



Allegany County Liquor Board

Change of Name Form

Please Print

I/We _____

On the License of _____

Trade Name _____

Address _____

Corporation _____

Wish to have my/our name stricken from the license as of: _____

Date _____

Signature of Removed Licensee: _____

State of Maryland, County of Allegany to witness:

I, Hereby Certify That on This _____ Day of _____ before a subscriber, A Notary Public, appeared:

_____, _____, _____
And made oath in due form of the law that the information is true and correct to the best of his/her knowledge and belief.

Witness my hand and seal. _____

Notary Public: _____ Commission expires: _____

I/We wish to add/replace: _____ Date: _____

Signature of new licensee

Home Address

City

Telephone Number

State of Maryland, County of Allegany to witness:

I Hereby Certify That on This _____ Day of _____ before a subscriber, a Notary Public Appeared:

Witness my hand and seal. _____

Notary Public: _____ Commission expires: _____