



STATE OF MARYLAND FREDERICK COUNTY LIQUOR



Email: LiquorBoard@FrederickCountyMD.gov
Phone: 301-600-2984 Fax: 301-600-3500

APPLICATION REQUEST FORM (All fields are required)

DATE: _____ Application type (check one): **New** **Transfer** **Upgrade**

CONTACT NAME: _____ EMAIL: _____

PROPOSED LOCATION: _____

ENTITY TYPE (check one): **CORP** **LLC** OTHER: _____

NAME OF ENTITY: _____

TRADING AS NAME: _____

CLASS (check one): **A** **B** **C** **TAPROOM (Brewery/Distillery)**

TYPE (check one): **B** **B&W** **BW&L** **BREWERY** **DISTILLERY**

ADDITIONAL COMMENTS (not required):

Applicants Full Name:

1. _____

2. _____

3. _____

Please email completed request form to LiquorBoard@FrederickCountyMD.gov

Please allow 2 business days for application pick up, we will email it electronically.