APPLICATION FOR MANUFACTURER'S AND WHOLESALER'S LICENSES



For the use of: (Check	one) An inc	dividual Pa	ortnership Corp	oration	Limited Liability	Co.
New	Renewal		Date:			
CHECK CI A		cense #	A SEPARATE APPLICA	TION FOR EACL	LITCENCE	
	er's Licenses	KEQUIKED - USE	A SEPARATE APPLICA	Wholesaler's		
] [
Class 1 Distillery	Annual Fee	\$2,000.00		, Wine & Liquor	Annual Fee	\$2,000.00
Class 2 Rectifying	Annual Fee	\$600.00 *	Class 2 Wine	•	Annual Fee	\$1,750.00
Class 3 Winery	Annual Fee	\$750.00 *	Class 3 Beer		Annual Fee	\$1,500.00
Class 4 Limited Winery		\$200.00	Class 4 Beer		Annual Fee	\$1,250.00
Class 5 Brewery	Annual Fee	\$1,500.00 *	Class 5 Wine		Annual Fee	\$1,250.00
Class 6 Pub-Brewery	Annual Fee	\$500.00	Class 6 Limit		Annual Fee	\$50.00
Class 7 Micro-Brewery		\$500.00	Class 7 Limit		Annual Fee	\$50.00
Class 8 Farm Brewery	Annual Fee	\$200.00	Class 8 Liquo	or	Annual Fee	\$100.00
Class 9 Limited Distiller	ry Annual Fee	\$500.00				
* If you are going to sell to Wholesaler's License of the	, ,	l also need a				
\$200.00 non-refundable app with any initial license applic		payable to Marylar	d Alcohol, Tobacco and C	Cannabis Commis	sion, must be su	ıbmitted
Upon approval of your initial		ill be notified of the	e appropriate prorated lic	ense fee to subm	nit.	
Wholesale licensees of any c	lass using this form					\$200.00
non-refundable application						
 Application is made by the u Class of license as checked a 						
1. Applicants*	(:	1)	(2)		(3)	
Name						
Residence						
Cell Phone						
Date of Birth						
Place of Birth						
Social Security Number **						
Qualifying Maryland Resident? ***	Yes	☐ No	Yes	No	Yes	☐ No
MD Resident since						
* A license is issued to the those officers/members	ree applicants for t /partners. In such	the use of the com case, a letter so c	pany. If less than three a ertifying must be submit	applicants exist, ited.	then a license m	ay be issued t
** The disclosure of application	ant's Social Securit	ty Number is mand	latory and will be used fo Code of Maryland, Alcoh	or background in	vestigations, inc	luding
·	nust be a voter and	taxpayer in Mary	and presently and for th	=		rs. In case of
2. Company name and trade		•				
3. a. Location of proposed l		(complete addre	ss, include nine digit ZI	iP code)		
b. Additional location (if	applicable)					

APPLICATION FOR MANUFACTURER'S AND WHOLESALER'S LICENSES



4.	Description of premises to be covere	d under license applied for (lot, ty	ype, size and construction of bu	illding)					
5.	Mailing Address (Street)								
	(City, State, Zip Code)								
6.	Business phone number(s)		Fax Number						
	E-mail address:								
	a. Date business began								
	b. Type of accounting period (calenda	ar yr, fiscal yr, etc.)	Month FY begins						
	c. If corporation or limited liability co	ompany, date chartered	State						
	d. Federal Employer Identification Nu	ımber							
7.	Name and address of the owner of pre	emises							
	The applicants are presently the holde Maryland, any other state or jurisdicti Issuing Authority	on, or the United States governm Type	ent (if more space is needed, a Expiration Date Nu	ttach additional sheet). mber					
9.	The applicants have previously held the	ne following alcoholic beverage lic	enses or permits:						
	. Class 5 Brewery - Refillable Containe A Refillable Container permit authorize container that:		r consumption off the licensed p	premises in a refillable					
		32 ounces and not more than 128	ounces						
	 d. Display instructions for clean e. Label stating cleaning the cor f. Label stating contents of the hours after purchase 3. The hours of sale for a refillable 	ng statement required for contain	consumer uld be refrigerated immediately the hours for a guided tour, a						
	4. A holder of a refillable container	permit may refill only a refillable	container that was branded by	the permit holder.					
	The applicant would like to have the R	efillable Container Permit option a	added to my Manufacturers Lice	ense Yes No					
	The applicant agrees to comply with t	he requirements for a Refillable C	ontainer	Yes No					
12	2. Please answer each of the following of (attach explanation if "Yes" to (*) quo		ıal applicants:						
		victed of a violation of the laws of beverages, gaming or gambling?.	f the United States, Maryland o	r anyYes No					
	*c. Has any applicant ever been der	neu or nau revoked an alconolic b	everage licerise or permit?	Yes No					

