
| 3) NAME:   | ADDRESS:  |  | _NTLE:   | %OF STOCK HELD:  |
| 4 NAME:  | ADDRESS:  |  | MTLE:  | %OF STOCK HELD:  |
| *Extract from Law: If any affidavit or oath req<br>guilty of parjury. And upon indictment and c  | uired under the provisions of<br>Conviction thereof, shall be   | of this Act shall contain any false s<br>a subject to penalties accorded.  | statements, the offende<br>by I aw for that crime              | er shall be deemed   |
| Signature of Applicant B  Signature of Applicant B  Signature:  Si | et the duration of this licen  L. 20 before  Christian  | se.  | o' the State of  | application made oath in due form of law   |
| Thereby certify that on the day of   | 20 before r   | ne, the subscriber, a notary public  | of the State of  | in and Inc   |
| personally appeared that the matter and facts contained in said applica  | ation are true and correct. As  | the app<br>s witness, my hand and notarial sea   | al cant(s) named in this<br>L                                  | application made both in due form of law   |
| Signature:   |   | [Hotory Seal] My Commission ex   | pires  |  |
| Printed Name:  |   | <u> </u>   |  |  |
| Signature of Applicant C  I hereby certify that on the day of, personally appeared that the matter and facts contained in said applica   | 20 before n   | ne, the subscriber, a notery public<br>the app<br>witness, my hand and noterial sea<br>[Katary Seal] My Commission exp |  |  |
| Printed Name   |   | Commit north sit nations 2001 62   | м 63   | <del></del>  |

TSP PNOTNERS LLC
HCWARD BARKHOP
8316 BURNING WOOD RUAD
Name and Address of the owners of the premise/landford: BATIMOR, MD 71728
Phone N

| ber: |  |
|------|--|
|      |  |

| (1. WE) HOWARD BARS   | OF PREMISES REQUIRED IN CONNECTION HOP FOR SSP PA   | CTNERS LLC   | -  | HEREBY CERTIFY,   |
|---|---|--|--|---|
| Code of <u>21231</u> which under the Alcoholic Beverage Laws o  | he property located at TOO ST<br>is named in the present application made<br>of Maryland and assent to the granting of<br>and clerks, the Board of Liquor License I   | e to the Board of Liquor Lice<br>the license applied for, and l                                  | nse Commissioner<br>ereby authorize th   | e State Comptroller, his  |
| employees, and any peace officer of   | the City of Baltimore and State of Maryle<br>any and all parts of the building in which   | and, to inspect and search, w  | ithout warrant, the  | premises upon which   |
| Signature of Owner of the Proper  | rty 5   |  | $\neg w$   | angland in and  |
| for <u>15a (70, 0).</u> persona   | ly of <u>FED 2W42</u> , 20 <u>21</u> , before me, the<br>lly appeared <u>HOWArd</u><br>application made oath in due form of law th  | at the matter and facts contain  | フ <u> 5 P Pa P</u><br>ed in said application   | thers, the  |
| As witness, my hand and notarial seal. Notary Signature: <u>Elaw</u>  | e Pappas [Nota  | 7 ' u r<br>ry Seel) My Commission expire   | 1agement<br>5   1   19   | 2022  |
| Notary Printed Name: <u>Elgi</u>  | re Pappas   | ,  |  |   |
|   | 1 4   |  |  | d.  |
| We, the undersigned citizens, r<br>covered by the present applicat<br>us and is a resident of Baltimor                                | The following certificates must be eal estate owners and registered vion is to be conducted. We certify to Eity and a resident of the State   | voters in the City of Balti<br>that the qualifying applic  | more in which the ant(s) is/are peof of this application   | rsonally known to   |
| We, the undersigned citizens, r<br>covered by the present applicat<br>us and is a resident of Baltimor<br>Names                       | eal estate owners and registered vion is to be conducted. We certify to Eity and a resident of the State Address  | voters in the City of Balti<br>that the qualifying applic  | more in which t<br>ant(s) is/are pe  | rsonally known to   |
| We, the undersigned citizens, r covered by the present applicat us and is a resident of Baltimor  Names  Pallie Sika                  | eal estate owners and registered vion is to be conducted. We certify to Eity and a resident of the State  | roters in the City of Balti<br>hat the qualifying applic<br>of Maryland at the time<br>Signature | more in which the ant(s) is/are peof this application of the control of the contr | rsonally known to<br>en.<br>Leogth of time<br>Acquainted with the |
| We, the undersigned citizens, r covered by the present applicat us and is a resident of Baltimor  Names  Railing  Kory  Kory  Michell | Address  Address  ADD S. BRODDWOY  RPT B  TOY A LECAME ST.  2123 i  | roters in the City of Balti<br>hat the qualifying applic<br>of Maryland at the time<br>Signature | nore in which the ant(s) is/are per of this application (Month/Year)   | Leogth of time Acquainted with the Applicant(s)  12 yrs.          |
| We, the undersigned citizens, r covered by the present applicat us and is a resident of Baltimor  Names  Pallie Sika                  | eal estate owners and registered to ion is to be conducted. We certify to e City and a resident of the State | roters in the City of Balti<br>hat the qualifying applic<br>of Maryland at the time<br>Signature | more in which the ant(s) is/are peof this application (Month/Year)   | rsonally known to<br>en.<br>Leogth of time<br>Acquainted with the |
| We, the undersigned citizens, r covered by the present applicat us and is a resident of Baltimor  Names  Railing  Kory  Kory  Michell | Address  Address  Address  ADD S. BRODDWOY  BRUTTON A LEGAME ST.  21231   | roters in the City of Balti<br>hat the qualifying applic<br>of Maryland at the time<br>Signature | nore in which the ant(s) is/are per of this application (Month/Year)   | Leogth of time Acquainted with the Applicant(s)  12 yrs.          |

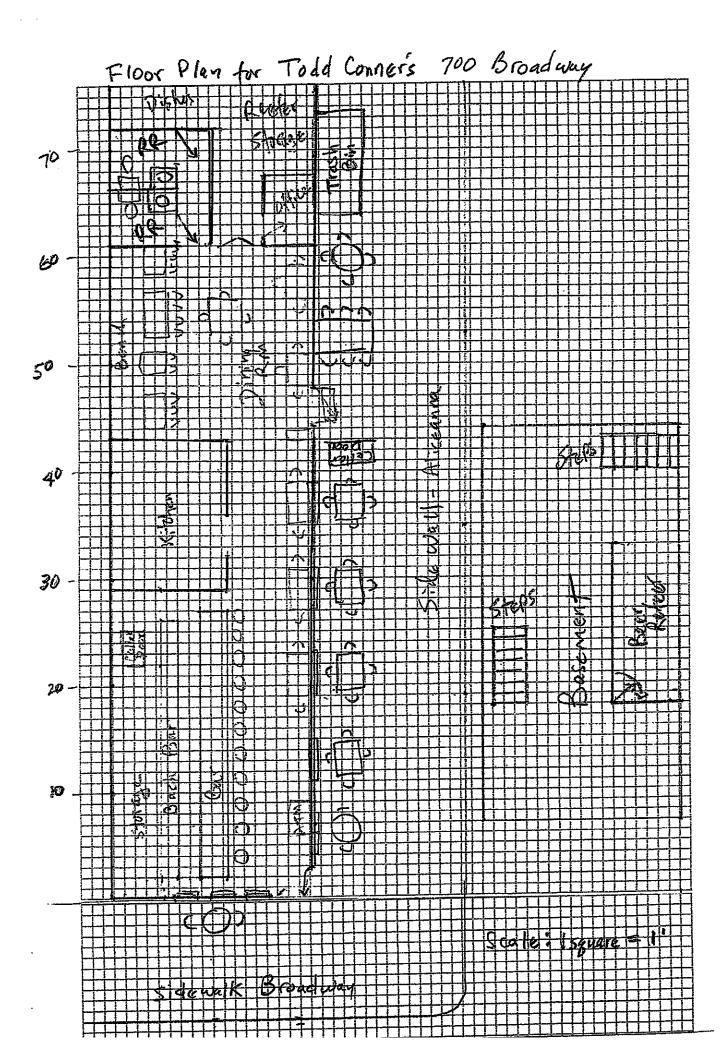
Board of Liquor License Commissioners for the City of Baltimore l North Charles Street, Suite 1500, Baltimore, Maryland 21201 Phone: 410-396-4377 Fax: 410-396-4382

Please note that this is a public document and upon request will be provided to the general members of the public.

| Name and Address of the owners of the   | premise/lendord:  |   | Phone Number: _  |   |
|---|---|---|--|---|
| (I, WE) That (I am. we are) the owner(s) of the Code of, which is under the Alcoholic Beverage Laws of duly authorized deputies, inspectors a employees, and any neece officer of ti  | of PREMISES REQUIRED BY CONNECTION We property located at   | to the Board of Liquer Licens<br>he license applied for, and her<br>omnissioners of Beltimore Ci<br>nd, to inspect and search, with | . Baltim<br>e Commissioners<br>eby authorize the<br>ty, its duly authori<br>out warrant, the p | HERCHY CERTIFY, ore, City with a Zip of Baktimore City State Comptroller, his ized agents and oremises upon which |
| Signature of Uwner of the Propert  I hereby certify that on the day for personall landford/property owner named in this a   | y of, 20, before me, th<br>y appeared<br>pplication made oath in due form of law tha  | e subscriber, a notery public of<br>t the metter and facts contained  | the State of   | in and<br>the<br>are true and correct.  |
| As witness, my hand and notarial seal.  |   |   |  |   |
| Notary Signature:   | (Notes  | ry Szel] Ny Commission expires  |  |   |
| Notary Printed Name:  |   |   |  |   |
| We, the undersigned citizens, re<br>covered by the present application  | The following certificates must be<br>sal estate owners and registered v<br>on is to be conducted. We certify t<br>e City and a resident of the State ( | niers in the City of Baltin<br>hat the qualifying applica<br>of Maryland at the time o  | nore in which ti<br>nt(s) is/are pe<br>f this applicati  | rsonally known to<br>on.  |
| Marine :  | Address   | Signatura   | DOB<br>(Month/Year)  | Langth of time<br>Acquainted with the<br>Applicant(s)   |
| Charles Uttenneither  | 6265. Kenwood   | Charles letteni   | 12 55  | 7   |
| Mary Uteninther   | 6 J4  | Marylettonici   | w 11 55  | 8   |
| Abraham L. Hurdle   | 1949 Entani Place   | Alrahanthud   | le-4182  | 4   |
| - Note that the second |   |   |  |   |

Board of Liquor License Commissioners for the City of Baltimore 1 North Charles Street, Suite 1500, Baltimore, Maryland 21201 Phone: 410-396-4377 Fax: 410-396-4382

Please note that this is a poblic document and epon request will be provided to the general members of the public.





