

**Board of License Commissioners  
Alcoholic Beverages/Liquor Board**  
200 Chesapeake Boulevard, Suite 1600  
Elkton, Maryland 21921  
410-996-5215 - 410-658-4041 Ext.5215  
Fax 410-996-1172

**SPECIAL CLASS "C" LICENSES**

Special Class "C" On-Premise Licenses may be issued to any club, society or association which is organized and operated exclusively for education, social, fraternal, patriotic, political, or athletic purposes and not for profit. **Proof of this status is required with application; if not submitted license will not be approved.**

Each organization is allowed to obtain a license for four (4) dates per year. All four dates may be applied for on one application. **The application fee is \$35.00**, payable to **Cecil County, Maryland** which is due when the application is submitted.

The cost of the license is **\$10.00 per day** for beer or beer and light wine and **\$20.00 per day** for beer, wine and liquor. This fee may be paid at the time application is submitted.

The Board takes selling alcohol to persons under the age of 21 very seriously. It is the licensee's responsibility to ensure that no one under the age of 21 is served any alcoholic beverage. Licensees should be requiring identification from anyone of questionable age.

**RULES AND REGULATIONS**

- 1. Proof of IRS 501(c)(3) Status must be submitted with application – Application will not be approved without proper proof of non-profit status.**
2. One applicant must be a Cecil County resident for at least two (2) years
3. If event involves the sale of tickets which includes alcoholic beverage in the price of the ticket – this is the sale of the alcoholic beverage; therefore if event includes persons under the age of 21, there should be a separate ticket for those persons under the age of 21. No licensee shall sell or in any way furnish alcoholic beverages to any person under the age of 21.
4. No person under 18 years of age shall volunteer or be employed to sell or serve alcoholic beverages.
5. No licensee shall knowingly sell or furnish alcoholic beverages to any person under the influence of alcohol or dangerous substances or who is disorderly in conduct or to a habitual drunkard or to a mentally deficient person.
6. No licensee shall allow lewdness, immoral activities, brawls, unnecessary noise, including loud or disturbing music, unlawful conduct by the licensee or employees whose acts constitute a public nuisance.
7. Hours of sale:  
Monday through Saturday: 6:00 a.m. daily to 2:00 a.m. the following day.  
Sunday: 8:00 a.m. to 11:00 p.m.
8. No licensee shall consume or permit the consumption or possession of alcoholic beverages by patrons on the licensed premises during the hours when such sales or consumption is prohibited.
- 9. Licensees will conform to all laws and regulations relating to the business in which you propose to engage, including all permits and licenses as required. Licensee(s) agree to comply with all the laws, rules and regulations relating to the sale, purchase and consumption of alcoholic beverages in Cecil County.**



**APPLICATION FOR  
SPECIAL ONE DAY (CLASS C) ALCOHOLIC BEVERAGE LICENSE**

**APPLICATION FEE**      Application Fee Due With Application      \$35.00  
**PLUS License Fee**  
Beer or Beer & Wine      \$10.00 per date  
Beer, Wine & Liquor      \$20.00 per date

**MAKE CHECKS PAYABLE TO: Cecil County, Maryland**

Please check one:      Beer \_\_\_\_\_      Beer & Wine \_\_\_\_\_      Beer, Wine & Liquor \_\_\_\_\_

**Each Organization is allowed up to four (4) dates per calendar year.**

Type of Function:      {1} \_\_\_\_\_      {2} \_\_\_\_\_      {3} \_\_\_\_\_      {4} \_\_\_\_\_

Date of Function:      {1} \_\_\_\_\_      {2} \_\_\_\_\_      {3} \_\_\_\_\_      {4} \_\_\_\_\_