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APPLICATION FOR MANUFACTURER'S AND WHOLESALER'S LICENSES



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	me Jnatur	e of President or Vice-Pres	Title sident	Signature of applicant	Signature of applicant
	me		ritie		
Na				Residence	
			Title	Residence	
Na	me		Title	Residence	
Na	me		Title	Residence	
Af	fidav Also, docur	r it by signing this applicati nent are true and correct	on, I do solem t to the best of		ties of perjury that the contents of the foregoing
1	emplo check fitnes	gning this application, I byees and agents, to co on, for the purpose of dete on the purpose of dete on the purpose of dete	nduct an invesermining the ac ermse. I further	stigation and receive reports about my ccuracy of the statements made on this ap	Alcohol, Tobacco, and Cannabis Commission, its background, including a criminal history records oplication for an alcoholic beverages license and my or governmental agency that may have relevant numbers of the commission, its employees and agents.
14.	AII	applicants must com		ction	
		Policy or Binder N			
		has secured such co	_	vidence of such coverage, the following	is submitted:
			-	idenced by the certificate of compliance tired to provide employee coverage by	e attached herewith; or the Maryland Workers' Compensation Law and
		b. the applicant is an ϵ	employer requ	ired to provide employee coverage by	the Maryland Workers' Compensation Law and
	$\dot{\Box}$	nplete one): a. the applicant is not	an employer r	required to provide coverage by the Ma	ryland Workers' Compensation Law; or,
L3.	Act"	requires the evidence			led "Compliance with Worker's Compensation se by this office. The applicant hereby affirms
	l.			that 45,000 barrels of own beer annua licants only)	
	k.			than 100,000 gallons of their own liquonts only)	
	j.	Class 6 Limited Winery	wholesale ap	than 35,000 gallons of their own wine a	Yes No
	i.	search without warrant	any premise	nol, Tobacco, and Cannabis Commission or vehicle used in the business to be coaryland?	nducted under this license at any and
	h.	and related items provi	ded by the An	l not furnish anything of value to a reta nnotated Code of Maryland, Alcoholic Be he Alcohol, Tobacco, and Cannabis Cor	verages Article and
	g.			o all the laws, rules and regulations of t e to engage under this license?	, -
	*f.	Are any of the applican	ts' immediate	families pecuniarily interested in a reta	il license? Yes No
	*e.			interested in any other place of busing	
	·u.			ed of a controlled dangerous substance	

Note: If President or Vice-President is one of the applicants, he/she must sign both as President/Vice-President and as applicant.

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APPLICATION FOR **MANUFACTURER'S** AND WHOLESALER'S **LICENSES**



This Section Must be Completed by the Owner of the Premises

15. Statement of owner of premises required in connection with the Annotated Code of Maryland, Alcoholic Beverages Article.

(I/we) hereby certify, that (I am/we are) the owner(s) of property known as named in the foregoing application made to the Maryland Alcohol, Tobacco, and Cannabis Commission under the Annotated Code of Maryland, Alcoholic Beverages Article; that (I/we) assent to the granting of the license applied for, and that (I/we) hereby authorize the Maryland Alcohol, Tobacco, and Cannabis Commission, its duly authorized deputies, inspectors and clerks, the Board of License Commissioners of the jurisdiction in which the place of business is located, its duly authorized agents and employees, and any peace officer of such jurisdiction to inspect and search, without warrant, the premises upon which the business is to be conducted, and any and all

A

I do colomnly doclare and affirm under the populties of	
correct to the best of my knowledge, information and b	perjury that the contents of the foregoing document are true and elief.
Signature	Type or print name
Company Name and Title	Date
hird Party Checks	
Affidavit	
the applicant.	issue a check and make payment for the license/permit fee on behalf
Name of Corporation; Partners of Partnership; or Individual (include Trade	. Name)
Complete Mailing Address	
Signature of Owner, Partner or Corporate Officer	Title
Signature of Owner, Partner or Corporate Officer Federal Identification Number and/or Social Security Number	Title
Federal Identification Number and/or Social Security Number	Date
	OFFICE USE ONLY Check Number
Federal Identification Number and/or Social Security Number Maryland Alcohol, Tobacco,	OFFICE USE ONLY Check Number Amount \$
Federal Identification Number and/or Social Security Number Maryland Alcohol, Tobacco, and Cannabis Commission	OFFICE USE ONLY Check Number Amount \$ Deposit Date
Federal Identification Number and/or Social Security Number Maryland Alcohol, Tobacco, and Cannabis Commission Regulatory & Research Section	OFFICE USE ONLY Check Number Amount \$ Deposit Date Approved
Federal Identification Number and/or Social Security Number Maryland Alcohol, Tobacco, and Cannabis Commission Regulatory & Research Section 1215 E Fort Ave, Ste 300 Baltimore, Maryland 21230	OFFICE USE ONLY Check Number Amount \$ Deposit Date Approved Date
Federal Identification Number and/or Social Security Number Maryland Alcohol, Tobacco, and Cannabis Commission Regulatory & Research Section 1215 E Fort Ave, Ste 300	OFFICE USE ONLY Check Number Amount \$ Deposit Date Approved