# **Liquor Board System**

Version 1.0

Annual-Renewal ▼ | License-Transfer ▼ | One-Day ▼ | Add New License ▼ | Query ▼

License Detail

Close the License

**Print License** 

**Print Renewal Letter** 

<< Go Back

License Info

License Num: LBD7 325

Cert Num: 0865

Fee: \$1,320.00

Status: Renewed

License Date:5/1/2021

License Year: 2021

CR Number: 12940835

Payment Date: 08-20-21

2020 - 2021 TPP Paid N

2021 Trader's License ✓ Y

Update Info

Click to Start License Renewal

Add Adult Entertainment License

Add New Adult Entertainement License

Location

Corp Name: HAPPY DOG, INC. Trade Name: TODD CONNER'S

Zone Code: 23

Phone: 410-537-5005

Block Num: 700

Street: BROADWAY SOUTH

City: BALTIMORE

State: MD

Zip: 21231

CR Number: 12940835

Portion of Business Used:

CONTINUE TO USE ENTIRE FIRST FLOOR AS A RESTAURANT/TAVERN (BASEMENT FOR

STORAGE) AND CONTUNUED USE OF OUTDOOR TABLE SERVICES

Restriction:

| Edit the License Location Info | Alternate Mailing Address |
|--------------------------------|---------------------------|
|                                |                           |

### **License Owners**

| 2.0000     |           |                      |            |       |       |        |              |
|------------|-----------|----------------------|------------|-------|-------|--------|--------------|
| First Name | Last Name | Street               | City       | State | Zip   | Action | Change Owner |
| DEBORAH O. | BAKER     | 3613 HARDING DRIVE   | CHESAPEAKE | VA    | 23321 | Edit   | Remove Owner |
| ROBERT     | BAKER     | 3613 HARDING DRIVE   | CHESAPEAKE | VA    | 23321 | Edit   | Remove Owner |
| CHRISTIAN  | WILKINS   | 231 S. CHAPEL STREET | BALTIMORE  | MD    | 21231 | Edit   | Remove Owner |

# **Comments**

| Date       | Comment  | Action |
|------------|--|--------|
| 11/05/2021 | Application for transfer of ownership with continuation of outdoor table service filed on behalf of Happy Dog, Inc. T/a Todd Conner's, Christian Wilkins on 3/4/2021 /kk   | Delete |
|            | Due to Baltimore City Health Department COVID-19 Guidance for Mass Gatherings Special Event Permit # ROW2019-SE1024799 and License Extensions were revoked. Licensees were informed via letter that was delivered by an Inspector on March 12, 2020 /sb                  | Delete |
|            | PAID IN FULL \$475.00 FOR VIOLATION HEARING DATED NOVEMBER 21, 2019; Invoice #118424/sb  | Delete |
|            | Given an Invoice to Acting Chief Inspector John Chrissomallis for Violation Hearing fee dated on November 21, 2019; Fine Fee to be paid \$475.00 /mb.  | Delete |
|            | 11/21/2019 - Public Hearing Re: Violation of Rule 4.01(a) Sales to Minors - ADMISSION OF GUILT - Rule 4.01(a)-Fined \$350; \$350 + \$125 admin fee; \$475 total fine, 30 days to pay (3-0 vote)/jr   | Delete |
| 10/30/2019 | Personal Property Tax Owed to City of Baltimore was cleared and the business is in Good Standing as per the email received from Law Department on October 29, 2019/mb.   | Delete |
| 09/26/2019 | ***PERSONAL PROPERTY TAX OWED TO CITY OF BALTIMORE Letter sent to Licensee/s Home<br>Address on September 26, 2019.*** /mb   | Delete |
|            | Submitted 2018 Trader's License/sb   | Delete |
|            | *****Application has been process. Please check invoice #113447***Application for transfer of ownership with continuation of outdoor table service filed on behalf of Happy Dog, Inc. T/a Todd Conners, Christian Wilkins, Robert Baker, and Deborah Baker on 2/6/18 /kr | Delete |
| 04/06/2018 | 4/5/2018 - Public Hearing RE: Application to transfer ownership with continuation of outdoor table service - APPROVED (3-0 Vote)/jr  | Delete |
| 02/14/2018 | Application for transfer of ownership with continuation of outdoor table service filed on behalf of Happy Dog, Inc. T/a Todd Conners, Christian Wilkins, Robert Baker, and Deborah Baker on 2/6/18 /kk   | Delete |
|            | 09/06/07 Transfer Conf.re: Application to transfer ownership.DECISION: TRANSFER APPROVED.<br>MUST PAY CONF.FEE \$100.  | Delete |

Print History (Print Card)

| License num: LBD7 325   | Address 700 BROADWAY SOUTH |
|-------------------------|----------------------------|
| LICENSE HOITI, LDD7 323 | Address 700 BROADWAT SOUTH |

Trade Name: TODD CONNER'S

| Comment: |  |  |  |
|----------|--|--|--|
|          |  | WW. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. |  |
|          |  |  |  |
|          |  |  |  |
|          |  |  |  |
|          |  |  |  |

Hold Info



| HAPPY DOG, INC.: D12011391         |
|------------------------------------|
| Department ID Number:<br>D12011391 |
| Business Name:                     |
| HAPPY DOG, INC.                    |
| Principal Office:                  |
| 700 S. BROADWAY                    |
| BALTIMORE MD 21231                 |
| Resident Agent: 1                  |
| CRAIG M SCHWARTZ                   |
| 409 WASHINGTON AVE STE 300         |
| TOWSON MD 21204                    |
| Status:                            |
| REVIVED                            |
| Good Standing:                     |
| THIS BUSINESS IS IN GOOD STANDING  |
| Business Type:                     |
| CORPORATION                        |
| Business Code:                     |
| 03 ORDINARY BUSINESS - STOCK       |
| Date of Formation/ Registration:   |
| 06/28/2007                         |
| State of Formation:                |
| MD                                 |
| Stock Status:                      |
| STOCK                              |

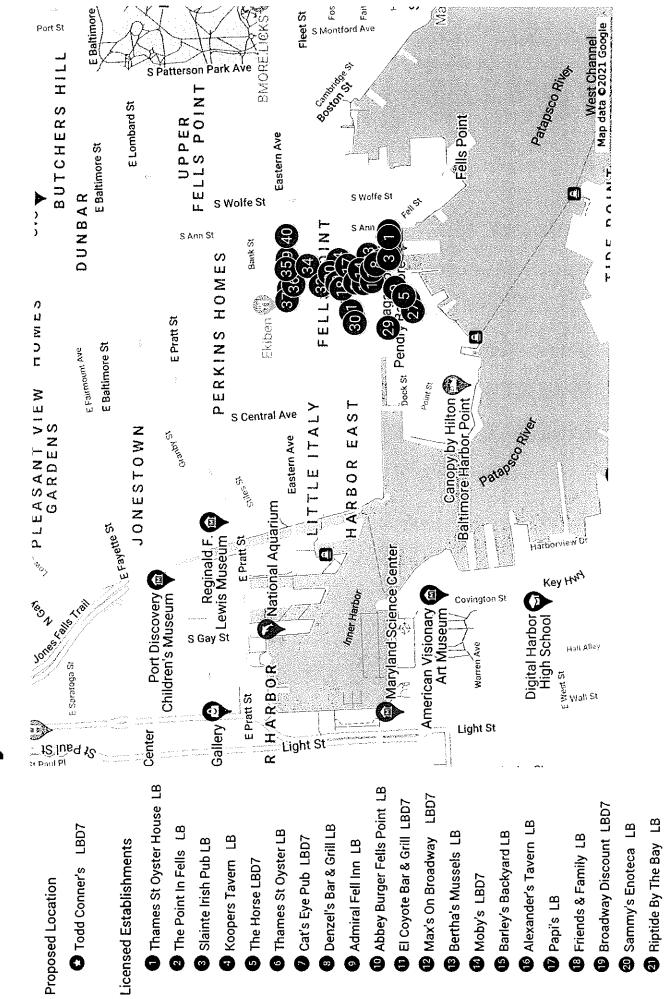
Close Status:

YES

PROPOSED LOCATION: 700 S. Broadway

| MAP             | SUMMARY (RECAPITULATION)     |  |
|-----------------|------------------------------|--|
| TOTAL ESTABLISE | HMENTS IN MAP AREA <u>40</u> |  |
|                 | "A" BEER & WINE              |  |
|                 | "B" BEER & WINE              |  |
|                 | "C" BEER & WINE              |  |
|                 | "D" BEER & WINE              |  |
|                 | "A" BEER, WINE & LIQUOR      |  |
|                 | "A-2" BEER, WINE & LIQUOR    |  |
|                 | -B" BEER, WINE & LIQUOR      |  |
|                 | "C" BEER, WINE & LIQUOR      |  |
|                 | +D+ BEER, WINE & LIQUOR3     |  |
|                 | "BD7" BEER, WINE & LIQUOR    |  |
|                 | ARENA                        |  |
|                 | HOTEL/MOTEL                  |  |
|                 | RACING                       |  |
|                 |                              |  |
| DDEDADEN RV     | Pevez DATE: W24/21           |  |

# 700 S. Broadway



Waterfront Hotel Bar LBD7

Birds of A Feather LD

25 Louisiana Restaurant LB

 Fells Point Tavern LBD7 **®** Full Moon Saloon LBD7

The Sound Garden WD

The Black Olive LB

30 One-Eyed Mike's LBD7

Bondhouse LBD7

Kippo Ramen LB

Sammy's Enoteca LB

3 Sajhoma LBD7 Bristol LBD7

Polish Home Club LC

Polish National Alliance LC

3 New Ritz LBD7

🥸 Enigma Bar LD

Peter's Inn LD

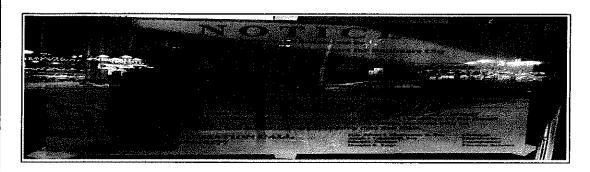
# **Board of Liquor License Commissioners**

For Baltimore City 1 North Charles Street, 15th Floor Baltimore, Maryland, 21201

| INSPECTORS REPORT - TRANSI   | FERS/NEW APPLICATIONS             |
|--|-----------------------------------|
| Licensee Information (Trade Name):   | Todd Conner's                     |
| Corporation Name:  | Happy Dog, Inc.                   |
| Location Address:  | 700 S. Broadway                   |
| License Type:  | Class "BD7" Beer, Wine and Liquor |
| Is the establishment open and operating in a safe and sanitary manner?<br>(If not open, not in comments - CLOSED or NOT OPERATING) | 163                               |
| Is the location within 300 feet of Church and/or School?   | No ¥                              |
| Date Posted?   | 10/17/2021                        |
| Estimated Date of Removal?   | 10/26/2021                        |
| Are there any other licensed establishments within a two block radius?   | Yes 💙                             |
| Other licensed locations - Describe/Note:  |                                   |
| See attached map   |                                   |
| Comments and Follow-up Items(s) (please note any issues or concerns abo  | out the location):                |
| application for transfer of ownership with continuation of outdoors table s  |                                   |

Insert Photo of Sign and location:

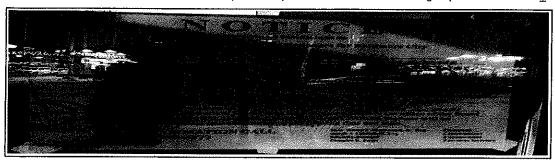






| Inspector Name                        |  |  | Date and Time | Date and Time |  |  |
|---------------------------------------|--|--|---------------|---------------|--|--|
| i:O#.w baltimore\andy.perez           |  |  | 11/23/2021    | 12:38:45 AM   |  |  |
| · · · · · · · · · · · · · · · · · · · |  |  |               |               |  |  |
| lame of Licensee (if present)         |  |  |               |               |  |  |
|                                       |  |  |               |               |  |  |

| Board of Liquor Licens                                   |                             |
|--|-----------------------------|
| For Baltimore<br>1 North Charles Stree                   |                             |
| Baltimore, Marylai                                       |                             |
| POSTING SIGN   |                             |
| Applicant(s) Name:                                       | Christian Wilkins           |
| Address of Premises:                                     | 700 S. Broadway             |
| Inspector:   | i:0#.w baltimore\andy.perez |
| Date Posted:   | 11/17/2021                  |
| Time Posted:   |                             |
| Date Rechecked:  | 11/26/2021                  |
| Time Rechecked:  |                             |
| Manager or Owner when sign posted:                       |                             |
| Summary on location of sign posted:                      |                             |
|  |                             |
| Sign posted on side window facing Fleet St.              |                             |
| Summary on location of sign rechecked:                   |                             |
| Summary on rocution of significances.                    |                             |
|  |                             |
| Sign remained as posted for the required 10 days period. |                             |
|  |                             |
|  |                             |
|  |                             |
| Insert Photo of Sign and location:                       |                             |
|  |                             |
|  |                             |





