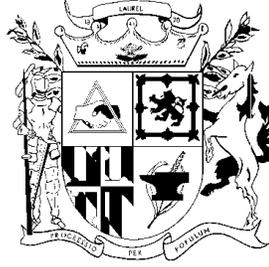


Robert Kluckhuhn, *Chairman*  
Margie McCeney, *Vice-Chairman*  
Michael R. Leszcz, *Councilmember*  
Karen Lubieniecki  
Marlene Frazier  
Vicki Rambow  
Patrick Davis

William F. Goddard, *Executive Officer*



## City of Laurel

### Historic District Commission

8103 Sandy Spring Road • Laurel, MD 20707 • (301) 725-5300 • Fax (301) 490-5068

**TO: Historic District Commission**  
**Laurel Municipal Center**  
**8103 Sandy Spring Road**  
**Laurel, MD 20707**

THE UNDERSIGNED hereby applies for a credit on the City of Laurel Real Property Taxes in the amount of ten percent (10%) of the expenses for the restoration and preservation of the structure located at \_\_\_\_\_ in the City of Laurel Historic District.

**Applicant Name:**

**Address:**

**Phone Number:**

**Owner(s) of Record per City of Laurel Tax Records:**

**HDC Certificate of Approval No.:**

**Brief Description of Intended Restoration  
and/or Preservation Improvements:**

**Cost of Improvements** (should match the "Total" on page 3)

I UNDERSTAND that the approval of this Application by the Historic District Commission is a preliminary determination that the structure described in this Application is eligible for the tax credit, that that the tax, but that this Tax Credit Application may not be finally approved until receipts for actual expenditures in connection with the restoration or preservation of this structure shall have been submitted to the Commission and attested to on the forms provided by this Commission. Work must be in conformity with the Certificate of Approval as provided by the Historic District Commission.

I FURTHER UNDERSTAND that this Tax Credit, if approved, applies to Laurel City Real Estate Taxes only, commencing with the City tax year immediately subsequent to the year in which the restoration or preservation work is completed, and that any unused portion of the tax credit may be carried forward to subsequent tax years, not to exceed five (5) subsequent years. I further understand that this credit may only be allowed on that portion of the work involving exterior features of the structure, which are subject to the authority of the Historic District Commission.

**NO TAX CREDIT SHALL BE ALLOWED FOR ANY RESTORATION OR PRESERVATION WORK WHICH HAS NOT BEEN REVIEWED AND APPROVED, IN ADVANCE, BY THE HISTORIC DISTRICT COMMISSION, EXCEPT FOR GOOD CAUSE SHOWN. WORK STARTED WITHOUT APPROVAL IS SUBJECT TO DENIAL OR 50 PERCENT REDUCTION OF CREDIT, WHICH WOULD BE 5% INSTEAD OF 10% TAX CREDIT.**

\_\_\_\_\_  
APPLICANT

\_\_\_\_\_  
DATE

*There is also a Tax Credit available through the State of Maryland, a separate application and approval process with the State of Maryland. There is no affiliation between their tax credit and the City of Laurel tax credit. Here is the link to the State's Website: [https://mht.maryland.gov/taxcredits\\_homeowner.shtml](https://mht.maryland.gov/taxcredits_homeowner.shtml)*

**FOR OFFICE USE ONLY**

**APPROVAL**

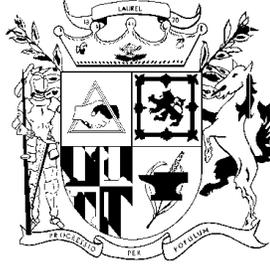
The above application was approved at the Historic District Commission meeting on \_\_\_\_\_ subject to proof of actual expenditures.

The Historic District Commission

By: \_\_\_\_\_

Robert Kluckhuhn, *Chairman*  
Margie McCeney, *Vice-Chairman*  
Michael R. Leszcz, *Councilmember*  
Karen Lubieniecki  
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## City of Laurel Historic District Commission

8103 Sandy Spring Road • Laurel, MD 20707 • (301) 725-5300 • Fax (301) 490-5068

**TO:** City of Laurel Historic District Commission

**FROM:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**TAX ID NO.:** \_\_\_\_\_

I HEREBY CERTIFY that the attachments hereto are the canceled checks for the actual expenditures made in connection with restoration and preservation of the structure referred to above which are forwarded pursuant to the Application for Tax Credit previously filed.

<b>NAME &amp; ADDRESS OF CONTRACTOR/SUPPLIER</b>	<b>MATERIALS/WORK DONE</b>	<b>AMOUNT</b>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	<b>TOTAL:</b>	_____

### NOTICE TO OWNER

**CANCELED CHECKS AND COPIES OF BILLS OR RECEIPTS IN SUPPORT OF THE ABOVE MUST BE ATTACHED TO THIS TRANSMITTAL BEFORE YOUR APPLICATION WILL BE CONSIDERED. PLEASE MAKE SURE YOUR RECEIPTS MATCH WHAT YOU HAVE LISTED ON THIS PAGE AND THAT THE TOTAL IS CORRECT.**

I HEREBY DECLARE AND AFFIRM under penalties of perjury that the facts and matters contained in this transmittal are true and correct to the best of my knowledge, information and belief.

\_\_\_\_\_  
**OWNER**

\_\_\_\_\_  
**DATE**

(Updated 7/8/20- BQ)