



HOWARD COUNTY DEPARTMENT OF FINANCE

3430 Court House Drive Ellicott City, Maryland 21043

410-313-4076

Rafiu O. Ighile, CPA, CGMA, MBA
Director of Finance
righile@howardcountymd.gov

FAX 410-313-4064
TDD 410-313-2323

Application for Property Tax Credit Installation of an Automatic Fire Sprinkler System in a Historic Building

In accordance with § 9-232 of the Tax-Property Article, Annotated Code of Maryland and §20.118 of the Howard County Code, there is a tax credit against the Howard County property tax imposed on an eligible improvement if an automatic fire protection sprinkler system is installed in the improvement. The credit under this section is equal to 10 percent of the installation cost of each sprinkler system. The tax credit under this section shall apply each year for five consecutive years.

An application shall be filed on or before April 1, prior to the taxable year for which the credit is requested. Any information required to demonstrate that the owner is entitled to the credit, must be submitted with the application.

To process your application, please complete the following information:

PROPERTY OWNER:

Name(s): _____ Date of Application: _____

Parcel Number: _____ Tax Year/Period: _____

Property Address: _____

Telephone: _____

Mailing Address: (If different from property address) _____

ELIGIBLE COSTS:

Work is completed under fire protection permit # F _____ Date Completed: _____

Total Eligible Cost: \$ _____

Eligible costs include all direct materials and labor costs for the installation of the automatic fire sprinkler system, including the connection to the public water main. Eligible costs do not include materials and labor related to demolition or patch work in the building needed for or because of a system installation.

Application must include a copy of the final inspection report and documentation of the costs incurred in the installation.

Signature of Owner

Date

CERTIFIED BY:

Chief Fire Protection Engineer,
Dept. of Inspections, Licenses, and Permits

Date

(Do Not Write Below This Line)

Eligible Cost _____

Total Amount of Credit _____

Approved: _____

To begin Tax Year 20____

Disapproved: _____

Reason: _____

Credit Allocation:

Tax Year 20____: _____

Tax Year 20____: _____

Tax Year 20____: _____

Tax Year 20____: _____