Attach Additional Photos

Approve

Disapprove

Back

# **BLLC Routine Inspection**

|                                | under the control of |
|--------------------------------|---|
| Address:                       | 700 BROADWAY SOUTH 21231  |
| Trade Name:                    | TODD CONNER'S   |
| Corporation Name               | HAPPY DOG, INC.   |
| Type of License:               | Class "BD7" Beer, Wine and Liquor   |
| Date/Time of Inspection:       | 11/23/2021 3:21:25 PM   |
| Manager/Licensee               | Edward Rorls  |
| Open/Closed:                   | Open/Closed Status  Open   ✓  |
| Closed Date:                   |   |
| Clean and Free of Debris:      | External Appearance  Satisfactory  ✓  Internal Appearance   |
| Location of Bar:               | Front V   |
| Shape of Bar:                  | straight  |
| Condition of Bar Area/Floors:  | Satisfactory  |
| Hot Water:                     | Yes ✓   |
| Disinfectant Solution:         | Yes 🗸   |
| Three Compartment/Washer:      | Yes 🗸   |
|                                | Package Goods/8D7 Checklist   |
| Bulletproof Partitioning:      | No 🕶  |
| Separate Pkg. Goods Dept.:     | No 🗸  |
| Separate Pkg. Goods Store:     | No 🗸  |
| Bar/Tovern Open and Operating: | Yes 🗸   |

| Selling Household/Grocery:                                | No                |   | •                |
|---|-------------------|---|------------------|
|   |                   |   | Dining Area      |
| Capacity:   |                   |   |                  |
| , ,   |                   |   |                  |
| Location of Dining Area:                                  | rear              |   |                  |
| Condition of Dining Area/Floors:                          | Cabialasta        |   |                  |
| contaction of coming Parcay Floors.                       | Satisfactory      |   | *                |
| Sanitation:   | Satisfactory      |   | •                |
| Menu:   |                   |   |                  |
| тепи.   | Yes               |   | *                |
|   |                   |   | Business Records |
| Traders License:  | Yes               | ~   |                  |
| Alcohol Awareness Certification Date                      |                   | NAME OF THE PARTY |                  |
| Issued:   | 9/24/2018         |   |                  |
| Employee Records:   | Yes               | ~   |                  |
| Alaskal Davisania takan dia tanàn                         |                   |   | ······           |
| Alcohol Beverage Information Invoice<br>Numbers and Date: | to be provided    |   |                  |
|   |                   |   | Kitchen          |
| Inspector Comments:                                       | center/satisfacte | ory   |                  |
|   |                   |   |                  |
|   |                   |   |                  |
|   |                   |   |                  |
|   |                   |   |                  |
|   |                   |   | - Restroom       |
| Inspector Comments:                                       | rear/satisfactory |   |                  |
|   | ,,,               |   |                  |
|   |                   |   |                  |
|   |                   |   |                  |
|   |                   |   |                  |
|   |                   |   |                  |
|   |                   |   | Public Safety    |
| Exits Marked, Unobstructed:                               | Yes               |   | •                |
|   |                   |   |                  |
| Fine Committee  |                   |   |                  |
| Fire Capacity:  | 83                |   |                  |
| Fire Capacity: Outdoor Seating Capacity:                  | 83  not available |   |                  |

Adult Entertainment - If Applicable

License is Valid:

|                                | N/A      | <b>~</b>                                 |  |
|--------------------------------|----------|--|--|
| Dancers Present 18 and older:  | N/A      | •  |  |
| Cleanliness of Dressing Room:  | N/A      | •  |  |
|                                |          | Ancillary Services                       |  |
| Live Entertainment (Describe): | no       |  |  |
|                                |          |  |  |
|                                |          |  |  |
|                                |          |  |  |
| Outdoor Table Service          | Yes      | <b>~</b>                                 |  |
|                                |          | Violations -                             |  |
| Violation Issued:              | No       | •  |  |
| Violations Noted:              |          |  |  |
|                                |          |  |  |
|                                |          |  |  |
|                                |          |  |  |
|                                |          |  |  |
|                                |          |  |  |
|                                | L        |  |  |
|                                |          | Wrap-Up                                  |  |
| nstructions Given to Licensee: | must pro | vide alcoholic beverage invoice to agent |  |
|                                |          |  |  |
|                                |          |  |  |
|                                |          |  |  |
| Inspector's Comments:          | Inspecte | f 11/17/21                               |  |
|                                |          |  |  |
|                                |          |  |  |
|                                |          |  |  |

Photo Taken:



| Owner Email:           | Attach Additional Photos    |            |
|------------------------|-----------------------------|------------|
| Submitted by Inspector | i:0#.w baltimore\andy.perez |            |
|                        | Approve                     | Disapprove |

# **Certificate of Occupancy**

No: USE2018-51332

THIS WRITTEN RASTRUMENT, WHEN PROPERLY VALIDATED, CONSTITUTES AUTHORITY FOR DOING ON RECEIVING THE THINGS HUNCATED BY THE PERS DR CHARGES SHOWN IN THE APPROPRIATE SPACES BRIOW. ANY AND ALL THINGS TO BE DONE OR RECEIVED IN THIS WRITTEN INSTRUMENT SHALL BE DONE OR RECEIVED IN STRICT COMPLIANCE WITH THE APPLICATION HERESTOPES FILED IN THIS DEPARTMENT FOR THE AUTHORITY CONTRACED HEREST, INCLUDING ANY AND ALL LAWS, ORDENANCES, RULES AND REQULATIONS IN REPORT IN THE UTTY OF DALLHAUGE AND THE STATE OF BARYLAND, WARRING! IT IS URLANFELT OWER DET WORK DET WERE THE HOURS OF THE MAD NOT AND SUBJECT TO ANY AND ALL LAWS, ORDENANCES, RULES AND REQULATIONS IN REPORT IN THE UTTY OF DALLHAUGE AND THE STATE OF BARYLAND, WARRING! IT IS URLANFELT OWER DET WERE THE HOURS OF THE MAD THE ART OF DIVISION.

WARNING: IT IS UNLAWFUL TO CONCEAL ANY WORK UNTIL INSPECTED AND APPROVED BY THIS DEPARTMENT.

| WARD | SEC. | BLOCK | LOT | ISSUE DATE | DISTRICT |
|------|------|-------|-----|------------|----------|
| 02   | 05   | 1811  | 001 | 9/27/18    | 201      |
|      |      |       |     |            |          |

PROPERTY ADDRESS:

700 S BROADWAY

OWNER:

JSP PARTNERS, LLC

ADDR:

700 S. BROADWAY BALTIMORE MD

LESSEE:

HAPPY DOG, INC.

ADDR:

700 S. BROADWAY BALTIMORE MD 2

LAND USE CODES 3-50 3-43

CONTINUE TO USE ENTIRE FIRST FLOOR AS A RESTAURANT/TAVERN (BASEMENT FOR STORAGE) AND CONTINUED USE OF OUTDOOR TABLE SERVICE

| 1001-000000-2400-159600-400560              | 1001-000000-2600-158009-40480                       | 1001-000000-2600-158009-400480                   | 1001-000001-3600-151301-400490               | 0   |
|---|---|--|--|---|
| 14ER, THEP.                                 | MPSC  | 1:H. USB 45.00                                   | NEW BLDG.                                    | ADDITIONS                                     |
| 1001-000MB-1400-158302-480498               | 1001-000000-2ron-158304-405496                      | Indi-poped-zeor-istan-ecoryo                     | 1001-000000-2400-154800-400500               | 1001-00000-2600-148901-40051G                 |
| ALTERATIONS                                 | REPAIRS   | MISC. CONST.                                     | BLECT.                                       | HYDRONICSTEAM HEAT                            |
| 1001-000000-7600-157003-460510              | 1001-00000-360-198902-440518                        | \$001-000000-2600-159902-400510                  | 1001-000000-260n-1329n5-400510               | NOT-ROUND EGRISMINAL                          |
| DISTRIBUXH                                  | ARI COND.   | DISP. TANKS                                      | FIRR   | MAIC BCKNING EGRISMINAL                       |
| 1001-000000-2600-1593/10-400336<br>PLEVATOR | 1001-00000-2500-139001-400320<br>PEJJAHRING<br>0.00 | 1001-000000-2600-159000-400520<br>S & R CONTROL. | 1001-0200009-5709-508801-401811<br>CHAP      | 1001-200000-1500-102800-400259<br>TAX<br>3,00 |
| 1001-000000-2600-153306-400490              | 1001-00000-2606-139400-400548                       | DB1-0080D-3660-199400-40540                      | 1991-090906-2400-1550 <del>09-4</del> 00-480 | TOTAL FEES 98.00                              |
| RA/JNG                                      | FILING PER:   | .OW VOLTACH: FILECOMMUNICATIONS                  | PENALTY                                      |   |

THE AUTHORITY CONTAINED HEREIN MAY NOT BE VALIDLY EXERCISED UNTIL AND AFTER ALL OF THE FEES APPEARING HERE HAVE BEEN PAID.

DEFAUTABLE OF HOUSING & CONSTRUCTOR

Please be advised that there is a presumption of lead-based paint in properties constructed prior to 1950. Protect workers and tenants by using the lead-safe work practices found in the Code of Maryland Regulations Section 26.02.07.

THE AUTHORITY CONTAINED HEREIN DOES NOT AUTHORIZE THE PERFORMANCE OF ANY WORK IN. ON, UNDER OR OVER ANY STREET, ILIGIEWAY, ALLEY, SIDEWALK OR ANY OTHER PUBLIC WAY, UNLESS PERMISSION TO DO SO HAS BEEN FIRST SECURED FROM THE PROPER AUTHORITY.

### December 16, 2021

Applicant(s): Kierra Latrice Proctor

P & M Properties Solutions, LLC, T/a Edna's Place.

2148 Wilkens Avenue 21223

Class: "D" Beer, Wine & Liquor License

Application to transfer ownership requesting delivery of alcoholic beverages.

(a) **Applicant(s) Information:** (1) Kierra Latrice Proctor was born in Baltimore, MD in July of 1996. She lives in Baltimore, MD.

- (b) Ownership Breakdown: (1) Kierra Latrice Proctor (5%); and (2) Nigel Proctor (95%).
- (c) **Purchase Price of Business:** The purchase price of the business is \$190,000. Deposit of \$50,000 to be made. Remaining balance of \$140,000 to be financed by seller at 6% interest over 15 years and 5-year balloon payment.
- (d) Qualified Voters: Jacqueline Craig, Lena Cromwell, and Tameshia Lee are qualified Baltimore City voters.
- (e) **Zoning**: Applicant has applied for a USE permit, for the use of the premise as a tavern not including live entertainment and dancing.
- (f) **Corporate Standing:** P & M Properties Solutions, LLC is a MD LLC and as of 11/29/2021 is active and in good standing.
- (g) **Posting Report**: The location was posted on 11/17/2021, and checked on 11/28/2021. This meets the 10-day rule. There are 6 licensed liquor establishment(s) in the 2x2 area: "A" BWL- 3; "D" BWL-1; and "BD7" BWL-2.
- (h) **Timeline**: Last Inspection by BLLC was performed 11/23/2021. At that time, the establishment was open and operating.
- (i) Letters of Support/Opposition: At this time the Board has no letter(s) of opposition or support.

In considering this request, under the provisions of Alcohol Beverages Article 4-210(A) the Board must consider the following factors: 1. The public need and desire for the license; 2. The number and location of existing license holders; 3. The potential effect on existing license holders of the license for which application is made; 4. The potential commonality or uniqueness of the services and products to be offered by the business of the applicant; 5. The impact of the license for which application is made on the health, safety, and welfare of the community, including issues relating to crime, traffic conditions, parking, or convenience; and 6. Any other factor that the local licensing Board considers necessary.

