

MONTGOMERY COUNTY GOVERNMENT OFFICE OF CONSUMER PROTECTION

100 Maryland Avenue, Room 3600 Rockville, Maryland 20850 240-777-3636 • FAX 240-777-3768 • http://montgomerycountymd.gov/ocp



NEW HOME SELLER REGISTRATION APPLICATION Only use this application to register the entity which is transferring title to a new home.

☐ New Registration	New and renewal registrations expire two (2) years from date of issuance.
□ Renewal Registration Registration #: Expiration Date: Maryland Home Builder Registration #: (Required to waive \$250 Guaranty Fund Fee)	 A non-refundable, non-waivable registration fee in the amount of \$400 is required for every NEW registration. A non-refundable, non-waivable registration fee in the amount of \$250 is required for every RENEWAL registration. A non-refundable, non-waivable State Guaranty Fund fee in the amount of \$250 is required for every registration, unless the applicant is currently registered with the Maryland Home Builder Registration Unit.
Registration Fees MUST be paid by check	or money order payable to "Montgomery County, MD"
Guaranty Fund Fees MUST be paid by check of	or money order payable to "Office of the Attorney General"
BOTH PAYMENTS MUST ACCO	OMPANY THE REGISTRATION APPLICATION
Identify the entity that has legal title to the New Home Seller Entity: □Corporation □Li New Home Seller Name: The New Home Seller Name	PME SELLER IDENTIFICATION real property on which new homes will be built and sold. imited Liability Company □ Partnership □ Sole Proprietor me(s) MUST Match the Name(s) Listed on the Deed and County Land Records
Mailing Address:	
Contact Name:	
Contact Phone #:	Contact Email:
Is this New Home Seller related to a register	red New Home Builder by common ownership or control?
YES □ Same home building & selling busin	ness NO ☐ Different home building & selling business
Complete Sections B and E, Skip Sections C and	
Identify the related New Home Builder below	w: You must complete all Sections and are registering as a home selling business that contracts with unrelated, registered New Home Builders.
New Home Builder:	
Registration #:	

SECTION B – PROPERTY OWNED BY NEW HOME SELLER

Identify all property owned by this New Home Seller and the New Home Builder that will build the new homes.

itreet Number:	Street Name: _	
City:	State: MD	Zip Code:
New Home Builder:		Registration #:
f more space is required attach o	a list of all properties owned by	this New Home Seller.
		ERSHIP INFORMATION ported to OCP within 30 days of change.
<u> </u>	ITED LIABILITY COMPAN	-
-		d as a CORPORATION or LIMITED LIABILITY
NAME OF CORPORATIO	N/OR LLC:	
State of Incorporation / Org Federal Employer Identificat	anization: Date ion Number (FEIN):	of Incorporation / Organization:
	Contact Email Ac	ldress:
If the LLC has an Operating Ag		LIABILITY COMPANIES Member, provide a copy of the section of the agreemen no Operating Agreement list all members of the LLC.
	iR:	
		Ownership %
PRESIDENT / MEMBER N	IAME:	
		Ownership %
VICE PRESIDENT / MEM	BER NAME:	
		Ownership %
TREASURER / MEMBER	NAME:	
Home Address:		
Contact Phone #:	Email:	Ownership %

	NAME:	
Contact Phone #:	Email:	Ownership %
•	rs, members, entities holding more	than a 10% interest in the business.
		Ownership %
NAME:		
Home Address:		
Contact Phone #:	Email:	Ownership %
•	_	as a PARTNERSHIP . Provide the names of all partnership is a limited partnership, identify the
FULL NAME OF PARTNI	ER:	
Contact Phone #:	Email:	Ownership %
FULL NAME OF PARTNI	ER:	
Home Address:		
Contact Phone #:	Email:	Ownership %
FULL NAME OF PARTNI	ER:	
Home Address:		
		Ownership %
FULL NAME OF PARTNI	ER:	
Contact Phone #:	Email:	Ownership %
GENERAL PARTNER (if a	applicable):	
Contact Phone #:	Email:	Ownership %
SOLE PROPRIETOR		
Complete this section if you	r home selling business is a SOLE i	PROPRIETOR.
FULL NAME:		
Contact Phone #:	Fmail:	

II.

III.

SECTION D – LEGAL ACTION OR INTEREST IN OTHER HOME BUILDING OR SELLING ENTITIES

Your application will not be complete if any information in this section is omitted or incorrect.

1)		or any individuals or companies named in Section C, had any interest in any other new home selling companies in Montgomery County or any other jurisdiction in the past ten
	Yes □ No □	(If yes, please list their names and the companies involved in Supplement D)
2)		or any individuals or companies named in Section B, had any building or construction spended, revoked, surrendered, or not renewed for cause in Montgomery County or any
	Yes ☐ No ☐	(If yes, please explain in Supplement D)
3)	Protection compla	s or any individuals or companies named in Section B, have any unresolved Consumer aints pending in Montgomery County or any jurisdiction? (If yes, please explain in Supplement D)
4)	outstanding unsat	s or any individuals or companies named in Section B, have any pending law suits or tisfied judgments? (If yes, please explain in Supplement D)
5)	Does this business Yes □ No □	s have any outstanding building code violations? (If yes, please explain in Supplement D)
6)	Has any officer, di ever filed for bank	rector or owner holding a financial interest of 10% or more in this home selling business cruptcy?
	Yes □ No □	(If yes, please provide an explanation and resolution and list their names and the companies involved in Supplement D)
7)	•	artner, building designee, or owner been convicted of a felony in the last ten years? (If yes, please explain in Supplement D)

SECTION E - REGISTRANT SIGNATURE

Your application will not be complete if not signed.

I HEREBY CERTIFY that I have read and fully comprehend this form in its entirety and that the information herein provided is true and complete to the best of my knowledge. I understand that should any statement I have made prove false, misleading, or erroneous, it may result in the rejection of my application or the revocation of any registration that may be issued. By signing this application, I do solemnly declare and affirm under the penalties of perjury, that the contents of this application are true and correct. I understand that if there are any changes in information provided, I must notify the Department within 30 days of the change. Failure to do so may result in the suspension or revocation of my registration. I hereby certify that I am authorized to sign on behalf of the business organization applying for this license.

Signature	Date
Print or Typed Name of Above Signature	Title

Submit completed application to:

Montgomery County Office of Consumer Protection
Licensing & Registration Unit
100 Maryland Avenue, Suite 3600
Rockville, MD 20850

Check or money order MUST be made payable to Montgomery County, MD. All fees are NON-REFUNDABLE and NON-TRANSFERABLE.

SUPPLEMENT D

Use to provide written explanations to the questions in Section D.

1)	Has this business or any individuals or companies named in Section C, had any interest in any other new home building companies in Montgomery County or any other jurisdiction in the past ten years? Yes □ No □
2)	Has this business or any individuals or companies named in Section B, had any building or construction
∠)	related license suspended, revoked, surrendered, or not renewed for cause in Montgomery County or any other jurisdiction? Yes No
3)	Does this business or any individuals or companies named in Section B, have any unresolved Consumer Protection complaints pending in Montgomery County or any jurisdiction? Yes \square No \square

4)	Does this business or any individuals or companies named in Section B, have any pending law suits or outstanding unsatisfied judgments? Yes □ No □
5)	Does this business have any outstanding building code violations? Yes □ No □
6)	Has any officer, director or owner holding a financial interest of 10% or more in this homebuilding business ever filed for bankruptcy? Yes □ No □ □
7)	Has any officer, partner, building designee, or owner been convicted of a felony in the last ten years? Yes \square No \square