City of Annapolis
Office of the City Clerk
160 Duke of Gloucester Street
Annapolis, MD 21401

DepClerk@annapolis.gov • 410-263-7942 • Fax 410-280-1853 • TDD use MD Relay or 711 • www.annapolis.gov

Alcoholic Beverage Control Board
Substitution or Deletion of Licensee

Filing Fee: $225.00 payable to the City of Annapolis.

Application Due: See Board's Application Submission Deadline schedule for current calendar year.

1. Any entity holding an Alcoholic Beverage License may, during the License year, substitute any or all of its officers or employees named as Licensees pursuant to Section 2.01(J) of the Alcoholic Beverage Control Board Rules and Regulations if the Licensee to be substituted or deleted is deceased, retired, removed from office or employment with the entity, or no longer holds office or employment with the entity.

2. Prior to any substitution or deletion of a Licensee, the following documents (**one original and six copies**) are required to be submitted to the Deputy City Clerk:

    a. Application for Substitution of Licensee.
    b. Affidavit of Corporate Officer for Substitution or Deletion of Licensee.
    c. Financial Information Form (if adding a new officer).
    d. Corporate Resolution or Corporate Minutes evidencing the change of officer/employee.
    e. Shareholders Certificate or Member Percentage, as applicable for a corporation or LLC.

3. If the Licensee being substituted or deleted is the qualifying Licensee under Section 2.01 of the Alcoholic Beverage Control Board Rules and Regulations, a new qualifying Licensee shall be appointed and shall:

    a. For the two (2) years preceding the date of the substitution or deletion, be a resident, real property taxpayer and registered voter of the City of Annapolis or Anne Arundel County, Maryland; and
    b. During the term of the License, continue to be a resident, real property taxpayer and registered voter of the City of Annapolis or Anne Arundel County, Maryland.

4. The Licensee must also **sign** and submit the "Privacy Act Statement" and "NonCriminal Justice Applicant's Privacy Rights" to the Deputy City Clerk, which are federally required to be provided to the Licensee as part of any governmental request for fingerprinting and background checks. These forms are available at: https://www.annapolis.gov/408/Office-of-the-City-Clerk.

Any terms used in this form, which are not otherwise defined, shall have the meanings indicated in the Alcoholic Beverage Control Board (ABCB or Board) Rules and Regulations.

City of Annapolis
Office of the City Clerk
163 Duke of Gloucester Street
Annapolis, MD 21401-2028

DepClerk@annapolis.gov • 410-263-7942 • Fax 410-280-1853 • TDD use MD Relay or 711 • www.annapolis.gov

Alcoholic Beverage Control Board
Substitution of Licensee Application

Entity Legal Name _____

Address of Licensed Premises _____

Licensee being removed:

Name _____

New Licensee to be added to License:

Name _____

Address _____ How long? _____

Date of birth _____ Place of birth _____

Phone(s) _____ Email address _____

1. Have you been a resident, taxpayer and registered voter of the City of Annapolis or Anne Arundel County, Maryland for two (2) years preceding the filing of this application? ☐ Yes ☐ No
2. Do you have a financial interest in the business of the Licensed Premises? ☐ Yes ☐ No
3. Will you be participating in the daily management of the Licensed Premises? ☐ Yes ☐ No
4. Do you hold office in the entity completing this application? ☐ Yes ☐ No
5. Have you ever been convicted of a felony? ☐ Yes ☐ No
6. Are you a citizen of the United States? ☐ Yes ☐ No
7. Have you ever been adjudged guilty of violating the laws governing the sale of Alcoholic Beverages or for the prevention of gambling in the State of Maryland? ☐ Yes ☐ No
8. Have you ever been adjudged guilty of any offense against the laws of the State or of the United States?
   If yes, state details below. ☐ Yes ☐ No

9. What is your pecuniary interest in the business to be conducted under this License? State percentage _____
10. Do you have a pecuniary interest in any other place of business in the City of Annapolis or Anne Arundel County, where or for which a License has been applied for, granted, or issued under this article, except as otherwise permitted in by Article 2B? ☐ Yes ☐ No
11. Have you had a license for the sale of alcoholic beverages revoked? ☐ Yes ☐ No

12. Have you ever held a License for the sale of Alcoholic Beverages, and if so, in what state and at what location therein? If yes, state details below. ☐ Yes ☐ No

_____

13. If the substitution is granted, will you conform to all laws and regulations relating to the business in which you propose to engage? ☐ Yes ☐ No

14. List the names and titles of the officers of the entity submitting this application.

Name	Title

I HEREBY CERTIFY, on this _____ day of _____, _____, under penalties of perjury, that the matters and facts set forth above are true and correct; and that I hereby authorize the City of Annapolis and Annapolis Police Department, its employees, agents and officers to release unto the City Clerk and personnel employed in that office any and all criminal background records that may exist or come into the possession of the City of Annapolis or the Annapolis Police Department for purposes of processing this application.

Signature of New Licensee_____

STATE OF MARYLAND, ANNE ARUNDEL COUNTY, to wit:

I HEREBY CERTIFY, on this _____ day of _____, _____, before me, the subscriber, a Notary Public of the State and County aforesaid, personally appeared the New Licensee named above and made oath in due form of law that the matters and facts set forth above are true to the best of his/her knowledge, information and belief.

WITNESS my hand and Notary Seal.

Notary Public _____ My Commission expires _____

FOR OFFICE USE ONLY

Approved by the Alcoholic Beverage Control Board _____

City of Annapolis
Office of the City Clerk
160 Duke of Gloucester Street
Annapolis, MD 21401-2517

DepClerk@annapolis.gov • 410-263-7942 • Fax 410-280-1853 • TDD use MD Relay or 711 • www.annapolis.gov

Affidavit of Corporate Officer for Substitution or Deletion of Licensee

Corporate/legal name of the Premises _____

Contact Person _____

Work Phone # _____ Contact/Cell Phone # _____

E-mail Address _____

Premises Address _____

STATE OF MARYLAND, COUNTY OF ANNE ARUNDEL, to wit:

I HEREBY CERTIFY, on this _____ day of _____, _____, before me, the subscriber, a Notary Public of the State of Maryland, in and for the county of Anne Arundel, personally appeared _____ (corporate officer), known by me to be the _____, (officer's title) of the aforesaid corporation, and in his/her capacity as an officer of the corporation certified that an Application for Substitution of Officer has been filed with the City of Annapolis Alcoholic Beverage Control Board due to the fact that _____ (officer being removed), previously an officer of the Corporation, can no longer serve as a licensee on the alcoholic beverage license because the licensee:

- ☐ is deceased
- ☐ has been removed from office
- ☐ is retired
- ☐ no longer holds an office in the corporation or club.

The affiant further certified that _____ the new officer and _____ (officer's title) of the corporation has been issued stock in the corporation, that the shares of stock previously issued to _____ (officer being removed) have been returned to the corporation, and, with that exception, the ownership of the corporation has not changed.

Name of Corporation/LLC _____

By _____

I HEREBY CERTIFY, on this _____ day of _____, _____, before me, the subscriber, a Notary Public of the State and County aforesaid, personally appeared _____ and made oath in due form of law that the matters and facts set forth above are true and correct.

WITNESS my hand and Notary Seal.

Notary Public _____ My Commission expires _____

Signatures:

Officer being removed _____

Current licensee _____

Current licensee _____