# **Board's Decision:**

# 2020 Application for Alcoholic Beverages License Board of Liquor License Commissioners for Baltimore City

# NEW/TRANSFER/EXPANSION/AMENDMENT(S) APPLICATION FEE - \$600.00

| A) NEW LICENSE REQUEST: ADDRESS OF PROPOSED LOCATION:  B) TRANSFER OF OWNERSHIP ONLY: ADDRESS OF CURRENT LIC  C) TRANSFER OF OWNERSHIP AND LOCATION: CURRENT ADDRESS OF PROPOSED LOCATION: ADDRESS OF PROPOSED LOCATION: ADDRESS OF PROPOSED LOCATION: ADDRESS OF THE LOCATION PROPOSED LOCATION: ADDRESS OF THE LOCATION PROPOSED LOCATION: ADDRESS OF THE LOCATION PROPOSED LOCATION PROPOSED LOCATION PROPOSED LOCATION: P. & M. ProposeDUSINESS PHONE NUMBER: pending BUSINESS ATTORNEY FOR THE APPLICANT: Melvin J. Kodenski, Esq.  Fort of Premises Used (Note: Floors and Areas for Storage): Strict Coning Receipt or Current Certificate of Occupancy Permit attached to A Please note that as per Alc. Bay. Art. \$12-407(A)(2), an application from 1. Applicant A Kierra Latrice Proctor  | CENSE: CENSE: CESS OF LICENSE COPOSED RELOCA CATION: CHIES SOLUTIONS CEMAIL ADDRESS ADDRESS: 320 I | 2148 Wilkens A D LOCATION:  S LLC TRAD S: N. Charles Street Siness and                              | Avenue, Baltimore, Maryland 21223  E NAME: Edua'S Place  11, 21201 PHONE: 410-685-5100   |
|---|--|---|--|
| A) NEW LICENSE REQUEST: ADDRESS OF PROPOSED LOCATION:  B) TRANSFER OF OWNERSHIP ONLY: ADDRESS OF CURRENT LIC  C) TRANSFER OF OWNERSHIP AND LOCATION: CURRENT ADDRESS OF PROPOSED LOCATION: ADDRESS OF PROPOSED LOCATION: ADDRESS OF PROPOSED LOCATION: ADDRESS OF THE LOCATION PROPOSED LOCATION: ADDRESS OF THE LOCATION PROPOSED LOCATION: ADDRESS OF THE LOCATION PROPOSED LOCATION PROPOSED LOCATION PROPOSED LOCATION: P. & M. ProposeDUSINESS PHONE NUMBER: pending BUSINESS ATTORNEY FOR THE APPLICANT: Melvin J. Kodenski, Esq.  Fort of Premises Used (Note: Floors and Areas for Storage): Strict Coning Receipt or Current Certificate of Occupancy Permit attached to A Please note that as per Alc. Bay. Art. \$12-407(A)(2), an application from 1. Applicant A Kierra Latrice Proctor  | CENSE: CESS OF LICENSE OPOSEO RELOCA CATION: CHIES SOLUTIONS CEMAIL ADDRESS ADDRESS: 320 I         | 2148 Wilkens A D LOCATION: ATION: S LLC TRAD S: N. Charles Street trader Table Service Siness and   | Avenue, Baltimore, Maryland 21223  E NAME: Edua'S Place  11, 21201 PHONE: 410-685-5100   |
| 8) TRANSFER OF OWNERSHIP ONLY: ADDRESS OF CURRENT LIC C) TRANSFER OF OWNERSHIP AND LOCATION: CURRENT ADDRESS OF PR TRANSFER OF OWNERSHIP AND LOCATION: ADDRESS OF PR D) AMENDMENT OR EXPANSION REQUEST: ADDRESS OF THE LOC CORPORATE/LLC/LLP/PARTNERSHIP NAME: P & M Proper BUSINESS PHONE NUMBER: pending BUSINESS ATTORNEY FOR THE APPLICANT: Melvin J. Kodenski, Esq.  ATTORNEY FOR THE APPLICANT: Melvin J. Kodenski, Esq.  In the Premises Used (Note: Floors and Areas for Storage): ST F1 Colors and Areas for Storage): ST F1 Colors and Areas for Storage): ST F1 Colors and Areas for Storage): ATTORNEY FOR THE APPLICANT: Melvin J. Kodenski, Esq.  In the Premises Used (Note: Floors and Areas for Storage): ST F1 Colors and Areas for Storage): ATTORNEY FOR THE APPLICANT: Melvin J. Kodenski, Esq.  In the International Provided? ST F1 Colors and Areas for Storage): ST F1 Colors and Areas for Storage): ATTORNEY FOR THE APPLICANT: Melvin J. Kodenski, Esq.  In the International Provided (Note: Floors and Areas for Storage): ST F1 Colors and Areas for Storage): ATTORNEY FOR THE APPLICANT: Melvin J. Kodenski, Esq.  In the International Provided (Note: Floors and Areas for Storage): ST F1 Colors and Areas for Storage (Note F1 Colors and Areas for Storage): ST F1 Colors and Areas for Storage (Note F1 Colors and | CENSE: OPOSEO RELOCA OCATION: Ortics Solutions SEMAIL ADDRESS ADDRESS: 320 I                       | 2148 Wilkens A D LOCATION:  ATION:  S LLC TRAD S:  N. Charles Street tabor Table Service Siness and | Avenue, Baltimore, Maryland 21223  JE NAME: Edna'S Place  15t, 21201 PHONE: 410-685-5100 |
| C) TRANSFER OF OWNERSHIP AND LOCATION: CURRENT ADDRESS OF PRODUCTION OF TRANSFER OF OWNERSHIP AND LOCATION: ADDRESS OF PRODUCT OF THE LOCATION OF THE APPLICANT:    Section of Premises Used (Note: Floors and Areas for Storage):   S  | ESS OF LICENSE OPOSEO RELOCA ICATION: OPTION SOLUTIONS EMAIL ADDRESS ADDRESS: 320 N                | D LOCATION:  ATION:  S LLC TRAD  S:  N. Charles Stree  tabor Table Service Siness and               | ENAME: Edna'S Place  |
| TRANSFER OF OWNERSHIP AND LOCATION: ADDRESS OF PRODUCEST.  D) AMENDMENT OR EXPANSION REQUEST: ADDRESS OF THE LOCATION.  CORPORATE/LLC/LLP/PARTNERSHIP NAME: P & M Proper BUSINESS PHONE NUMBER: pending BUSINESS ATTORNEY FOR THE APPLICANT: Melvin J. Kodenski, Esq.  Lent of Premises Used (Note: Floors and Areas for Storage): S T F Converse of Areas for Storage (S T F Converse of Areas for Storage): S T F Converse of Areas for Storage (S T F Converse of Areas for Storage): S T F Converse of Areas for Storage (S T F Converse of Areas for Storage): S T F Converse of Areas for Storage (S T F Converse of Areas | OPOSEO RELOCA ICATION:  Ortion Solutions SEMAIL ADDRESS ADDRESS: 320 I                             | S LLC TRAD S: N. Charles Streettbor Table Service Siness and  | ENAME: Edna'S Placi  |
| TRANSFER OF OWNERSHIP AND LOCATION: ADDRESS OF PRODUCEST.  D) AMENDMENT OR EXPANSION REQUEST: ADDRESS OF THE LOCATION.  CORPORATE/LLC/LLP/PARTNERSHIP NAME: P & M Proper BUSINESS PHONE NUMBER: pending BUSINESS ATTORNEY FOR THE APPLICANT: Melvin J. Kodenski, Esq.  Lent of Premises Used (Note: Floors and Areas for Storage): S T F Converse of Areas for Storage (S T F Converse of Areas for Storage): S T F Converse of Areas for Storage (S T F Converse of Areas for Storage): S T F Converse of Areas for Storage (S T F Converse of Areas for Storage): S T F Converse of Areas for Storage (S T F Converse of Areas | OPOSEO RELOCA ICATION:  Ortion Solutions SEMAIL ADDRESS ADDRESS: 320 I                             | S LLC TRAD S: N. Charles Streettbor Table Service Siness and  | ENAME: Edna'S Placi  |
| D) AMENDMENT OR EXPANSION REQUEST: ADDRESS OF THE LOCAL CORPORATE/LLC/LLP/PARTNERSHIP NAME:  BUSINESS PHONE NUMBER: pending  BUSINESS ATTORNEY FOR THE APPLICANT: Melvin J. Kodenski, Esq.  Part of Premises Used (Note: Floors and Areas for Storage): ST FT Coning Receipt or Current Certificate of Occupancy Permit attached to A Please note that as per Alc. Bay. Art. \$ 12-1407(A)(2), an application from 1. Applicant A Kierra Latrice Proctor  | DEATION:  Derties Solutions  DEMAIL ADDRESS  ADDRESS: 320 P  | s LLC TRAD<br>S:<br>N. Charles Stree<br>Idear Table Service<br>Siness and                           | ENAME: Edua'S Placi  |
| CORPORATE/LLC/LLP/PARTNERSHIP NAME: P & M Proper BUSINESS PHONE NUMBER: pending BUSINESS ATTORNEY FOR THE APPLICANT: Melvin J. Kodenski, Esq.  Jert of Premises Used (Note: Floors and Areas for Storage): S + F   Code  Ive Entertainment provided? D yes 2 No What Kind (Ex DJ Band Etc.)  Inning Receipt or Current Certificate of Occupancy Permit attached to A  Please note that as per Alc. Bev. Art. \$ 12-407(A)(2), an application  1. Applicant A  Kierra Latrice Proctor  | OPTIONS SOLUTIONS SEMAIL ADDRESS ADDRESS: 320 I  | s LLC TRAD S: N. Charles Streettboor Table Service Siness and                                       | ENAME: Edna'S Plac   |
| oning Receipt or Current Certificate of Occupancy Permit attached to A<br>Please note that as per Alc. Bav. Art. \$ 12-1407(A)(2), an application<br>and/or varification from<br>1. Applicant A<br>Kierra Latrice Proctor   |  |   | Provided? []Yes [] No Delivery of elcohol? [] Yes []   basement for storage []           |
| oning Receipt or Current Certificate of Occupancy Permit attached to A<br>Please note that as per Alc. Bav. Art. \$ 12-1407(A)(2), an application<br>and/or varification from<br>1. Applicant A<br>Kierra Latrice Proctor   |  |   |  |
| Please note that as per Alc. Bay. Art. \$ 12-1407(A)(2), an application from and/or verification from 1. Applicant A Kierra Latrice Proctor   |  | F1 N. F. (t   |  |
| and/or verification from  1. Applicant A  Kierra Latrice Proctor  |  |   |  |
| Kierra Latrice Proctor  |  |   |  |
|   |  |   |  |
|   | ерполе по.)  |   | E-mail (Required)  |
| 797 Yale Avenue Baltimore   |  | 21229   | 8 years  |
| (Residence)Street City  | State  | Zip Code  | (period of residency in Baltimore City)  |
|   | Female   |   | Baltimore City, MD   |
| (Month/Year of Birth) (S<br>Chack: ☑ Yes ☐ No Are you currently a resident of the City of   | ex: Male or Fema<br>Baltimore?   | ale)  | (Place of Birth)   |
| 2. Applicant B  |  |   |  |
| (Full nema) (Tele   | ephone na.)  |   | E-mail (Required)  |
| (Residence) Street City   | State  | Zip Code  | (period of residency in Baltimore City)  |
| (Month/Year of Birth) (Something Check: D) Yes D) No Are you currently a resident of the City of  | ex: Male or Fema<br>Beltimore?   | ole)  | (Place of Birth)   |
| 3. Applicant C  |  |   |  |
| (Full name) (Tele   | phone no.)   | <del></del>   | E-mail (Required)  |
| (Residence) Street City   | State  | Zip Code  | (period of residency in Baltimore City)  |
| (Month/Year of Birth) (Se<br>Check:  Yes No Are you currently a resident of the City of   |  | .t_\  | PRECEIVED  |

