Print Form

HOWARD COUNTY DEPARTMENT OF FINANCE
3430 Court House Drive ■ Ellicott City, Maryland 21043 ■ 410-313-4076 ■ TDD 410-313-2323

Division of Property Tax Accounting Email: taxcredit@howardcountymd.gov

2020 PUBLIC SAFETY OFFICER PROPERTY TAX CREDIT APPLICATION
Deadline: September 1, 2020

Please submit the following with the original copy of the application:

- ☐ Copy of your valid Maryland Driver's license or MVA-issued photo I.D.
- ☐ First page of deed for dwelling showing ownership interest of applicant – Property must be the applicant's principal residence
- ☐ The **previous 6 Months** (from the date of application) of your choice of electric, natural gas, cable, or landline phone bills – ***Choose one type of bill and submit each monthly bill from the previous 6 months. Each monthly bill must have the owner's name and the property address. A bill history or bill summary WILL NOT be accepted.***

Please complete the following information (Please Print Legibly):

Property Parcel Number (located on the Howard County Property Tax Bill): _____

Public Safety Officer's Full Name: _____ Phone: _____

Property Address: _____ City: _____ Zip: _____

Please check the applicable Public Safety Officer designation and answer the questions at the bottom:

- ☐ I am currently employed as a full-time **Correctional Officer** with Howard County and I have completed the probationary period with Howard County.
- ☐ I am currently employed as a full-time **Firefighter/EMT** with Howard County and have completed the probationary period with Howard County.
- ☐ I am currently a full-time **911 Telecom Operator** with Howard County and have completed the probationary period with Howard County.
- ☐ I am currently a full-time **Police Officer** with Howard County and I have completed the probationary period with Howard County.
- ☐ I am currently a full-time deputy **Sheriff** with Howard County and I have completed the probationary period with Howard County.
- ☐ I am a Howard County **Volunteer Firefighter**, have maintained active service for the preceding year, and I have served as a volunteer firefighter for at least 5 continuous years.
- ☐ I am a Howard County **Volunteer EMT**, have maintained active service for the preceding year, and I have served as a volunteer firefighter for at least 5 continuous years.

1. I own the property to which the credit will be applied, it is used as my principal residence and I will occupy the property for more than 6 months of a 12-month period: ☐ **Yes** ☐ **No**

2. Did you receive a tax credit for the property pursuant to County Code §20.129 (Senior Tax Credit) or §20.129E (Aging in Place Tax Credit) for this property. ☐ **Yes** ☐ **No**

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I hereby certify that I have read County Code § 20.129F and that I am eligible for the tax credit for the residential property described above. I understand that this is a tax credit that can be received against the County property tax. The tax credit may be granted in an amount up to **$2,500**, but not to exceed the amount of county tax due on the property.

I understand that this tax credit is available for a period of one taxable year and must be renewed. I understand I must re-apply each year for the tax credit to be applicable.

I understand that the tax credit shall terminate for no longer being employed as a public safety officer with Howard County or no longer meeting the eligibility requirement for a volunteer member, or no longer residing in or owning the dwelling for which the tax credit was granted.

IF I AM SEPARATED FROM EMPLOYMENT "FOR CAUSE" AS SET FORTH IN COUNTY CODE § 1.115, I AM LIABLE FOR THE PROPERTY TAXES I WOULD HAVE BEEN LIABLE FOR IN THE TAXABLE YEAR OF THE SEPARATION OF EMPLOYMENT, AS IF THE TAX CREDIT HAD NOT BEEN GRANTED; INCLUDING INTEREST AND PENALTIES ON THOSE TAXES.

IF I AM SEPARATED FROM EMPLOYMENT FOR REASONS OTHER THAN "FOR CAUSE" AS SET FORTH IN COUNTY CODE § 1.115, THE TAX CREDIT SHALL BE APPLIED ONLY TO THE PORTION OF THE TAXABLE YEAR FOR WHICH I WAS ELIGIBLE FOR THE TAX CREDIT AND I AM LIABLE FOR ALL REMAINING PROPERTY TAXES WHICH MAY INCUR INTEREST AND PENALTIES ON THOSE TAXES.

I declare under penalties of perjury provided for by the Tax-Property Article of the Annotated Code of Maryland, § 1-201, that all information above is true, correct, and complete to the best of my knowledge and belief. I give Howard County Government and the State Department of Assessments and Taxation permission to take whatever action is necessary to verify my eligibility for the tax credit.

_____ _____

Public Safety Officer Applicant's Signature **Date**

This application and all supporting documents must be received on or before September 1, 2020

Address for Application Submission:	**Contact Information:**
Howard County Department of Finance	Phone: (410) 313-4076
Public Safety Officer Tax Credit	Hours: Monday – Friday 8 a.m. – 5 p.m.
3430 Court House Drive	Email: taxcredit@howardcountymd.gov
Ellicott City, MD 21043	Website: www.taxcredits.howardcountymd.gov