



**DIVISION OF PLANNING AND PERMITTING  
FREDERICK COUNTY, MARYLAND**

*Department of Permits and Inspections*

30 North Market Street • Frederick, Maryland 21701

Phone (301) 600-2313 • Fax (301) 600-2309

**2020 GAMING DISTRIBUTOR LICENSE RENEWAL**

Date of Application \_\_\_\_\_

Distributor License Number \_\_\_\_\_

**All 2019 Distributor Licenses will expire on December 31, 2019.** Please complete the application below:

**DISTRIBUTOR INFORMATION** –

Company Name \_\_\_\_\_  
Street Address \_\_\_\_\_ (street address is mandatory)  
P.O. Box # \_\_\_\_\_  
City, State, Zip \_\_\_\_\_  
Phone Number \_\_\_\_\_  
Fax Number \_\_\_\_\_  
Email Address \_\_\_\_\_

Everyone directly responsible for distributing gaming supplies, filling out reports, or customer service must sign the statement below. If you need additional forms feel free to make copies of this form.

*All persons will need to supply a copy of their drivers' license (unless we have one on file).*

**DISTRIBUTORS REPRESENTATIVE INDIVIDUAL INFORMATION**

Name \_\_\_\_\_  
Home Street Address \_\_\_\_\_  
P.O. Box \_\_\_\_\_  
City, State, Zip \_\_\_\_\_  
Phone Number \_\_\_\_\_  
Cell Number \_\_\_\_\_  
Email Address \_\_\_\_\_

By signing below, I \_\_\_\_\_, solemnly affirm under the penalties of perjury, that I have never been convicted of a felony, nor have I been convicted within the past five (5) years of a misdemeanor related in any way to gaming or gambling. I understand that the information given may be verified by a representative of the Frederick County Sheriffs' Office. I also understand that I will be taking responsibility for complying with the provisions of the Gaming Ordinance. This may include, but is not limited to, the collection of funds for Frederick County, the submittal of those collected funds to the Permits and Inspections Office on a monthly basis, and the submittal of monthly reports for all supplies sold to an operator/organization within 45 days after the end of each month.

\_\_\_\_\_  
Signature

Notary Seal

Notary Signature: \_\_\_\_\_

My commission expires \_\_\_\_\_

**Distributor License Current Annual Fee: \$2,362.00** Please make checks payable to: Frederick County. Mail check and the form(s) to the address above. No license renewal can be approved until all reports are received.

**Office use only:** Date received \_\_\_\_\_ Date approved and mailed \_\_\_\_\_ Initials \_\_\_\_\_