



GRAND OPENING AND ANNIVERSARY EVENT REQUEST FORM

- Grand Opening
- Anniversary - 5 year 10 year 15 year Other 5-year increment: _____

Is your business located within the corporate limits of the City? (see map on our website)

- Yes (continue to fill out application)
- No (contact Washington County Dept. of Business Development; www.hagerstowndec.org)

Has your place of business been inspected by the Fire Marshal?

- Yes (continue to fill out application)
- No (please call the Fire Marshal's office at 301-790-2476 to schedule an inspection)

Have you contacted the City's Planning and Code Administration Department to ensure that your place of business has obtained all required permits and final inspections?

- Yes (continue to fill out application)
- No (please call PCAD at 301-739-8577, x. 12)

Are you a member of the Washington County Chamber of Commerce?

- Yes (members receive additional coordination with the Chamber)
- No (if you are interested in becoming a member, call 301-739-2015)

Legal Business Name (name filed with the State of Maryland): _____

DBA Name (if different from above): _____

Maryland Business Registration #: _____
(L, W, Z, or D, followed by 8 digit number)(More Info: www.dat.maryland.gov)

Name(s) of Business Owner(s): _____

Email(s) of Owner(s): _____

Business Address: _____

Business Phone #: _____

Business Website: _____

Business Facebook Page: _____

Contact Person (if different from above): _____

Job Title: _____

Contact Phone #: _____

Contact Email: _____

Description of business, the owners, and the history:

What do you want people to know about your business?

When and why did you open your business in Hagerstown?

If your business is relocating from another site, please tell us how your move expands your business (additional jobs, increased square footage, more people served, etc.):

Please return this application to:

Kitty Clark, Community Events Coordinator
kclark@hagerstownmd.org

14 N. Potomac St., Suite 200A, Hagerstown, MD 21742