



# Roller Skating Rink License Application

License Expires One Year From the Date of Issuance

Baltimore County, Maryland  
Department of Permits, Approvals and Inspections  
County Office Building, Room 101  
Towson, MD 21204  
410-887-3616

Annual Fee: \$100.00

Application Date \_\_\_\_\_

Check or money order made payable to "Baltimore County, MD"

License Year \_\_\_\_\_

Business Trade Name \_\_\_\_\_ Telephone No. \_\_\_\_\_

Business Address \_\_\_\_\_ Zip Code \_\_\_\_\_

Mailing Address Name \_\_\_\_\_  
(If different from business trade name)

Mailing Address \_\_\_\_\_ Zip Code \_\_\_\_\_  
(If different from business address)

Business Owner's Name \_\_\_\_\_ Telephone No. \_\_\_\_\_

Business Owner's Address \_\_\_\_\_ Zip Code \_\_\_\_\_

### Day(s) and Times of Operation:

	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Opening Time							
Closing Time							

Year Round Operation: YES NO Seasonal: Date(s) of Operation: \_\_\_\_\_

Will food be served? YES NO If YES, type of food: Vending \_\_\_\_\_ Prepackaged \_\_\_\_\_ Prepared \_\_\_\_\_

I hereby certify that the above information is true and correct and that the Roller Skating Rink is operated in accordance with Article 21, Section 21-4-301 through 21-4-309, of the Baltimore County Code, 1988 Edition, as amended.

\_\_\_\_\_  
Print Owner's Name

\_\_\_\_\_  
Owner's Signature

### AGENCY APPROVALS

Based upon visual inspection, the building occupied by the skating rink appears structurally safe and in compliance with applicable building, electric and plumbing codes.

\_\_\_\_\_  
Signature of Code Inspection and Enforcement Officer Date

If disapproved, state reason(s) \_\_\_\_\_

The building and the premises on which the building is located, where the roller skating rink, described above is located, are in compliance with the standards and regulations of the Department of Environmental Protection and Sustainability (DEPS) and the State Department of Health.

\_\_\_\_\_  
DEPS Signature Date

If disapproved, state reason(s) \_\_\_\_\_

The building occupied by the roller skating rink, described above, is in compliance with the county fire protection code.

\_\_\_\_\_  
Fire Marshal Signature Date

If disapproved, state reason(s) why \_\_\_\_\_

### FOR OFFICE USE ONLY

License No. \_\_\_\_\_ Cash Receipt No. \_\_\_\_\_ Fee Paid \_\_\_\_\_ Cash Receipt Date \_\_\_\_\_

Date Received \_\_\_\_\_ Date Issued \_\_\_\_\_ Date Entered \_\_\_\_\_ By \_\_\_\_\_