



LIQUOR CONTROL BOARD FOR HARFORD COUNTY, MARYLAND

16 North Main Street, Bel Air, MD 21014

410-638-3028 / 410-638-4970 (fax)

www.hclcb.org



(CLASS C) PER DIEM ALCOHOLIC BEVERAGE LICENSE APPLICATION
NON-PROFIT ORGANIZATIONS

- Applications must be submitted 30 days prior to the event date.
A \$50 Late Fee may be charged for applications filed less than 30 days prior to the event date.
Events held outside are assessed an additional \$30 fee.
Incomplete forms will not be processed.
Only original forms will be accepted - No Fax Copies.
The Property Owner must sign the Application.
Applicant(s) signature(s) must be notarized.
First Time Applicants must appear before the Board.
All Applications must be approved by the Board.

FEES

- Beer & Wine License: \$15 per day
Beer, Wine & Liquor License: \$30 per day
\$1.00 Mailing Fee (Must be received 30 Days prior to event)
\$50.00 Late Fee
\$30.00 Outside Event Fee

Make Checks Payable to: Liquor Control Board
All fees paid are non-refundable.

(A) NON-PROFIT INFORMATION:

Non-Profit Sponsor Organization: _____

Non-Profit Address: _____
(Street Address / City / State / Zip Code)

Non-Profit Web Site: _____ Non-Profit Email: _____

Is Proof of Non-Profit Status on File with the Board? [] YES [] NO

(B) APPLICANT INFORMATION: (Two Applicants MUST APPLY; One License Holder MUST BE PRESENT during the event)

(1) Applicant Name: _____ Title: _____

Applicant Address: _____
(Street Address / City / State / Zip Code)

Contact Number: _____ Email Address: _____

(2) Applicant Name: _____ Title: _____

Applicant Address: _____
(Street Address / City / State / Zip Code)

Contact Number: _____ Email Address: _____

(C) EVENT INFORMATION:

Date(s) of Event: _____ Rain Date(s): _____

Name of Event: _____ Event Type: _____

Address of Event: _____
(Street Address / City / State / Zip Code)

Location Description: _____ [] Inside [] Outside*
* Must complete (E) & (F)

Event Hours: From: _____ to _____ Alcohol Sales: From: _____ to _____

Admission Fee: \$ _____ Estimated Attendance: _____

Event Website: _____ Facebook Page: _____

(C) EVENT INFORMATION (continued):

Caterer Name: _____ **(CONTRACT MUST BE ATTACHED)**

Food to be Served: _____

<p>Entertainment:</p> <p><input type="checkbox"/> Bands How many? _____</p> <p><input type="checkbox"/> DJ – Name: _____</p> <p><input type="checkbox"/> Other: _____</p> <hr/> <p>Entertainment Hours: From: _____ To: _____</p> <p>Entertainment Website: _____</p> <hr/>	<p>Vendors:</p> <p><input type="checkbox"/> Food (Attach Full List of Vendors)</p> <p><input type="checkbox"/> Crafts</p> <p><input type="checkbox"/> Other: _____</p> <p>Approximate No. of Vendors: _____</p> <hr/> <p>Alcohol is to be Obtained from:</p> <p><input type="checkbox"/> Local Retailer: _____</p> <p><input type="checkbox"/> Distributor: _____</p> <p><input type="checkbox"/> Other: _____</p> <hr/>
<p>Type of Advertising:</p> <p><input type="checkbox"/> Radio <input type="checkbox"/> Flyer</p> <p><input type="checkbox"/> Internet <input type="checkbox"/> Social Media</p> <p><input type="checkbox"/> Other: _____</p> <p><i>Copy of Invitation/Flyer/Other Promotion must be attached.</i></p>	<p>Parking:</p> <p><input type="checkbox"/> On Site Parking Fee: \$ _____</p> <p><input type="checkbox"/> Off Site Location: _____</p> <p><input type="checkbox"/> Shuttle</p> <p>No. of Parking Control Personnel: _____</p>

(D) ALCOHOL CONTROL / SECURITY PLAN:

<p>Alcohol Dispensing Plan:</p> <p>No. of Entrances: _____ No. of Exits: _____</p> <p>Carding Location(s):</p> <p><input type="checkbox"/> Bar/Service Area</p> <p><input type="checkbox"/> Entrance</p> <p><input type="checkbox"/> Point of Sale</p> <p><input type="checkbox"/> Other: _____</p> <p>Total No. of Carding Locations: _____</p> <p>Total No. of Persons Dispensing Alcohol: _____</p> <p>Total No. of Alcohol Awareness Certified Staff: _____</p> <p>Hours: _____ <input type="checkbox"/> a.m. <input type="checkbox"/> p.m. to _____ <input type="checkbox"/> a.m. <input type="checkbox"/> p.m.</p>	<p>Security Staff:</p> <p>Will there be hired Security/Police?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Company/Dept. Name: _____</p> <hr/> <p>No. of Security Provided: _____</p> <p>Uniform? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Volunteer/Other Personnel:</p> <p>Volunteer Security: No. _____</p> <p>Carding Staff: No. _____</p> <p>Dispensing Staff: No. _____</p> <p>Alcohol Awareness Certified Staff:</p> <p>No. _____</p> <p>Medical Personnel (Paid & Volunteer):</p> <p>No. _____ <input type="checkbox"/> Private <input type="checkbox"/> EMS</p> <p>Total No. of Personnel: _____</p>	
<p>Alcohol Service Area(s):</p> <p><input type="checkbox"/> Beer Garden No.: _____</p> <p><input type="checkbox"/> Bar No.: _____</p> <p><input type="checkbox"/> Beer Truck No.: _____</p> <p><input type="checkbox"/> Beer Tub No.: _____</p> <p><input type="checkbox"/> Other: _____</p> <p>Total Alcohol Service Areas: _____</p>	<p>Under 21 Admitted?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Method to Differentiate:</p> <p><input type="checkbox"/> Wrist Bands</p> <p><input type="checkbox"/> Hand Stamp</p> <p><input type="checkbox"/> Signs</p> <p><input type="checkbox"/> Other: _____</p>	<p>Restrictions for Attendees:</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Explain:</p> <p><input type="checkbox"/> No Re-Entry</p> <p><input type="checkbox"/> No Coolers</p> <p><input type="checkbox"/> No Outside Food/Beverage</p> <p><input type="checkbox"/> Other: _____</p> <hr/>

(E) OUTSIDE EVENT SECURITY PLAN: (Complete this section if ANY PORTION of the event is OUTSIDE)

<p>Tents:* <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Size: _____</p> <p>Capacity: <input type="checkbox"/> Under 50 <input type="checkbox"/> 50-100 <input type="checkbox"/> 100-500 <input type="checkbox"/> 500-1,000 <input type="checkbox"/> 1,000 +</p> <p>Tents With Food Preparation: <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, how many? _____</p> <p>*Tents are subject to FIRE MARSHAL and HEALTH DEPARTMENT Approval.</p>	<p>Containment Plan:</p> <p><input type="checkbox"/> Fencing Type: _____</p> <p><input type="checkbox"/> Natural Boundary</p> <p><input type="checkbox"/> Tent</p> <p><input type="checkbox"/> Other: _____</p> <hr/> <p>Sanitary Facilities:</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>How many? _____ Type: _____</p> <p>Hand-washing Facilities:</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No How many? _____</p>
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(F) DIAGRAM MUST BE SUBMITTED WITH APPLICATION FOR ALL OUTSIDE EVENTS.

Detailed diagram must include: Location of ALL ID check points, entrances, and exits; the location of alcohol sales and/or dispensing areas; where containment (including tents) will be located; fencing to be used, etc.

