



MONTGOMERY COUNTY DEPARTMENT OF FINANCE
 DIVISION OF TREASURY
 255 ROCKVILLE PIKE, SUITE L-15
 ROCKVILLE, MARYLAND 20850

APPLICATION FOR the **SECOND through FIFTH years** for the
 ELDERLY INDIVIDUAL AND MILITARY RETIREE PROPERTY TAX CREDITS (Bill 42-16)

TAX YEAR BEGINNING JULY 1, _____

Note: Please refer to the information sheet that accompanies this application--you may also find this information on our website: <http://www.montgomerycountymd.gov/Finance/bill-42-16.html>.

Note: This application may not be used for applications for the first year of the tax credit. Please use the NEW APPLICATION FOR ELDERLY INDIVIDUAL AND MILITARY RETIREE PROPERTY TAX CREDITS (Bill 42-16) to get the credit for the first time.

1. Last Name, First Name, Middle Initial		2. Your Birth Date	
3. Property Address (Number and Street)		4. City, Town or Post Office	5. Zip Code
6. Account Number (located on tax bill)	7. Daytime Telephone Number	8. Email Address	
9. Mailing Address if different from above (Attach explanation)		10. City, Town or Post Office	11. Zip Code

I, _____, the undersigned, hereby declare and affirm, under the penalty of perjury that I continue to occupy the property listed in #3, above.

(sign here)

For Montgomery County Treasury Use Only

First Year of Tax Credit: _____

Current Year County Tax: _____

Current Year of Tax Credit: _____

Tax Credit (20% County Tax): _____