AGRICULTURAL LIMITED LIABILTY ENTITIES VERIFICATION FOR HOMESTEAD TAX CREDIT

Account Number	District	Map	Block	Parcel
Owner's Name				
Location				
Name of Active Member(s) Re				
I (We),				the active
member(s) of			wh	ich owns the farm located
at				
and described as				
hereby attest that my (our) prin	cipal residence is located	on this pro	perty.	
I (we) declare, under t accompanying forms and state herein, to the best of my (our)		ed by me (u	is) and the ii	nformation contained
Signature			Date	
Rev. 6/1/05				

This form seeks information for the purposed of an application by an Agricultural Limited Liability Entities for Homestead Tax Credit. 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 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.