IMPORTANT CONTACT INFORMATION

Harford County Health Department	410-877-2300	Aberdeen Permit Information	410-272-1600
Fire Marshal's Office	410-836-4844	Bel Air Permit Information	410-638-4546
Harford County Planning & Zoning	410-638-3103	Havre de Grace Permit Information	410-939-1800
Harford County Dept. of Inspections, Licensing & Permits	410-638-3344	Harford County Sheriff's Department	410-838-6600

FOR LCB USE ONLY

<u>NOTIFICATIONS</u>
<input type="checkbox"/> Health Department: _____ <input type="checkbox"/> Fire Marshal: _____ <input type="checkbox"/> H. Co. P & Z: _____ <input type="checkbox"/> H. Co. DILP: _____ <input type="checkbox"/> Aberdeen: _____ <input type="checkbox"/> Bel Air: _____ <input type="checkbox"/> Havre de Grace: _____ <input type="checkbox"/> Law Enforcement: _____

<u>APPROVED</u>
<input type="checkbox"/> Yes Date: _____ <input type="checkbox"/> No Date: _____ Notes: _____ _____ _____ _____ _____ _____ <p style="text-align: right;">Board Staff: _____</p>

(G) SIGNATURE(S) OF APPLICANT(S):

On behalf of the aforementioned organization, I/We hereby certify that this application is made on behalf of a bona fide religious, fraternal, veterans, political, civic, educational, athletic, or other non-profit organization. I/We understand that as the Applicant for this organization, I/We will be held responsible for any violation of the laws pertaining to the sale, consumption, or possession of alcoholic beverages at the above-described event.

Applicant 1: **AGREE**

Applicant 2: **AGREE**

I/We have read and understand the Responsibilities & Regulations articulated on the attached form.

Applicant 1: **AGREE**

Applicant 2: **AGREE**

ALL APPLICANTS MUST SIGN **IN THE PRESENCE OF A NOTARY** UNDER SECTIONS (1) OR (2) BELOW.
The (1) and (2) signatures must correspond to the person(s) listed on Section B.

(1) _____
(Signature of Applicant)

(2) _____
(Signature of Applicant)

State of _____ County of _____

I hereby certify that on this _____ day of _____, in the year of _____, before me, a notary public of the State of _____, in and for _____ County, personally appeared: (1) _____ and (2) _____, the **above-named** in this Application, and made oath in due form of law that the matters and facts contained in said application are true and correct.

Witness my hand and official seal:

Signature of Notary Public

Printed Name of Notary Public

My Commission Expires: _____

SEAL

(H) STATEMENT OF OWNER OF PREMISES:

REQUIRED IN CONNECTION WITH ALCOHOLIC BEVERAGE LAW OF MARYLAND:

I/We hereby certify that I am/we are the owner(s) , or its duly authorized agent, of the property located at _____
_____, and under the
(Property Address/City/State/Zip)

Alcoholic Beverage Laws of Maryland, do assent to the granting of the License applied for; and that I/we hereby authorize the State Comptroller, his duly authorized Deputies, Inspectors, and Clerks; the Liquor Control Board for Harford County, its duly authorized Agents and Employees; and any Peace Officer of Harford County to inspect and search, without warrant, the premises upon which the business is to be conducted at any and all hours; and the undersigned owner further agrees that evidence uncovered during such inspection shall be admissible as evidence in any prosecution for the violation of any of the Acts or Laws heretofore mentioned.

I/We further acknowledge that the signature(s) of the Property Owner(s)/Agent constitutes permission to have alcoholic beverages on the premises and acknowledgment of the responsibility for laws pertaining to property owners upon which per diem events are held.

Date of Signature: _____

ALL PERSONS HAVING AN INTEREST IN THE PROPERTY MUST SIGN.

(a)	_____	_____	_____
	(Signature of Property Owner)	(Printed Name of Property Owner)	(Contact Number)
(b)	_____	_____	_____
	(Signature of Property Owner)	(Printed Name of Property Owner)	(Contact Number)
(c)	_____	_____	_____
	(Signature of Property Owner)	(Printed Name of Property Owner)	(Contact Number)
(d)	_____	_____	_____
	(Signature of Property Owner)	(Printed Name of Property Owner)	(Contact Number)

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- **Property Owners may require the Per Diem license holder(s) to obtain individual liability insurance. The Harford County Liquor Control Board does not administer regulations for insurance liabilities.**
 - **The Board shall have the right to limit the number of Per Diem licenses to be granted per year for any specific organization.**
 - **Per Diem events are subject to inspections by the Harford County Liquor Control Board, Health Department, Fire Marshal’s Office, and local law enforcement.**