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335-1 CHECKLIST FOR MANUFACTURER AND WHOLESALER LICENSE APPLICATION



I. The following MUST be submitted with your initial application. NO application will be issued until all documentation has been received and approved. Submit only the \$200.00 non-refundable application fee, if applicable. Make checks or money orders payable to Maryland Alcohol, Tobacco, and Cannabis Commission

Application For	m 367. (See notes on filing application for license on pa	age 2.)			
 Occupation Red	cord and Financial Statement Form 367-3 for each of th	e INDIVIDUAL applicants.			
 A copy of the c	company, corporate, or partnerships most recent financi	al statement. (basic balance sheet)			
	Articles of Incorporation or Organization Operating Agreements or partners.	ement. Must include an official list			
	Federal Basic Permit or Brewers Notice or application for se will not be issued until we have received your Federa				
 A copy of your	Sales & Use Tax License issued by the Comptroller of M	1aryland			
 A copy of zoning certification for the physical license location. Must indicate the location is properly zoned to operate as a Manufacture / Wholesale business. See notes page 2					
 A statement of proposed business activities.					
 List of the brands you propose to sell and distribute in Maryland.					
	rtification or other appropriate documentation that indic importer or designated Maryland agent for said brand or				
	of the invoice you plan to use as a Maryland licensee. I dress, which match the application.	invoice must show the licensee			
File an appropriate security bond, or cash bond. Use the appropriate bond form(s):					
 Form 364	Wine and Liquor Bond	\$5000			
 Form 365-1	Beer Bond	\$1000			
 Form 366	Wine Bond	\$1000			

335-1 CHECKLIST FOR MANUFACTURER AND WHOLESALER LICENSE APPLICATION

II. Notes on filing applications for licenses:

- 1. A license is issued to three applicants for the use of the company. If less than three officers exist (e.g. Closed Corporation), then a license may be issued to less than three individuals. In such case a letter so certifying that there are less than three officers / members or partners must be submitted.
- 2. At least one of the applicants must be a Maryland resident, taxpayer and registered voter currently and for the immediate two preceding years. So designate in Section 1 of form 367, Application for Manufacturer's and Wholesaler's Licenses.
- 3. In Section 14 of the license application, all officers/members/partners must be listed whether or not they are license applicants (attach separate sheet if necessary). However, ONLY the three applicants should sign under Signature of Applicants and only the applicants need fill out the Form 367-3 Occupational Record and Financial Statement of Individual License Applicant.
- 4. In the case of a corporation, the President or Vice-President of the company must sign under Signature of President or Vice-President, and if he/she is also an applicant, he/she must sign under Signature of Applicant.
- 5. The actual owner of the proposed license premises must sign the Owner of Premises section. Unless a Power of Attorney form is submitted, a real estate agent, etc., may not sign this section.
- 6. In accordance with ABA 1-405, we require certification from the local zoning authorities indicating your premises is properly zoned for the operation of a wholesaler's or manufacturer's alcoholic beverage business.

CONTACT INFORMATION: Maryland Alcohol, Tobacco, and Cannabis Commission Regulatory & Research Section 1215 E Fort Ave, Ate 300 Baltimore, Maryland 21230

410-260-7314 atcc.licensing@maryland.gov atcc.maryland.gov

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MARYLAND FORM 367-3

OCCUPATION RECORD **AND FINANCIAL** STATEMENT OF **INDIVIDUAL LICENSE APPLICANT**



Full name in which license is applied for (individual, partnership, corporation or limited liability company):

Name of individual applicant completing form:

Instructions: This form must be filed by the individual license applicant. It is not for use by the corporation or partnership. Each applicant must complete a separate form. Both pages must be completed and the form signed. If more space is needed for any section, attach additional sheets.

Work history - List below your complete work history for at least the last ten (10) years. Include full-time paid positions.

Title of position held	From	То	Name of employer	Address of employer

MARYLAND FORM 367-3

OCCUPATION RECORD AND FINANCIAL STATEMENT OF **INDIVIDUAL LICENSE APPLICANT**



II. Personal financial statement - List below your personal ass personal property, loans, mortgages, etc. If none, so state.	ets and Habilities. Inclu	ue reai estate, b	ank deposits, stock, bond
Describe assets			Amount
Describe liabilities	Total assets	\$	
Section industries			Amount
	Total liabilities	 ; \$	
III. Personal investment in business			
(a) Amount to be invested by applicant: Cash \$			
Equipment \$			
Goodwill \$			
Other \$		Total \$	
(b) Is applicant's investment in business to be financed solel	y from assets listed in F	Part II above?	Yes N
(c) If "No" to "b", list below the amount of additional monies and address of any person who has undertaken or will ur said business and the relationship, if any, of each person	ndertake to advance mo	usiness, the sou nies to the appli	rce of same and the nam cant to assist in financing
Amount			
Source			
Name			
Address			
Relationship			
The applicant whose signature appears below represents under per hat they shall be made a part of the application for a license. It is nvestigation pursuant to the Annotated Code of Maryland, the Alco	understood that inform	ation reported n	
		Signature of app	Р

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