**Please print legibly!**

1. Name of organization holding event: \_\_\_\_\_  
Organization must be a non-profit organization

2. Applicants: {Please list 3} - **One applicant must be a Cecil County Resident for at least two years.**

a. \_\_\_\_\_  
**Name**      \_\_\_\_\_      **Age**      \_\_\_\_\_      **Telephone No.** \_\_\_\_\_  
\_\_\_\_\_      \_\_\_\_\_  
**Residential Address**      \_\_\_\_\_      **Office Held**

b. \_\_\_\_\_  
**Name**      \_\_\_\_\_      **Age**      \_\_\_\_\_      **Telephone No.** \_\_\_\_\_  
\_\_\_\_\_      \_\_\_\_\_  
**Residential Address**      \_\_\_\_\_      **Office Held**

c. \_\_\_\_\_  
**Name**      \_\_\_\_\_      **Age**      \_\_\_\_\_      **Telephone No.** \_\_\_\_\_  
\_\_\_\_\_      \_\_\_\_\_  
**Residential Address**      \_\_\_\_\_      **Office Held**

**NOTE:      Applicants MUST sign on second page and must have their signatures notarized.  
Owner of premises MUST sign below.**

3. Name/Full address where event is to be held: \_\_\_\_\_  
\_\_\_\_\_

If event is to be held at any state-owned property, a copy of alcoholic beverage waiver must be submitted.

4. Expected number of guests: \_\_\_\_\_

5. A. specific description of licensed premises for this special event: \_\_\_\_\_  
\_\_\_\_\_

B. Event to be held: \_\_\_\_\_ Inside      \_\_\_\_\_ Outside      \_\_\_\_\_ Inside/Outside

6. Premises owned by: \_\_\_\_\_

7. Contact Information for Owner of premises:  
Mailing Address (if different from premises address) \_\_\_\_\_

Phone Number: \_\_\_\_\_

8. Authorized signature of owner: \_\_\_\_\_  
{Owner's signature must be notarized below}

STATE OF MARYLAND  
COUNTY OF CECIL, to wit:

THIS CERTIFIES that on the \_\_\_\_\_ day of \_\_\_\_\_, before me, the subscriber, a Notary Public of the State and County aforesaid, personally appeared \_\_\_\_\_ and acknowledged the execution of the foregoing statement to be his/her act.

WITNESS my hand and official seal.

\_\_\_\_\_  
Notary Public

My Commission expires: \_\_\_\_\_

Applicant(s) authorize the Comptroller of Maryland, his authorized agents, the Board of License Commissioners, its authorized agents or inspectors and any peace officer to inspect and search, without warrant, the assigned area of the licensed premises at any and all hours.

Applicant(s) agree that upon request, the Board of License Commissioners of Cecil County may inspect any records pertaining to the sale of alcohol for which this license was issued.

Applicant(s) agree to conform to all laws and regulations relating to the business in which you propose to engage.

Applicant(s) agree to comply with all the laws, rules and regulations relating to the sale, purchase and consumption of alcoholic beverages in Cecil County.

**Signature of Applicants** {Applicants signature must be notarized below}

a. \_\_\_\_\_  
Applicant's Signature

b. \_\_\_\_\_  
Applicant's Signature

c. \_\_\_\_\_  
Applicant's Signature

STATE OF MARYLAND  
COUNTY OF CECIL, to wit:

THIS CERTIFIES that on the \_\_\_\_\_ day of \_\_\_\_\_, before me, the subscriber, a Notary Public of the State and County aforesaid, personally appeared \_\_\_\_\_ and acknowledged the execution of the foregoing statement to be his/her act.

WITNESS my hand and official seal.

\_\_\_\_\_  
Notary Public

My Commission expires: \_\_\_\_\_

Person to contact when license is approved:

_____	_____	_____
<b>Name</b>	<b>Age</b>	<b>Telephone Number</b>
_____	_____	_____
<b>Mailing Address</b>	<b>Relationship to Organization</b>	

	<b>OFFICE USE ONLY</b>	
Date approved: _____	Method of Contact: _____	_____
		{i.e.: Board meeting, telephone, etc.}
Approved by: _____		
_____		
_____		