

**REQUEST FOR TAX CERTIFICATION
 VOID 45 DAYS FROM ISSUED DATE**

INSTRUCTIONS

1. Print or type the information requested in all sections of this form. This form must be signed and dated or it will not be honored.
2. Write in the spaces provided the **EXACT DISTRICT, PROPERTY NUMBER AND DESCRIPTION** as recorded on the books of the Department of Assessments.
3. Each application must be accompanied by a fee of \$40.00 for all districts. (**EFFECTIVE JULY 1, 2007**)
4. Please make checks payable to The Commissioners of Carroll County.
5. The office will not be responsible for errors due to improper or incomplete descriptions or property numbers.
6. Please allow a minimum of one (1) business day for Tax Certifications.
7. Completed Tax Certification must accompany deed.
8. Bills issued subsequent to the date of certification but prior to settlement / transfer may not be included, but are the responsibility of the owner(s).
9. Please check with the TRANSFER OFFICE for the AGRICULTURAL TRANSFER TAX at 410-857-0600.
10. Request for current water and/or sewer charges must be made in writing three (3) days in advance. Water and Sewer must be filled out on all properties in Districts 2-0, 5-0, 5-1, 7-0, 8-0, 8-1, and 14-0. ***NEW* YOU MAY NOW ORDER FINAL READINGS ON LINE AT WWW.CARR.ORG GO TO GOVERNMENT, THEN E-SERVICES TO UTILITY READING REQUEST.**

*** Required Fields** **Date of Death if applicable** _____

| * District – Account Number | * Property Description (acreage) | Lot | Map | Block | Parcel |
|-----------------------------|----------------------------------|-----|-----|-------|--------|
| | | | | | |

| New Account (Subdiv. Only) | Property Address | Liber | Folio |
|----------------------------|------------------|-------|-------|
| | | | |

*Name of Current Owner

Check one:

Mail to

Address

Contact Person and Phone #
 (Please print)

Email address:
 (Email copy sufficient for recording)

Hold for

*Signature Date