

**MARYLAND
FORM
367-1**

Application for Change in License Location

Note: Application must be approved prior to move

Comptroller of Maryland
Field Enforcement Division
Regulatory and Licensing Section
PO Box 2999
Annapolis, MD 21404
410-260-7314

www.marylandtaxes.com

This statement is to be attached to and made a part of the application of:

Name(s) of license applicant(s)		License Number
Trade name		
Present Address; Number and Street		
City	County	Zip Code

The NEW location for which license transfer is desired is known as:

Street Address		
City	County	Zip Code
Describe premises		
Telephone number	Fax number	
Date of anticipated move		

Fee for Change in License Location \$20.00

Affidavit

I do solemnly declare and affirm under the penalties of perjury that the contents of the foregoing documents are true and correct to the best of my knowledge, information and belief.

Signature of Owner, Partner, Member or Corporate Officer

Title

Type or print name of Signature of Owner, Partner, Member or Corporate Officer

Date

Statement of Owner of Premises Required in Connection with Alcoholic Beverages Law of Maryland

(I, We) hereby certify, that (I am, we are) the owner(s) of property known as _____

named in the afore going application made to the Comptroller of Maryland under the Alcoholic Beverages Law of Maryland; that (I, we) assent to the granting of the license applied for, and that (I, we) hereby authorize the Comptroller of Maryland, his duly authorized deputies, inspectors and clerks, the Board of License Commissioners of the county in which the place of business is located, its duly authorized agents and employees, and any peace office of such county to inspect and search, without warrant, the premises upon which the business is to be conducted, and any and all parts of the building(s) in which said business is to be conducted, at any and all hours.

Owner's signature

Date

Type or print name of owner