

BUSINESS PERSONAL PROPERTY TAX RETURN
MARYLAND STATE DEPARTMENT OF ASSESSMENTS AND TAXATION
TAXPAYER SERVICES DIVISION P.O. BOX 17052 BALTIMORE, MARYLAND 21297-1052

2019
Form 7
Due April 15th

Date Received
by Department

RENTAL CONDOMINIUMS, TOWNHOUSES, COTTAGES, ROOMS, ETC

OWNERS OF RENTAL CONDOMINIUMS, TOWNHOUSES, COTTAGES, ROOMS, ETC.
MUST COMPLETE THIS RETURN AND SUBMIT IT TO THE DEPARTMENT BY APRIL 15.
Information supplied in this return is confidential, not open to public inspection.

OWNER'S NAME, TRADING AS NAME, AND MAILING ADDRESS

CHECK IF THIS IS A CHANGE OF ADDRESS

Note: Please include an email address in order to receive important reminders from the Department.

DEPARTMENT ID NUMBER* (Letter Prefix L followed by 8-digits) **L** _____

*Required so that the proper account is credited. See Form 20, Application for Sole Proprietorship or General Partnership account number, found on website, <https://dat.maryland.gov> under Forms and Applications, if you do not already have a Department ID number.

The Tax Property Article of the Annotated Code of Maryland requires the Maryland Department of Assessments and Taxation to assess annually the tangible personal property owned by you located in Maryland or held by you as agent, broker, consignee, or in any other representative or fiduciary capacity.

IF YOU DO NOT RENT OR RENT UNFURNISHED - Write the following statement under remarks: My property is for my personal use only or my property is rented unfurnished.

IF THE PROPERTY WAS SOLD - Submit a copy of the settlement sheet.

IF YOU RENT YOUR PROPERTY FURNISHED – Complete the following by reporting the original cost (purchase price) of all furnishings, by year of acquisition, excluding refrigerator, range, dishwasher, laundry equipment, and wall-to-wall carpeting. (These items are considered part of the real estate). If you purchased the unit furnished, report the fair market value of the furnishings at the time of purchase.

Year of Acquisition	Original Cost
2018	
2017	
2016	
2015 & prior	

TOTAL COST

IMPORTANT: List the exact location of all personal property reported in this return, including county, town, and street address, this assures proper distribution of assessments. If property is located in two or more locations or units, please attach a listing of all locations.

STREET NUMBER & NAME, CITY/TOWN, COUNTY & ZIP CODE

MONTH & YEAR UNIT PURCHASED; BUILDING/CONDOMINIUM NAME; UNIT NUMBER

L _____

If the property was acquired from another party, please provide the following, if known:
While this information is not required, it will assist in maintaining correct assessment records.

Name of Previous Owner: _____

MD Department ID of the Previous Owner: L _____

REMARKS - Please note under remarks any explanation, or changes/disposals made since last year.

ESTIMATED ASSESSMENTS: Individuals and firms which fail to file this report will receive estimated assessments which may be twice the estimated value of the property owned.

I declare under the penalties of perjury, pursuant to the Tax Property Article 1-201 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.

X Taxpayer's Signature	Date	Phone Number and E-mail Address
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Preparer's Signature	Date	Phone Number and E-mail Address
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Name and Address of Preparer

Please mail the completed form to:
Maryland State Department of Assessments and Taxation
Business Personal Property Division
P.O. Box 17052
Baltimore, Maryland 21297-1052

Contact the Business Personal Property division with questions or comments about this form:
Phone: 410-767-1170, Toll Free within Maryland 888-246-5941
Email: sdat.persprop@maryland.gov