STATE OF MARYLAND
DEPARTMENT OF ASSESSMENTS AND TAXATION
APPLICATION FOR EXEMPTION
FRATERNAL, BENEVOLENT OR EDUCATIONAL PROPERTY

RETURN TO:

TO BE FILED with the Supervisor of Assessments at the address shown above.
Applications must be received no later than September 1 in order to have the exemption considered for the current tax levy. Applications received after September 1 will be considered for the next tax levy. Applicants must be actually using the property or be actually constructing new improvements or renovations on the subject property for exempt use prior to July 1, for the exemption to be granted for the current tax levy.

This form seeks information for the purpose of a fraternal, benevolent or educational exemption on the indicated property. Failure to provide this information will result in denial of your application. However, some of this information would be considered a "personal record" as defined in State Government Article, §10-624. Consequently, you have the statutory right to inspect your file and to file a written request to correct or amend any information you believe to be inaccurate or incomplete. Additionally, personal information provided to the State Department of Assessments and Taxation is not generally available for public review. However, this information is available to officers of the State, county or municipality in their official capacity and to taxing officials of any State or the federal government, as provided by statute. Additionally, if your property would be used by the State Department of Assessments and Taxation as a comparable for purposes of establishing the value of another property in a hearing before the Maryland Tax Court, the requested information, or a portion thereof, may have to be provided to the owner of that other property.

Full Name of Titled Owner: _____

Address of property: _____

_____

Date Acquired: _____

Location and description of property: **Account Number** _____

Baltimore City	**Ward**	**Section**	**Block**	**Lot**
Counties	**District**	**Map**	**Block**	**Parcel**

1. Describe the facilities located on the property and how they are used. (Be specific and you may attach a separate itemization if more space is required.)

_____

_____

2. What limitations or restrictions apply concerning who may use each separate facility? (A supplemental explanation sheet may be attached.)

_____

_____

_____

3. Is any part of this property rented? **Yes** ☐ **No** ☐

   If yes, to whom and at what rent? _____

4. Does the applicant organization own any adjoining real property? **Yes** ☐ **No** ☐

5. Attach to this application copies of the organization's Articles of Incorporation and most recent operating by-laws.

I declare under the penalties of perjury, pursuant to Section 1-201, Tax-Property Article, of the Annotated Code of Maryland, that this return (including any accompanying schedules and statements) has been examined by me and to the best of my knowledge and belief is a true, correct and complete return.

_____ _____
SIGNATURE OF APPLICANT ***DATE***

_____ _____
PRINT NAME HERE ***PHONE***

_____
ADDRESS

_____
CITY ***STATE*** ***ZIP CODE***

(FOR OFFICE USE ONLY)

COMMENTS: _____

_____

_____

New Application ☐ **Re-Application** ☐ **Code No.** _____

Approved ☐ **Disapproved** ☐ **Effective** _____

Land _____	**Imp** _____	**Total** _____

_____ _____
Supervisor's Signature **Date**

THIS APPLICATION IS NOT OPEN FOR PUBLIC INSPECTION **SDAT 6A**