OCT 26 2021

| 1. Has the applican<br>Applicant A □                       |   | ged guilty of a felony in the State of Maryland or any other? 🗆 Yes 😿 No - If yes, indicate applicant and explain   |
|--|---|---|
|  |   |   |
|  | No - If yes,                            | ged guilty of violating the laws  governing the sale of any alcoholic  beverage or for gambling in any State, includi<br>mark applicant and provide explanation in adjacent space provided.   |
|  |   |   |
| 3. State whether to<br>the United States,<br>Applicant A □ | or against the U                        | has ever been adjudged guilty of any offense against the laws of the State of Maryland, any other State withi<br>United States (Federal Crime)?   Yes No - If yes, mark applicant and explain.  |
| мринсант и ш   |   |   |
|  | location, dates                         | elicense for the sale of alcoholic beverages in the State of Maryland?  Yes No If yes, mark applicant and state that the applicant was a licensee, and the trade name).   |
| <u> </u>   |   |   |
|  |   | nancial interest in any other alcoholic beverage business or business for which an alcoholic beverage license   |
| has been applied fo<br>Applicant A □                       | r, granted, and<br>B□ C[                | l issued?  Yes iv No If yes, mark applicant and explain (address of location and trade name).   |
|  |   | dren of any of the applicant(s) have a financial interest in any other alcoholic beverages license or business in<br>tion in the State of Maryland?   Yes M No If yes, mark applicant and explain (address of location and trade name).   |
|  | *************************************** |   |
| 3. Are you financia<br>Ipplicant A □                       | ly interested in<br>B 🗆 C (             | n any other alcoholic beverages license applied, granted or issued? 🖂 Yes 🐼 No If yes, please explain.  |
|  |   |   |
| l. Is the licensed p                                       | emise current                           | ly open and operating? 😿 Yes 🗆 No If no, then provide date of last day of operation of the establishment.   |
|  |   |   |
| rewer, distiller, or                                       | wholesaler at t                         | rsonally or through an entity – have any indebtedness or other financial obligations to any manufacturer,<br>the time of making this application?   Yes Mo No If yes, please explain. If yes, please explain. If yes, please provide information as to the time of the manufacturer, brewer, distille |
| r wnoiesaier:<br>Applicant A 🗆                             | 8                                       |   |
|  |   |   |

| ADDRESS:  2) NAME: ADDRESS: AD | 11. Please list the following i  | nformation for the Manager of the e   | stablishment to be licens   | sad:   |   |                                   |
|--|--|---|---|--|---|-----------------------------------|
| Applicants Applying as Besinese Entities - (Give nume(s) and anthresses - in Corporation lest all efficars (attach hist if necrossary) or in Lambed Lichkey. Company/Partnerships lest all authorized purseum. Please notes that all Reasons MIST have a RAMCHAL MITTERS's to the Assems applied for as per All. Ber. No. 1.8 4-100 (a)(0). If necessary less as attach as for a the names and others and a displacethor own any state of the company/Partnership applicant and a state of the company and the control of the company of the compan | Name   | Address   |   | Phone  | Email   |                                   |
| at all authorizing pursons.) Please notes that all Research that of the Annex and offices of all authorizing state shadors who at the terms and application own any stack of the corporation and the articles of advantages and all authorizes of authorizing state shadors who at the time of application own any stack of the corporation and the articles of application.  2 In NAME. If a representation or articles of arganization.  2 In NAME. If a representation or articles of arganization.  3 In NAME. If a representation or articles of a representation.  2 In NAME. If a representation or articles of a representation of the state of the ADDRESS.  2 In NAME. If a representation of the ADDRESS.  3 In NAME. If a representation of the ADDRESS.  4 In NAME. If a representation of the ADDRESS.  5 In NAME. If a representation of the ADDRESS.  5 In NAME. If a representation of the ADDRESS.  5 In NAME. If a representation of the ADDRESS.  5 In NAME. If a representation of the ADDRESS.  5 In NAME. If a representation of the ADDRESS.  5 In NAME. If a representation of the ADDRESS.  5 In NAME. If a representation of the ADDRESS.  5 In NAME. If a representation of the ADDRESS.  5 In NAME. If a representation of the ADDRESS.  5 In NAME. If a representation of the ADDRESS.  5 In NAME. If a representation of the ADDRESS.  5 In NAME. If a representation of the ADDRESS.  5 In NAME. If a representation of the ADDRESS.  5 In NAME. If a representation of the ADDRESS.  5 In NAME. If a representation is not addressed to the ADDRESS.  5 In NAME. If a representation is not addressed to the ADDRESS.  5 In NAME. If a representation is not addressed to the ADDRESS.  5 In NAME. If a representation to the ADDRESS.  5 In NAME. If a representation to the ADDRESS.  5 In NAME. If a representation to the ADDRESS.  5 In NAME. If a representation to the ADDRESS.  5 In NAME. If a representation to the ADDRESS.  5 In NAME. If a representation to the ADDRESS.  5 In NAME. If a representation to the ADDRESS.  5 In NAME. If a representation to the ADDRESS.  5 In  | Nigel Pr   | octor 912N.R.   | osedalost.  |  |   |                                   |
| 2) NAME ADDRESS: 1972 NAME ADDRESS: 21216 TITLE AD | list all authorized persons.) Pla<br>plaase attach a list of the na                      | lease note that all licensees MUST have<br>ames and address of all outstanding sto  | a Financial interest in t   | he Acense applied for as per                                 | Alc. Bay. Art. & 4-109 (a)(1)                               | l). Hnecassery,                   |
| **Pictract From Lane If any affident or cost in respirad under the provisions of this Act stell contain any fisks attements, the affinitors shall be deemed guilty of perform. And upon indictinent and conviction thereot, shall be adulant a penalties provided by Law for that crime.  CERTIFICATE OF APPLICANTS: At least one applicant whose signature appears below certifies that her/abe is a current realcent of Baltimore City, Maryland at the tim of filing of this application. Each of said applicants hereby certifies further that if the beans application for is granted. In Jahn will conform to all States and County laws regulations relating to this said of alcoholic beverages, as well as to the rules and regulations of the Baerd of Usersa Demonstratemer for Baltimore City, and hereby greats permission to the State Compribler, his daily authorized departure and derive, the Board of Usersa Demonstratemer for Baltimore City, and hereby greats and empresses and any and all parts thereof upon and in which said business is to be conducted. If licenses is issued, the applicants must ensure that at least one licensese remaining a resident of Baltimore City throughout the duretion of this ficenses.  Signature of Applicant A personally appeared 200 before me, the subscriber a notary public of the State of 100 personally appeared 100 personally | ant NAME: KIEVYG   | Appresent or orticles of organization.  Prochor Address:  | 97 Yale A   | Ve.<br>229 me: Me  | mber ** stock   | HELD: <u>5</u>                    |
| **Pictract From Lane If any affident or cost in respirad under the provisions of this Act stell contain any fisks attements, the affinitors shall be deemed guilty of perform. And upon indictinent and conviction thereot, shall be adulant a penalties provided by Law for that crime.  CERTIFICATE OF APPLICANTS: At least one applicant whose signature appears below certifies that her/abe is a current realcent of Baltimore City, Maryland at the tim of filing of this application. Each of said applicants hereby certifies further that if the beans application for is granted. In Jahn will conform to all States and County laws regulations relating to this said of alcoholic beverages, as well as to the rules and regulations of the Baerd of Usersa Demonstratemer for Baltimore City, and hereby greats permission to the State Compribler, his daily authorized departure and derive, the Board of Usersa Demonstratemer for Baltimore City, and hereby greats and empresses and any and all parts thereof upon and in which said business is to be conducted. If licenses is issued, the applicants must ensure that at least one licensese remaining a resident of Baltimore City throughout the duretion of this ficenses.  Signature of Applicant A personally appeared 200 before me, the subscriber a notary public of the State of 100 personally appeared 100 personally | 2) NAME:   | ADDRESS:  |   | TVLE:  | %OF STOCK   | HELD:                             |
| **Pictract From Lane If any affident or cost in respirad under the provisions of this Act stell contain any fisks attements, the affinitors shall be deemed guilty of perform. And upon indictinent and conviction thereot, shall be adulant a penalties provided by Law for that crime.  CERTIFICATE OF APPLICANTS: At least one applicant whose signature appears below certifies that her/abe is a current realcent of Baltimore City, Maryland at the tim of filing of this application. Each of said applicants hereby certifies further that if the beans application for is granted. In Jahn will conform to all States and County laws regulations relating to this said of alcoholic beverages, as well as to the rules and regulations of the Baerd of Usersa Demonstratemer for Baltimore City, and hereby greats permission to the State Compribler, his daily authorized departure and derive, the Board of Usersa Demonstratemer for Baltimore City, and hereby greats and empresses and any and all parts thereof upon and in which said business is to be conducted. If licenses is issued, the applicants must ensure that at least one licensese remaining a resident of Baltimore City throughout the duretion of this ficenses.  Signature of Applicant A personally appeared 200 before me, the subscriber a notary public of the State of 100 personally appeared 100 personally | >3) NAME: Nigel  | <u>Proctor</u> address: 91  | 2 N. Rose   | <u>idale st. Mei</u>   | nber ** stock   | HELD: <u>95</u>                   |
| Extract from law. If any efficient or cost in regulared under the provisions of the fact shed contain any factor statement, the officients shall be deemed guilty of parjury. And upon indictament and conviction thereof. shall be subject to penalties provided by Lew for that crime.  CERTIFICATE OF APPLICANTS: At least one applicant whose signature appears below certifies that he's the contained or is greated, he's he will exchange the provided by Lew for that crime.  CERTIFICATE OF APPLICANTS: At least one applicant whose signature appears below certifies that he's he applicant he day and it is applicant hereby certifies for ther that if the licenses uplaid for is greated, he's he will exchange to all State and County lows regulations relating to the sale of slackable beverages, as well as to the rules and explaint on a the Beard of License Commissioners for Beltimore City, its duty authorized agents and employees, and amployees, and any peace officer of Beltimore City or the State of Manyland to Inspect and search at any and all burst, without warrant, the premises and any and all parts thereof upon and in which said business is to be conducted. If licenses is issued, the applicants must ensure that at least one licensese remaining a resident of Beltimore City, its duty was an analysis of a secondary of the state of the applicant of Beltimore City throughout the duretion of this license.  Signature of Applicant A Deplicant A Least and application are true and correct. As witness, my hand and notarial seal.  Signature of Applicant A Least and application are true and correct. As witness, my hand and material seal.  Signature of Applicant E Least and application are true and correct. As witness, my hand and material seal.  Signature:  (Notary Seal) My Commission expires  | MAME:  | ADDRESS:  | ~   | <b>→</b> • €   |   |                                   |
| CERTIFICATE OF APPLICANTS: At least one applicant whose signature appears below certifies that he/she is a current resident of Beltimore City, Maryland at the time of filing of this applicantian. Each of said applicants bendly certifies further that if the license upplied for is granted, he/she will cedow to all State and County lews regulations relating to the said of slackholic beneropes, as well as to the rules and regulations of the Beard of License Cammissioners for Beltimore City, and hereby gents permission the State Comparisoner for Beltimore City, to duly authorized agents and employees, and amployees, and any peace officer of Beltimore City for the State of Muryland to Inspect and search at any and all hearts, without warrant, the premises and any and all parts thereof upon and in which said business in to be conducted. If licenses is issued, the applicants must errore that at least one licensese remains a resident of Beltimore City throughout the duration of this licenses.  Signature of Applicant A  Printed Name:  WENDY L. WHITE Notary Public - Manyland Beltimore City Ny Commission expires  Signature of Applicant A  WENDY L. WHITE Notary Seell My Commission expires  Signature of Applicant Contained in said application are true and correct. As witness, my head and notarial seel.  Signature:  (Notary Seell My Lommission expires  Printed Name:  (Notary Seell My Lommission expires  Signature of Applicant C  Leving Seell My Lommission expires  Signature of Applicant C  Leving Seell My Lommission expires  Printed Name:  (Notary Seell My Lommission expires  Wend Seel Seel Seel Seel Seel Seel Seel See  | "Extract from Law: If any at   | flidavit or outh required under the provi   | isions of this Act shell conta  | own any false statements, the i                              | offander shall be deemed                                    |                                   |
| of filing of this application. Each of said application bearingse, as well as to the rules and regulations relating to the said of slockolic beverages, as well as to the rules and regulations relating to the said of slockolic beverages, as well as to the rules and regulations and the Beard of License Commissioners for Relationers City, and hereby greates permission to the State Comptroller, his duly authorized depaties, inspectance and clarks. The Board of License Commissioners for Relationer City, and hereby greates parameters and ampliorers, and any peace officer of Belthorne City or the State of Manyland to Inspect and search at any and all practs thereof upon and in which said business is to be conducted. If license is issued, the applicants must ensure that at least one licenses rameling a resident of Belthorn City throughout the duration of this hoerse.  **The performance of Applicant A***  Inperby certify that on the **D**  Object of Applicant A***  Inperby certify that on the **D**  Object of Applicant A***  Notary Public - Manyland Beltimone City  WHITE*  Notary Public - Manyland Beltimone | guilty of parjury. And upon  | Indictment and conviction thereof, a  | hall be subject to peneltie   | es provided by Lew for thet.                                 | crime.  |                                   |
| hereby certify that on the Body of Security 20   before me. the subscriber, a notary public of the State of Signature of Applicant C   Notary Seal My Commission expires   Signature   S   | grants parmission to the St<br>authorized agents and emph<br>premises and any and all pa | ate Comptroller, his duly authorized de<br>oyees, and any paace officar of Baltimo<br>rts thereof upon and in which said busi | puties, inspectors and cler<br>are City or the State of Mon<br>iness is to be conducted. If | ks, The Roard of License Cen<br>ryland to inspect and search | naissioners for Beltimore i<br>at any end all boars, withou | City, its duly<br>ut warrant, the |
| I hereby certify that on the Body of Printed Name:    Notary Seal   My Commission expires   My Commiss | Signature of Applicant A   | roctor  |   |  |   |                                   |
| Printed Name:   WENDY L WHITE   Notary Public - Maryland   Baltimore City   My Commission expires   Signature of Applicant   August 31, 2024     I hereby certify that on theday of 20 before me, the subscriber, a notary public of the State of in and for the matter and facts contained in said application are true and correct. As witness, my hand and notarial seel.   Signature of Applicant C   I hereby certify that on the day of 20 before me, the subscriber, a notary public of the State of in and for personally appeared the subscriber, a notary public of the State of in and for personally appeared the subscriber, a notary public of the State of in and for personally appeared the subscriber, a notary public of the State of in and for personally appeared the subscriber, a notary public of the State of in and for personally appeared the application made oath in due form of the the matter and facts contained in said application are true and correct. As witness, my hand and notarial seal.  | Thereby certify that on the 2  | rsonally appeared 🖳 🛂 🚓 🕮 🗛   | + rector  | the applicant(s) named                                       | Mary Jana<br>in this application made oath                  | in and for in due form of law     |
| Printed Name: WENDY WHITE Notary Public - Maryland Baltimore City My Commission Explose  Signature of Applicants August 31, 2024  I hereby certify that on theday of 20, before me, the subscriber, a notary public of the State of in and fo the applicant(s) named in this application made oath in due form of I that the matter and facts contained in said application are true and correct. As witness, my hand and notarial seel.  Signature: [Notary Seal] My Commission expires  Printed Name: the applicant C I hereby certify that on the day of 20, before me, the subscriber, a notary public of the State of in and for the application made oath in due form of Is 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 [Notary Seal] My Commission expires   | that the matter and facts conti  | ained in said application are true and cor  | ,   | Ĺ  | 1   |                                   |
| Notary Public - Maryland Baltimore City My Commission Expires  Signature of Applicant—August 31, 2024  I hereby certify that on the day of 20 before me, the subscriber, a notary public of the State of in and for personally appeared the application are true and correct. As witness, my hand and notarial seal.  Signature: [Notary Seal] My Commission expires  Printed Name: the applicant C  I hereby certify that on the day of 20 before me, the subscriber, a notary public of the State of in and for personally appeared the application made oath in due form of let 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  | Signature:   | of will   | [Notary Seal] My C  | ommission expires 8  | 3/34  |                                   |
| I hereby certify that on theday of   |  | Notary Public - Maryland  | 7   |  |   |                                   |
| the applicant(s) named in this application made oath in due form of I that the matter and facts contained in said application are true and correct. As witness, my hand and notarial seel.  Signature:   |  |   | 7   |  |   |                                   |
| Signature: [Notary Seaf] My Commission expires  Printed Name:  Signature of Applicant C  I hereby certify that on the day of, 20, before me, the subscriber, a notary public of the State of in and for, personally appeared the applicant(s) named in this application made oath in due form of latter that the matter and facts contained in said application are true and correct. As witness, my hand and notarial seal.  Signature: [Notary Seaf] My Commission expires   | I hereby certify that on the   | day of, 20, b<br>rsonally appeared  | refore me, the subscriber, a  | notery public of the State of                                | in this application made onth                               | in and for                        |
| Signature of Applicant C  I hereby certify that on the day of 20, before me, the subscriber, a notary public of the State of in and for personally appeared the applicant(s) named in this application made oath in due form of lattest 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  | that the matter and facts conta  | ained in said application are true and com  | rect. As witness, my hand an  | d notarial seal.   | <u>646 ahluonuuu uune 0081</u>                              | QUE 181 (F) U4 10T                |
| Signature of Applicant C  I hereby certify that on the day of 20, before me, the subscriber, a notary public of the State of in and for personally appeared the applicant(s) named in this application made oath in due form of lattest 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  | Signature:   |   | (Notery Seal) My C  | ommission expires  |   |                                   |
| Signature of Applicant C  I hereby certify that on the day of 20, before me, the subscriber, a notary public of the State of in and form of late 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   |  |   |   |  |   |                                   |
| I hereby certify that on theday of 20, before me, the subscriber, a notary public of the State of in and for the applicant(s) named in this application made oath in due form of latthat the matter and facts contained in said application are true and correct. As witness, my hand and notarial seal.  Signature:   |  |   | <del></del>   |  |   |                                   |
| Signature: [Notery Seal] My Commission expires   | •  | day of, 20, b   | efore me, the subscriber, a   | notery public of the State of                                |   | in and for                        |
| Signature: [Notery Seal] My Commission expires   | that the metter and facts costs  | sonally appeared  | and As witness on band as   | the applicant(s) named i                                     | n this application made oath                                | in due form of law                |
| (unth A seat) wh communication exhibits  |  |   |   |  |   |                                   |
|  |  |   | (Notery Seal) My Co   | ommission expires  |   |                                   |

