



**DIVISION OF PLANNING AND PERMITTING  
FREDERICK COUNTY, MARYLAND**

*Department of Permits and Inspections*

30 North Market Street • Frederick, Maryland 21701

Phone (301) 600-2313 • Fax (301) 600-2309

**CHANGE OR ADD RESPONSIBLE PERSON TO GAMING PERMITS**

**A \$37.00 FEE WILL BE CHARGED TO CHANGE OR ADD A  
RESPONSIBLE PERSON**

The name of the Organization is \_\_\_\_\_ Permit # \_\_\_\_\_

We (the organization or operator) request the person named below be added to our gaming permit. This person will be replacing \_\_\_\_\_.

\*\*\*\*\*

Name \_\_\_\_\_ Title \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_

Email Address \_\_\_\_\_

ATTACH A COPY OF YOUR DRIVERS LICENSE TO THIS APPLICATION.

ATTACH A COPY OF CURRENT LIQUOR LICENSE (IF PERMIT IS FOR OFF PREMISE TIP JAR).

I understand that by adding my name to this application, I will be taking responsibility for complying with the provisions of the Gaming Ordinance. Those provisions may include, but are not limited to, the submittal of monthly tip jar reports and yearly raffle reports. I, \_\_\_\_\_, solemnly affirm under the penalties of perjury, that I have never been convicted of a felony, nor have I been convicted within the past five (5) years of a misdemeanor related in any way to gaming or gambling. I understand that this information will be verified by a representative of the Frederick County Sheriff's Office.

**SEAL**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Date

STATE OF MARYLAND, COUNTY OF FREDERICK, TO WIT:

I HEREBY CERTIFY that on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, before me, the Subscriber, a Notary Public in and for the State and County aforesaid, \_\_\_\_\_ personally appeared (known to me or satisfactorily proven) to be the person(s) who/whose name(s) is/are subscribed to the within instrument, and acknowledged the foregoing application to be his/her act for the purposes therein contained.

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

Expires \_\_\_\_\_