**HOWARD COUNTY INFORMATION SHEET FORM D**

**SOLE PROPRIETORSHIP (or Individual Homeowner(s))**

SOLE PROPRIETOR’S NAME:

ADDRESS:

TELEPHONE: (WORK) (CELL)

FAX: E-MAIL:

I do solemnly declare and affirm under the penalties of perjury that the information contained within is true and correct to the best of my knowledge.

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(Signature) (Date) (Signature) (Date)

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(Type or Print Name) (Type or Print Name)

\* \* \* \* \* \* \* \* \* \* \* \* \* \* \*

IF APPLICABLE

BUSINESS OR TRADE NAME:

MD STATE ASSESSMENT REGISTRATION NO. (Business License):

**I solemnly declare and affirm under the penalties of perjury that the information contained within and attached hereto is true, correct and complete.**

\_\_\_ \_\_\_

(Signature) (Date)

\_\_\_ \_\_\_ (Type or Print Name)