



QUEEN ANNE'S COUNTY
DEPARTMENT OF BUDGET AND FINANCE
Treasury Division
107 N. Liberty Street
Centreville, Maryland 21617
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www.qac.org

**APPLICATION FOR PROPERTY TAX CREDIT
FOR DWELLING OWNED BY DISABLED EMERGENCY WORKER
(LAW ENFORCEMENT OFFICER OR RESCUE WORKER)**

The Queen Anne's County Code, Section 5-10.2, permits a property tax credit to be granted, upon application, on the dwelling owned by a disabled law enforcement officer or emergency rescue worker who is **permanently and totally disabled** as a result of or in the course of employment as a law enforcement officer or while in the active service of a fire, rescue or emergency medical service ("Disabled Emergency Worker"). The amount of the credit is equal to 100% of the County Property Tax and continues without further application, providing evidence of continued eligibility is filed with the Queen Anne's County Department of Budget and Finance annually. The disabled emergency worker is eligible for this tax credit beginning in the first taxable year after the date of the Disabled Emergency Worker's retirement and may apply for this tax credit on or before June 15 of the taxable year for which the credit is requested to begin. NOTE: Credits will be pro-rated to date of disqualification

Date of Application: _____ Property Account Number: _____

Owner's Name (Disabled Emergency Worker must be on the deed): _____

Property Address: _____

Emergency Worker's Name: _____

Phone Number: _____

I am requesting the above tax credit on the basis of the following eligibility: **(Check One)**

____ Above dwelling was owned by the Disabled Emergency Worker at the time of Emergency Worker's disability.

____ The Disabled Emergency Worker was domiciled in the State as of the date the Disabled Emergency Worker was adjudged to be permanently and totally disabled, and the dwelling was acquired by the Disabled Emergency Worker within ten years of the date the Disabled Emergency Worker was adjudged to be permanently and totally disabled

____ Credit previously granted on another property to be transferred to this property to the extent of the previous credit. If so, please complete the following:

Original Property Account Number: _____

Original Property Address: _____

I understand that I will be required to provide the Queen Anne's County Department of Budget and Finance – Treasury Division an annual statement of continued eligibility for this tax credit.

Signature of Applicant/Owner

Please attach: Disabled Emergency Worker's Retirement Statement, Notice of Retirement Allowance or letter from the State Retirement Agency which certifies the permanently and totally disabled in the line of duty, Certification of Service that has been completed by the Chief of the Law Enforcement, Fire, Rescue or Emergency Medical Service for the jurisdiction that employed the Disabled Emergency Worker or HR Representative and the Annual Property Tax Credit Eligibility Certification.

(Do Not Write Below This Line)

Tax Year _____ Assessment _____

County Tax _____ Amount of Credit _____

Recommend by Finance Office: _____ Not Recommended by Finance Office: _____

County Commissioner Approval Meeting Date Approved: _____

Meeting Date Disapproved: _____

Reason: Disapproved: _____