| Name and Address of the owners of the premise/landford:    Angrez Singh   Phone Number:  |
|--|
| STATEMENT OF OWNER OF PREMISES REQUIRED IN CONNECTION WITH ALCOHOUG BEVERAGES LAW OF MARYLAND (I, WE) $ANGRE2$ $SINGH$ HEREBY CERTIFY, That (I am, we are) the owner(s) of the property located at $2148$ $WIKENS$ $Ave$ Baltimore. City with a Zip Code of $21223$ , which is named in the present application made to the Board of Liquor License Commissioners of Baltimore City under the Alcoholic Beverage Laws of Maryland and assent to the granting of the license applied for, and hereby authorize the State Comptroller, his duly authorized deputies, inspectors and clerks, the Board of Liquor License Commissioners of Baltimore City, its duly authorized agents and employees, and any peace officer of the City of Baltimore and State of Maryland, to inspect and search, without warrant, the premises upon which |
| Thereby certify that on the landord/property owner named in this 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.  Notary Signature:  WENDY L WHITE Notary Public Maryland Baltimore City My Commission Expires The Larving of Microsoft State owners and registered voters in the City of Baltimore in which the business covered by the present application is to be conducted. We certify that the qualifying applicant(s) is/are personally known to us and is a resident of Baltimore City and a resident of the State of Maryland at the time of this application.  |

|          | Names.             | Aldress                | Signature      | DOE<br>(Manth/Year) | Length of time Acquainted with the Applicant(s) |
|----------|--------------------|------------------------|----------------|---------------------|---|
| 10       | Jacqueline A Chaic | 916 N. Rosedale St.    | Jagudine a Ray | 9, 161              | 25 years  |
| (2)      |                    | 513 Wildwood Parkellay | Mu Com         | 462                 | 4 upon  |
| 3        | Jameshia Lee       | 2018 Dukeland 87.      | Fandia Lee     | 4 -81               | 5yrs  |
| <b>a</b> | Michael Spay       | 4724 NORFOLKAN         | Thurse ( Seny  | 4 -53               | 5yrs  |
| 3        | Deborah Divis      | 4724 NORFOLKAVE        | Welond Da      | 259                 | 25 years  |

Board of Liquor License Commissioners for the City of Baltimore 1 North Charles Street, Suite 1500, Baltimore, Maryland 21201 Phone: 410-396-4377 Fax: 410-396-4382

Please note that this is a public document and upon request will be provided to the general manuars of the public.

Kitchen Thise compart ment cooler BUEN Lighand on went 600 1000000 c 3 Pool bland aland pool Dog wilkens Blud 2148



# **Liquor Board System**

Version 1.0

Annual-Renewal ♥ | License-Transfer ♥ | One-Day ♥ | Add New License ♥ | Query ▼

# **License Detail**

Close the License

Print License

Print Renewal Letter

<< Go Back

License Info

License Num: LD 013

Cert Num: 0166

Fee: \$825.00

Status: Renewed

License Date:5/1/2021

License Year: 2021

CR Number: 16728464

Payment Date: 06-01-21

2020 - 2021 TPP Paid 🔲

2021 Trader's License

Update Info

Click to Start License Renewal

# Add Adult Entertainment License

Add New Adult Entertainement License

# Location

Corp Name: N/A

Trade Name: TAVERN BAR

Zone Code: 32

Phone: 443-447-9555

Block Num: 2148

Street: WILKENS AVENUE

City: BALTIMORE

State: MD

Zip: 21223

CR Number: 16728464

# Portion of Business Used:

USE PORTION OF PREMISES AS A TAVERN NOT INCLUDING LIVE ENTERTAINMENT AND

DANCING NEW OPERATOR

### Restriction:

UNDER THE PROVISIONS OF ALC. BEV. ART. §12-2005, THE HOURS OF SALE FOR THIS LICENSE ARE RESTRICTED FROM 10AM TO 10PM, EVERY DAY THIS LICENSE CLASS IS

AUTHORIZED TO SELL ALCOHOLIC BEVERAGES, AS SPECIFIED IN CH. 664 OF THE LAWS .

