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DEPARTMENT OF FINANCE 3430 Courthouse Drive Ellicott City, Maryland 21043

410-313-2389

FEE: \$50.00

## APPLICATION FOR STATEMENT OF COUNTY OBLIGATIONS EXPIRES 45 DAYS AFTER VALIDATION

## **INSTRUCTIONS- INCOMPLETE FORMS WILL BE RETURNED**

- 1. **Print or type** the information requested in the property identification section of the form as recorded on the books of the State Department of Assessment and Taxation.
- 2. Each application must be accompanied by a fee of \$50.00, payable to "Howard County Director of Finance".
- 3. Allow **2-business days** for statement processing plus 3-4 days if mailed.
- 4. Water & Sewer charges must be paid prior to recording a deed. Contact 410-313-2058 for information, if applicable.

**NOTE**: Finance does not perform title searches on the property, makes no representation regarding property ownership and is not responsible for errors due to improper or incomplete property descriptions. All taxes and charges billed must be paid prior to recording a deed for the property, even if incurred subsequent to the issuance of the Statement of County Obligations. **PROPERTY IDENTIFICATION** 

| District | Pare            | Parent Account (if applicable) |          |         |       | Subdivision and/or Acreage |                | Plat    | Lot   |  |
|----------|-----------------|--------------------------------|----------|---------|-------|----------------------------|----------------|---------|-------|--|
|          |                 |                                |          |         |       |                            |                |         |       |  |
| District |                 | ount #/Pai                     | rcel #   |         |       | Pı                         | operty Address | Liber   | Folio |  |
| Current  | Owner           |                                |          |         |       |                            | ]              | ·       | ·     |  |
| Maryla   | nd Business (SD | AT) Ident                      | fication | Number  | :<br> |                            | ]              |         |       |  |
| MAIL TO  |                 |                                |          |         |       |                            | PIC            | PICK UP |       |  |
| Compar   | y:              |                                |          |         |       |                            | Name:          |         |       |  |
| Address  | :               |                                |          |         |       |                            | Company:       |         |       |  |
| City     | Sta             | ite                            | Z        | ip Code |       |                            | Date:          |         |       |  |