		orm that has been comple of the estate of the decear	ted by the personal representates sed license holder	tive or special
	Copy of Death	n Certificate		
	BOARD	OF LICENSE COMMISSIO	NERS FOR ANNE ARUNDEL C	OUNTY
	<u>APPLICA</u>		DER ARTICLE I, TITLES 1-12, § ICENSE HOLDER.	11-2302
Licens	e No	t/a		_
		(Address of)	Licensed Premise)	
		(Mudiciss of I	Electised Fremise)	
		(Corpo	orate Name)	
		(Nama of Dooogad	Licensee - Date of Death)	
		(Name of Deceased	Licensee - Date of Death)	
		(Last Address o	of deceased licensee)	
I,			residing at	
Hereby	y request to contin	ue the above alcoholic bever	rage license, which was held by the	e deceased as a
Sole P	roprietor ( )	Partner ()	Corporate Officer ( )	Member ( )
I hereb	y attest that I am:			
Surviv	ing Spouse ( )	Surviving Next of Kin (	)	
Surviv	ing Partner ()	Surviving Corporate Off	(Relationship)	
license	and that I will ab		12 of the Annotated Code of Mary Annotated Code of Maryland and t for Anne Arundel County.	
STATI	E OF MARYLAN	D :		
COUN	ITY OF ANNE A	RUNDEL :		
state of		Arundel County personally	O, before the subscriber, a Notary appearedhas personal Knowledge of the abo	

the same are true and correct.

WITNESS MY HAND AND OFFICIAL SEAL.

(Notary Public)
My Commission Expires\_\_\_\_\_