OF MARYLAND OF 2021 (HB 1288), EFFECTIVE JULY Edit the License Location Info 'Alternate Mailing Address

## **License Owners**

| First Name | Last Name | Street      | City      | State | Zip   | Action | Change Owner |
|------------|-----------|-------------|-----------|-------|-------|--------|--------------|
| GURPREET   | KAUR      | 419 IMLA ST | Baltimore | MD    | 21224 | Edit   | Remove Owner |

# Comments

| Comme      | nts  |        |
|------------|--|--------|
| Date       | Comment  | Action |
| 11/08/2021 | Alcohol Awareness expires on 10/30/2025 Niegi Proctor and Teletia Merefee (certified by John S. Murray)/sb   | Delete |
| 11/05/2021 | Application for transfer of ownership requesting delivery of alcoholic beverages filed on behalf of P & M Properties Solutions, LLC T/a Edna's Place, Kierra Latrice Proctor on 10/26/2021 /kk   | Delete |
| 07/26/2021 | 6/30/2021 - Revised License for new restriction on hours of operation of 10am-10pm per new law effective as of July 1, 2021 was given to inspectors and delivered to licensed location/jr  | Delete |
| 01/28/2020 | Letter hand delivered by inspector to licensee in reference to outreach meeting on 2/5/2020 at the BLLC /kk  | Delete |
| 10/29/2019 | Personal Property Tax Owed to City of Baltimore was cleared on October 29, 2019/mb.  | Delete |
| 09/27/2019 | ***PERSONAL PROPERTY TAX OWED TO CITY OF BALTIMORE Letter sent to Licensee/s Home<br>Address on September 27, 2019.*** /mb   | Delete |
| 06/26/2019 | 5/23/2019 Public Hearing Re: Violation of Rule 4.01(a) Sales to Minors GUILTY Rule 4.01(a) –<br>Fined \$350 \$350 + \$125 admin fee \$475 total fine 30 days to pay (3-0 vote) s.R   | Delete |
| 03/18/2019 | 3/14/2019 - Public Hearing Re: Violation of Rule 4.01(a) Sales to Minors - REQUEST FOR POSTPONEMENT - The Board has GRANTED the request for postponement. This matter will be scheduled for a future hearing date/jr   | Delete |
| 12/14/2018 | Mailed letter of recognition for underage drinking compliance check on 12/12/18 /kk  | Delete |
| 04/25/2017 | ****RELEASED STATE OF MD TAX HOLD**** /sb  | Delete |
| 03/21/2017 | MARYLAND SALES TAX HOLD (CR#13994446- TRANSFER)K/R   | Delete |
| 03/16/2017 | Alcohol Awareness expires 03/09/21 (Gurpreet Kaur) /sb   | Delete |
| 03/10/2017 | Alcohol Awareness expires 03/08/21 (Lorri Monaghan) /sb  | Delete |
| 02/23/2017 | 02/23/17 - Public Hearing RE: Application to transfer ownership - APPROVED (3 -0 VOTE)   | Delete |
| 01/03/2017 | Mark Folser sent out a letter on 12/28/2017 regrading required inspection during the license yearm/f   | Delete |
| 12/22/2016 | Maryland Sales tax hold (CR#13994446-transfer)12/22/2016kr   | Delete |
| 12/06/2016 | 12/05/2016-Manger of establishment came in to pick up 2016-2017 alcohol beverage license. The documents: 2016 trader's license,2016-2017 clearance letter and letter of good standing were submitted.Ref: 10/27/2016 Public hearing re: request for hardship extension, and request to reopen after being closed for more than 90 days   | Delete |
| 11/03/2016 | PAID \$100.00 for Hearing dated 10/27/16 for Hardship Extension; Invoice #104380 /sb   | Delete |
| 10/31/2016 | 10/28/16 - Sent Fax to Mel Kodenski office stating that Licensee owes \$100.00 for hearing administrative fee /sb  | Delete |
| 10/28/2016 | 10/27/2016- Public hearing re: request for hardship extension, and request to reopen after being closed for more than 90 days- APPROVED  | Delete |
| 08/29/2016 | licensee's attorney brought in new check for correct amount, license renewed. Still waiting for request to reopen. ND  | Delete |
| 08/25/2016 | Received 2016 renewal application, 1-\$50.00 check and 1-\$858.00 from licensee's attorney (Melvin Kodenski) on 08/23/16. Licensee must request a hearing to reopen after being closed for more than 90 days. Check for \$858.00 returned to attorney-incorrect amount. Letter sent to attorney and licensee notifying them that the licensee must request a hearing to reopen. ND | Delete |
|            | PAID \$375.00 for Violation Hearing dated from April 30, 2015; Invoice #100302. Will return Liquor License to licensee /sb   | Delete |
| 02/05/2016 | iee (\$575.00) and notice for sospension of liquor license 75D   | Delete |
|            | Sent letter to licensee for the amount of \$375.00,owes from Violation Hearing dated on April 30, 2015 /sb   | Delete |
| 07/07/2015 | Hearing Date: April 30, 2015Violation of Rule 4.10(a) Wholesaler Relations – March 23, 2015.<br>Owes Liquor Board \$250.00 fine + \$125.00 admin fee. = Total \$375.00 /sb   | Delete |
| 06/08/2015 | 06/05/15 RELEASED STATE OF MD TAX HOLD /sb   | Delete |
| 02/03/2015 | State of MD Tax Hold, letter sent to merchant on January 23, 2015.   | Delete |
|            | 07/29/09 \$650 PAID IN FULL #69634   | Delete |
|            | 06/18/09 Public Hearing re: Violation of rule 4.01(a) & rule 3.03(c). DECISION: RULE 4.01(a) GUILTY \$500 AND RULE 3.03(c)GUILTY \$25 + \$125 ADM.FEE = \$650  | Delete |
| 03/01/2004 | 1/25/96 Public hearing re: Violation of Rule 4.10(a) ì (Purchasing from other than a wholesaler)<br>Guilty 5 day ì suspension or \$500 fine 1/31/96 \$500 fine paid BT 00926   | Delete |
|            |  |        |

| License num: LD 013    | Address: 2148 WILKENS AVENUE |   |
|------------------------|------------------------------|---|
| Trade Name: TAVERN BAR |                              |   |
|                        |                              |   |
| Comment:               |                              |   |
|                        |                              |   |
|                        |                              |   |
|                        |                              |   |
| 1                      | Add Comment                  |   |
|                        | L                            | l e e e e e e e e e e e e e e e e e e e |

Hold Info



Department ID Number:

W22006555

**Business Name:** 

### P&M PROPERTIES SOLUTIONS LLC: W22006555

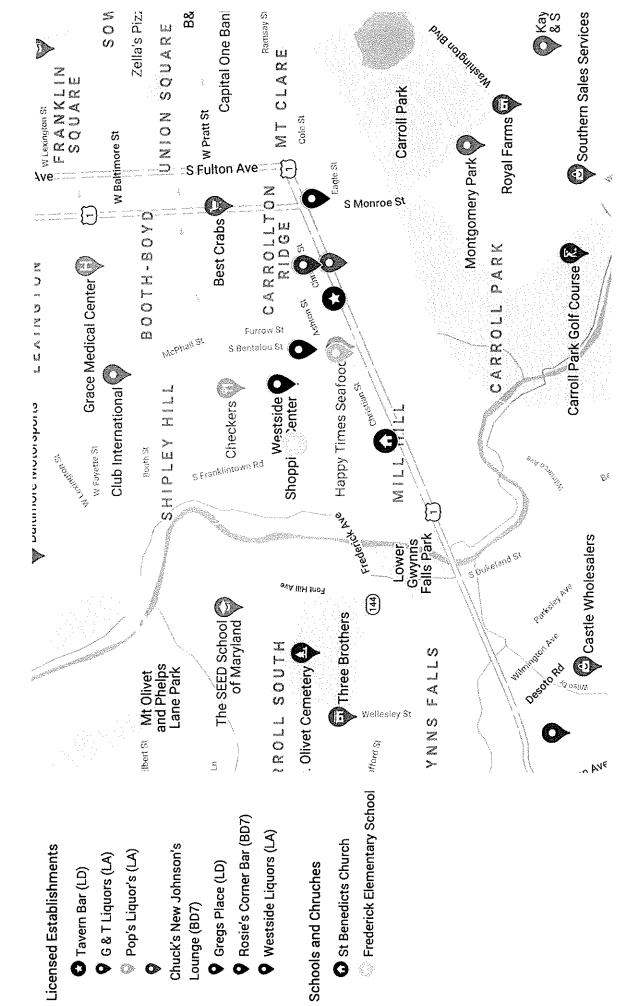
| Dusiness Name.                      |
|-------------------------------------|
| P&M PROPERTIES SOLUTIONS LLC        |
| Principal Office:                   |
| 2411 WESTWOOD AVE                   |
| BALTIMORE MD 21216                  |
| Resident Agent:                     |
| TELETHIA R MENEFEE                  |
| 2411 WESTWOOD AVE                   |
| BALTIMORE MD 21216                  |
| Chahua                              |
| Status:                             |
| ACTIVE                              |
| Good Standing:                      |
| THIS BUSINESS IS IN GOOD STANDING   |
| Business Type:                      |
| DOMESTIC LLC                        |
| DOMESTIC ELC                        |
| Business Code:                      |
| 20 ENTITIES OTHER THAN CORPORATIONS |
| Date of Formation/ Registration:    |
| 07/20/2021                          |
|                                     |
| State of Formation:                 |
| MD                                  |
| Stock Status:                       |
| N/A                                 |
|                                     |
| Close Status:                       |
| N/A                                 |
|                                     |
|                                     |

PROPOSED LOCATION: 2148 Wilkens Ave

# MAP SUMMARY (RECAPITULATION)

| TOTAL ESTABLISHMENTS IN MAP AREA            |
|---|
|   |
| "A" BEER & WINE                             |
| "B" BEER & WINE                             |
| "C" BEER & WINE                             |
| "D" BEER & WINE                             |
| "A" BEER, WINE & LIQUOR                     |
| "A-2" BEER, WINE & LIQUOR                   |
| "B" BEER, WINE & LIQUOR                     |
| "C" BEER, WINE & LIQUOR                     |
| "D" BEER, WINE & LIQUOR                     |
| "BD7" BEER, WINE & LIQUOR                   |
| ARENA                                       |
| HOTEL/MOTEL                                 |
| RACING                                      |
|   |
| PREPARED BY: Walter Robinson Date: 11/17/21 |

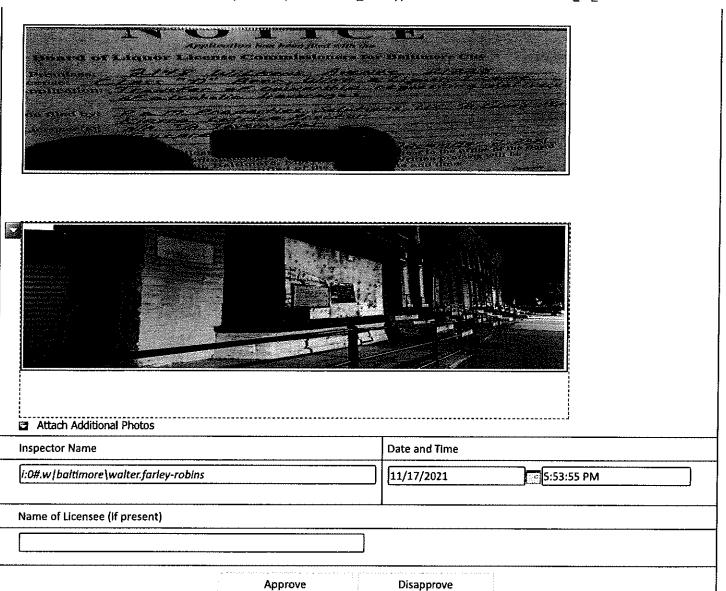
# 2148 Wilkens Ave



# **Board of Liquor License Commissioners**

| 1 North Charles Stree   | et, 15th Floor   |
|---|--|
| Baltimore, Maryla  TNSDECTORS DEDORT TRANSI   |  |
| INSPECTORS REPORT - TRANS   | FERS/NEW APPLICATIONS  |
| Licensee Information (Trade Name):  | Edna's Place   |
| Corporation Name:   | P&M Properties Solutions LLC   |
| Location Address:   | 2148 Wilkens Ave   |
| License Type:   | Class "D" Beer, Wine and Liquor   ✓  |
| Is the establishment open and operating in a safe and sanitary manner? (If not open, not in comments - CLOSED or NOT OPERATING) | Yes 🗸  |
| Is the location within 300 feet of Church and/or School?  | No 🗸   |
| Date Posted?  | 11/17/2021   |
| Estimated Date of Removal?  | 11/26/2021   |
| Are there any other licensed establishments within a two block radius?  | Yes 💙  |
| Other licensed locations - Describe/Note:   |  |
| See attached map  |  |
| Comments and Follow-up Items(s) (please note any issues or concerns abo   | ut the location):  |
| Esablishment is applying for Tranfer of ownership and delivery of alcohol   |  |
|   |  |
| Insert Photo of Sign and location:  |  |
|   |  |
| BAR TAVER   | NE CONTRACTOR OF THE CONTRACTO |

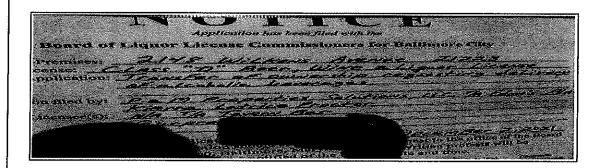
ortal2013.baltimore.city/sites/BLLC Inspections/ layouts/15/FormServer.aspx?XmilLocation=/sites/BLLC Inspections/New Inspection Report/Transfe...