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RESPONSIBILITIES & REGULATIONS FOR PER DIEM LICENSE HOLDERS

All persons or organizations using the per diem license as authorized by the Alcoholic Beverages (AB) Article of the Annotated Code of Maryland (§ 4-1202, § 4-1203, § 4-1204, § 22-1309) and the Rules & Regulations of the Harford County Liquor Control Board (BR 5:23) are subject to the laws pertaining to the sale consumption and possession of alcoholic beverages. Per Diem events are subject to inspections by the Harford County Liquor Control Board, Health Department, and Fire Marshal's Office.

- A **Per Diem License must be obtained** by a qualified non-profit organization for use at events wherein alcohol is served and there will be an admission charge (tickets sold), cash bar, or other monies collected in connection with the event.
- Applications must be filed with Board office at least **30 days prior** to the event date. A **\$50 late fee** (plus the license fee) may be assessed for applications filed late.
- Unless previously provided, each application must be accompanied by the following: (a) the organization's Bylaws; (b) Articles of Incorporation; (c) IRS Tax Determination Letter; and (d) Certification Letter issued by the State of Maryland.
- Application must be made by 2 individuals, at least one of whom is **affiliated in an official capacity with the non-profit organization**. One of the applicants **must be present during the entire event**. The Board will hold both applicants responsible for any violation of the laws pertaining to the sale, consumption, and possession of alcoholic beverages at the event.
- An applicant **must appear before the Board** prior to the issuance of a Per Diem License if any of the following conditions are true: (a) the license is for a first-time organization or event; (b) the applicant is a first-time applicant; or (c) the applicant has not held a per diem license for 3 or more years.
- **Adequate food** in conjunction with the sale of alcoholic beverages must be provided for attendees, based on the capacity of the events.
- Monies derived from **food and alcohol sales should benefit the non-profit organization**. The Harford County Liquor Control Board can audit sales receipts and donation records.
- **The Per Diem License must be prominently displayed in a conspicuous location near where the alcohol is being dispensed during the event.**
- The holder of a Per Diem License may purchase beverages from a wholesaler, beer distributor, or retailer.
- Holders of Per Diem Licenses may accept delivery of alcoholic beverages from a wholesaler two days prior to the effective date only if the holder has the license in hand at the time of delivery.
- All sales must cease by 2:00 a.m.; no alcohol can be consumed after 2:15 a.m.; and all alcoholic beverage containers must be cleared by 2:30 a.m.

RESPONSIBILITIES & REGULATIONS FOR PER DIEM LICENSE HOLDERS

(Continued)

- Licensees and volunteers/employees for the event **may not consume any alcohol during the event**. Persons who appear to be intoxicated cannot be served.
 - A licensee may not permit any person to drink beer or wine not purchased from the license holder on the premises. However, if the license is issued for beer and wine and the event is advertised as BYOL (Bring Your Own Liquor), it is legal to consume liquor not purchased from the licensee.
 - For the consumption, possession, or purchase of alcoholic beverages, a person must be 21 years of age. Licensees are responsible for age verification.
 - No premises may be used for the purpose of bookmaking or gambling in any form, except when specifically authorized by law.
 - No licensee, agent, or employee shall commit or allow the commission on the licensed premises any act which is contrary to the federal, state, or local statutes, laws, or ordinances, or against the public peace, safety, health, or welfare.
 - Alcoholic beverages can only be consumed in the area described as the licensed premises (i.e., if the description is *Church Hall* or *Fire Hall*, consumption outside the building is prohibited; unless an outside venue has been approved).
 - Applications for **events held outside** must include **a diagram detailing the control and containment of the alcoholic beverages** during the event. Information regarding the type of fencing to be used for containment of the area where the alcohol is to be dispensed/consumed; and the staffing to ensure proper carding and control during the event must also be included.
 - A **Temporary Food Permit** from the **Harford County Health Department** may be required for the event. You may contact **Lynne Whalen at 410-877-2300**. If you are using a caterer from outside Harford County, a Temporary Food Permit **is required**. This Office notifies the Health Department of every per diem license we issue.
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