



HOWARD COUNTY DEPARTMENT OF FINANCE

3430 Court House Drive Ellicott City, Maryland 21043

410-313-4076

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AGING IN PLACE TAX CREDIT APPLICATION: **FIRST-TIME APPLICANTS ONLY** APPLICATION DEADLINE TO SUBMIT: June 30, 2025

In accordance with the provisions of Section 20-129E of the Howard County Code and §9-258 of the Tax- Property Article of the Annotated Code of Maryland, the owner of a dwelling may receive a property tax credit against the County property tax if the property is owned by an individual who meets the below qualifications:

Important Information:

- Dwelling **Must** be the applicant's only residence
- A property owner may not receive an Aging in Place Tax Credit, Public Safety Officer Tax Credit and a Senior Tax Credit in the same tax year.
- The credit shall automatically renew for seven consecutive years unless the owner is no longer eligible.
- The applicant must have owned and resided in property for **30 years** as of June 30, 2025
- Applicants must be 65 by June 30th of the tax year

The property tax credit is equal to 20% of the eligible County tax. The eligible County tax is the amount of County tax on the lesser of \$650,000 or the assessed value of the dwelling reduced by the amount of any assessment on which a property tax credit is granted.

If applying based on 65 years of age and lived in the same dwelling for 30 years or more, submit with the application:

- Original copy of the completed application
- Copy of your valid Maryland Driver's license or MVA-issued photo I.D. for owner and co-owner
- Copy of the **name and address page** of the last 6 months utility bills from PEPCO, BGE, cable or cell phone providers. **Must be non-Howard County issued bills. Bill summaries are not permissible.**
- Pages of the original deed for the dwelling showing ownership interest and the date of purchase on or before June 30, 1995. Not providing a copy of the deed confirming 30 years or more may delay processing.**

If applying as 65 years of age and Retired Military with 20 years of ACTIVE service, submit with the application:

- Original copy of the completed application
- Copy of your valid Maryland Driver's license or MVA-issued photo I.D. for owner and co-owner
- DD214 showing 20 years of active-duty service
- Copy of the **name and address page** of the last 6 months utility bills from PEPCO, BGE, cable or cell phone providers. **Must be non-Howard County issued bills. Bill summaries are not permissible.**
- Pages of the original deed for the dwelling showing ownership interest and the date of purchase**

If applying as 65-year-old deceased spouse of Retired Military with 20 years of active service, submit with the application:

- Copy of Death Certificate for deceased spouse
- Original copy of the completed application
- Copy of your valid Maryland Driver's license or MVA-issued photo I.D. for owner and co-owner
- DD214 showing 20 years of active-duty service
- Copy of the **name and address page** of the last 6 months utility bills from PEPCO, BGE, cable or cell phone providers. **Must be non-Howard County issued bills. Bill summaries are not permissible.**
- Pages of the original deed for the dwelling showing ownership interest and the date of purchase**



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Aging in Place tax credit can now be filed online

https://www.howardcountymd.gov/finance/tax-credits

Please print:

Parcel Number (located on the Howard County tax bill): Original Deed Date

Owner/Applicant's Name Co-Owner

Owner/Applicant Date of Birth Co-Owner Date of Birth

Property Address: City: Zip:

Email Address: Phone Number:

We encourage you to apply by May 1, 2025. However, you should not expect to receive the Aging in Place tax credit on July 1, 2025, bill. You are advised to pay the tax bill as shown if you wish to receive the discount for early payment offered by Howard County. If you pay your bill in full, then you will receive a refund once the credit has been applied.

Mailing Address:

Howard County Department of Finance
Aging in Place Tax Credit
3430 Court House Drive
Ellicott City, MD 21043

Pictures taken with a phone will not be accepted

I hereby certify that the information provided in this application, to the best of my knowledge and belief, is true, correct and complete. I understand that misinformation or refusal to disclose information which is essential for a determination of eligibility is a basis for disapproval of my application. I certify, I have a legal interest in this property, and that this dwelling will be my only owned property for the prescribed period. I understand that the Howard County Department of Finance may request, at a later date, additional information to verify the statements reported on this form. Also, I hereby authorize the Howard County Department of Finance verify/obtain any information and documentation which will assist in determining my eligibility for assistance.

Signature of Applicant

Date

Signature of Co-Owner/Applicant

Date

(For Office Use Only-Do Not Write Below This Line)

Table with 7 columns: License, DD-214, Deed, Utility Bills, Form, Other, Finance Reviewer