## **Board of Liquor License Commissioners**

| For Baltimore<br>1 North Charles Stree<br>Baltimore, Maryla                                  | et, 15th Floor                        |
|--|---------------------------------------|
| POSTING SIGN   | S REPORT                              |
| Applicant(s) Name:   | Kierra Latrice Proctor                |
| Address of Premises:   | 2148 Wilkens Ave                      |
| Inspector:   | i:O#.w baltimore\walter.farley-robins |
| Date Posted:   | 11/17/2021                            |
| Time Posted:   | 6:30 PM                               |
| Date Rechecked:  | 11/28/2021                            |
| Time Rechecked:  | 6:30 PM                               |
| Manager or Owner when sign posted:   |                                       |
| Summary on location of sign posted:  |                                       |
| Signed posted on side of building  Summary on location of sign rechecked:  Sign Still posted |                                       |
| Insert Photo of Sign and location:  BAR TAVER LIQUOR BEER WILL LOTTERY                       | NE                                    |









Attach Additional Photos

Approve

Disapprove

Back

# **BLLC Routine Inspection**

|                                | Harry Asy Cafe                  | राज्य अंदर्भ  |          |
|--------------------------------|---------------------------------|---------------|----------|
| Address:                       | 2148 WILKENS AVENUE 21223       |               | <b>*</b> |
| Trade Name:                    | TAVERN BAR                      |               |          |
| Corporation Name               | N/A                             |               |          |
| Type of License:               | Class "D" Beer, Wine and Liquor | 7             | •        |
| Date/Time of Inspection:       | 11/23/2021                      | 10:04:48 AM   |          |
| Manager/Licensee               | Narinder Kumar                  |               |          |
| Open/Closed:                   | DepartModes.  Open   ✓          | Efficient 1   |          |
| Closed Date:                   | ¥355                            |               |          |
| Clean and Free of Debris:      | N/A ✓                           | ne uze        |          |
| Location of Bar:               | Rear ✓                          |               |          |
| Shape of Bar:                  | Straight                        |               |          |
| Condition of Bar Area/Floors:  | Satisfactory •                  |               |          |
| Hot Water:                     | Yes 🗸                           |               |          |
| Disinfectant Solution:         | Yes 🗸                           |               |          |
| Three Compartment/Washer:      | Yes 🗸                           |               |          |
|                                | Packaga Gands A                 | BO7 Checklist |          |
| Bulletproof Partitioning:      | Yes 🗸                           |               |          |
| Separate Pkg. Goods Dept.:     | N/A 🕶                           |               |          |
| Separate Pkg. Goods Store:     | Yes 💙                           |               |          |
| Bar/Tavern Open and Operating: | Yes 🕶                           |               |          |

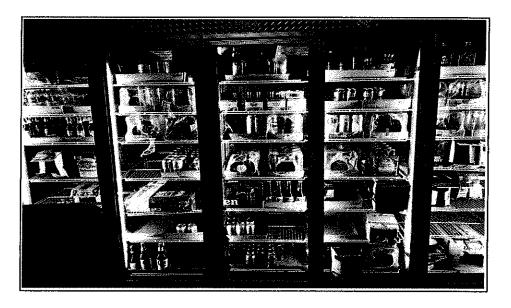
| Selling Household/Grocery:                                | No              |          | •                  |
|---|-----------------|----------|--------------------|
|   |                 |          | n majasa           |
| Capacity:   |                 |          |                    |
| Location of Dining Area:                                  |                 |          |                    |
| Condition of Dining Area/Floors:                          | N/A             |          | •                  |
| Sanitation:   | N/A             |          | •                  |
| Menu:   | N/A             |          | •                  |
|   |                 |          | it vantis. Autoria |
| Traders License:  | N/A             | <b>~</b> |                    |
| Alcohol Awareness Certification Date<br>Issued:           | 6/22/2021       |          |                    |
| Employee Records:   | Yes             | •        |                    |
| Alcohol Beverage Information Invoice<br>Numbers and Date: | Bond Inv# W-2   | 980379   | Cust#165 7/2/2021  |
|   |                 |          |                    |
| Inspector Comments:                                       |                 |          |                    |
|   |                 |          |                    |
|   |                 |          |                    |
|   |                 |          |                    |
|   |                 |          |                    |
|   |                 |          |                    |
| Inspector Comments:                                       | Rear Satisfacto | ry       |                    |
|   |                 |          |                    |
|   |                 |          |                    |
|   |                 |          |                    |
|   |                 |          |                    |
|   |                 |          | Abolic Sofety      |
| Exits Marked, Unobstructed:                               | Yes             |          | •                  |
| Fire Capacity:  |                 |          |                    |
| Outdoor Seating Capacity:                                 |                 | ]        |                    |

Adult Entertal covert - If Applicable

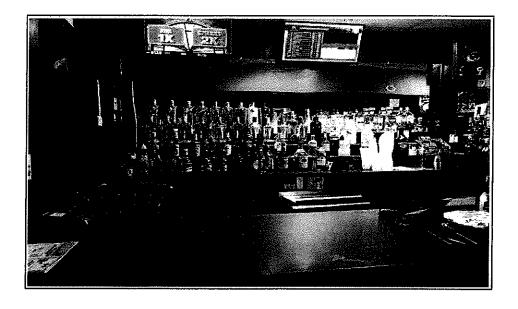
N/A

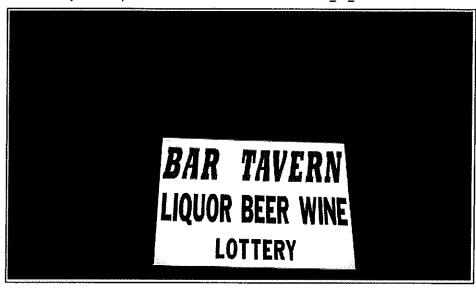
Dancers Present 18 and older: N/A Cleanliness of Dressing Room: N/A Live Entertainment (Describe): Outdoor Table Service N/A Violation Issued: Violations Noted: Instructions Given to Licensee: Send Updated traders license Inspector's Comments: posted transfer of ownership sign

Photo Taken:









|                        | Approve                       | Disapprove |
|------------------------|-------------------------------|------------|
| Submitted by Inspector | i:0#.w baltimore\walter.farle | y-robins   |
|                        |                               | ,          |
| Owner Email:           |                               |            |
|                        | Attach Additional Photos      |            |

# **Certificate of Occupancy**

No: USE2017-00947

THIS WRITTEN INSTRUMENT, WHEN PROPERLY VALIDATED, CONSTITUTES AUTHORITY FOR DOING OR RECEIVING THE THINGS INDICATED BY THE FEES OR CHARGES SHOWN IN THE APPROPRIATE SPACES BELOW. ANY AND ALL THINGS TO BE DONE OR RECEIVED UNDER THIS WRITTEN INSTRUMENT SHALL BE DONE OR RECEIVED IN STRICT COMPLIANCE WITH THE APPLICATION HERETOFORE FILED IN THIS DEPARTMENT FOR THE AUTHORITY CONTAINED HEREIN, INCLUDING ANY AND ALL APPROVED DRAWINGS AND OTHER DATA OR INFORMATION ATTACHED THERETO, AND SUBJECT TO ANY AND ALL LAWS, ORDINANCES, RULES AND REGULATIONS IN EFFECT IN THE CITY OF BALTIMORE AND THE STATE OF MARYLAND. WARNING: IT IS UNLAWFUL TO WORK BETWEEN THE HOURS OF 2:00 PM AND 7:00 AM WITHIN 100 FEET OF A DWELLING.

WARNING: IT IS UNLAWFUL TO CONCEAL ANY WORK UNTIL INSPECTED AND APPROVED BY THIS DEPARTMENT.

WARD SEC. BLOCK LOT ISSUE DATE DISTRICT
20 11 0697 006 3/24/17 803

PROPERTY ADDRESS:

2148 WILKENS AVE

OWNER:

AHMED AL-HADARI

ADDR:

719 KENT AVE

LESSEE:

**GURPREET KAUR** 

ADDR:

2148 WILKENS AVE.

**LAND USE CODES 5823** 

USE PORTION OF PREMISES AS A TAVERN NOT INCLUDING LIVE ENTERTAINMENT AND DANCING NEW OPERATOR

| 1001-000000-2600-159600-400560<br>PER. INSP, | 1001-000000-2600-158009-400480<br>MISC. | 1001-00000-2600-158009-400480<br>CH. USE 45.00 |                                | 1001-000000-2600-158302-40049 0 ADDITIONS 1001-000000-2600-158901-400510 |
|--|---|--|--------------------------------|--|
| 1001-000000-2600-158302-400490               | 1001-600000-2600-158304-400490          | 1001-000000-2600-158304-400490                 | 1001-000009-2600-158800-400500 | HYDRONIC/STEAM HEAT  |
| ALTERATIONS                                  | REPAIRS                                 | MISC. CONST.                                   | ELECT.                         |  |
| 1001-080900-2600-158902-498510               | 1001-00000-2600-158902-400510           | 1001-00000-2600-158902-400510                  | 1001-00000-2600-158905-400510  | 1001-00000-2608-158906-400510  |
| DISTRIB/EXH                                  | AIR COND.                               | DISP. TANKS                                    | FIRE                           | FUEL-BURNING EQUIPMENT   |
| 1001-000000-2600-159300-400538               | 1001-000000-2600-159000-400520          | 1001-009000-2600-159000-400520                 | 1001-00000-5700-508801-401813  | 1001-000000-1500-102800-400230   |
| ELEVATOR                                     | PLUMBING 0.0                            | S&ECONTROL                                     | CHAP                           | TAX 3.00   |
| 1001-00000-2600-158306-400490                | 1001-000000-2600-159400-400340          | 1001-000000-2600-159400-400540                 | 1001-00000-2600-158009-400480  | TOTAL FÉES  98.00  |
| RAZING                                       | FILING FEE 50.0                         | LOW VOLTAGE/TELECOMMUNICATIONS                 | PENALTY                        |  |

THE AUTHORITY CONTAINED HEREIN MAY NOT BE VALIDLY EXERCISED UNTIL AND AFTER ALL OF THE FEES APPEARING HEREON HAVE BEEN PAID AND EVIDENCE THEREOF APPEARS IN THIS SPACE.



Hichart Braverna

MICHAEL BRAVERMAN BUILDING OFFICIAL Please be advised that there is a presumption of lead-based paint in properties constructed prior to 1950. Protect workers and tenants by using the lead-safe work practices found in the Code of Maryland Regulations Section 26.02.07.

THE AUTHORITY CONTAINED HEREIN DOES NOT AUTHORIZE THE PERFORMANCE OF ANY WORK IN, ON, UNDER OR OVER ANY STREET, HIGHWAY, ALLEY. SIDEWALK OR ANY OTHER PUBLIC WAY, UNLESS PERMISSION TO DO SO HAS BEEN FIRST SECURED FROM THE PROPER AUTHORITY.