## Prince George's County Office of Finance Treasury Division County, Municipal Police Officer or Deputy Sheriff County Transfer Tax Exemption Affidavit

PURSUANT TO HB 1026-2006 and/or HB 654-2007, and County Code 10-187(b)(4) I/WE HEREBY CERTIFY UNDER PENALTY OF PERJURY THAT THE FOLLOWING STATEMENTS ARE TRUE:

NAME:
I am a:
$\qquad$
(Check all FIRST TIME MARYLAND HOMEBUYER
that apply)
Prince George's County Police Officer
Prince George's County Municipal Police Officer
Prince George's County Deputy Sheriff (Must be First Time Maryland Buyer to Qualify)

First Time Homebuyer's are Exempt from County Transfer Tax
Non-First Time Homebuyer's will be taxed 1\% County Transfer Tax (County and Municipal Officer Only)

I/We am/are the purchaser(s) of residentially improved real property described in the attached deed ("Subject Property). Property Tax Identification Number $\qquad$ _;

That the purchaser(s) of the Subject Property will occupy the property continuously for a period of at least three (3) years as a principal residence;

That if I/we fail to occupy the Subject Property continuously for a period of at least three (3) years and/or cease to be a Prince George's County or Municipal Police Officer or Prince George's County Deputy Sheriff, I/we will notify the Prince George's County Office of Finance ("Finance") within seven (7) working days of the departure from the Subject Property and/or termination of employment and pay the appropriate County Transfer Taxes;

That I/we understand that if I/we fail to truthfully answer or provide information to avoid collection of County Transfer Tax, I/we may be found guilty of a misdemeanor and upon conviction my be subject to a fine not exceeding $\$ 5,000.00$ or imprisonment not exceeding eighteen (18) months or both; and

I/We authorize Prince George's County to take the appropriate steps necessary to confirm and verify the information given on this affidavit and confirm and verify my/our employment as a Prince George’s County or Municipal Police Officer or Prince George's County Deputy Sheriff.


In the State of $\qquad$ , at the County/City of $\qquad$

I HEREBY CERTIFY, on this $\qquad$ day of $\qquad$ , 20 $\qquad$ , before me, the subscriber, a Notary Public, in and for said State and County/City, personally appeared, $\qquad$
known to me to be, or satisfactorily proven) to be the person(s) whose name(s) is/are subscribed to the within affidavit, and acknowledged that he/she/they executed that same for the purposes therein contained, and further acknowledge the information therein is correct, and in my presence signed and sealed the same..

My Commission Expires: $\qquad$ 1 1

## FOR COUNTY/MUNICIPAL/SHERIFF'S DEPT HUMAN RESOURCES USE ONLY Date:

Above applicant is currently employed as a County Police / Municipal Police Officer / Deputy Sheriff (Please circle one)

Employment Location:

Employment verified by: $\qquad$ Sign and
Print Name of Human Resources Information Specialist

Contact Phone Number:
Phone Number

Rev 07/08 (This form can be copied but not altered)
PGC TREAS Form \#005

