 **APPLICATION INSTRUCTIONS**

*ROUTE 1 PROPERTY TAX CREDIT*

**APPLICATION INFORMATION**

Applications will be reviewed for completeness and applicants will be notified if additional information is required to complete the application. The proposed improvements must comply with the Route 1 Manual. The project may also be eligible for design assistance through the County’s Architect on Call Program. A list of eligible work must meet the definition of eligible work (See Appendix A). Failure to provide all required information may result in rejection of the application. Applicants are encouraged to schedule a pre-application meeting to review their proposal. For questions concerning this application, please contact Dace Blaumanis at 410-313-4324 or [dblaumanis@howardcountymd.gov](mailto:dblaumanis@howardcountymd.gov)

**THE DESIGN ADVISORY PANEL (DAP)** reviews development, redevelopment and construction projects within the US Route 1 Corridor. Depending on the size and complexity, some Route 1 Tax Credit improvements will have to be reviewed by DAP as part of the Certificate of Eligibility process. Upon initial review of the project, the Department of Planning and Zoning (DPZ) will determine whether you will need to appear before the DAP to present your project. See <http://www.howardcountymd.gov/design_advisory_panel.htm> for more information on DAP.

For those projects subject to DAP, DAP meetings are held at 7:30 p.m. on the second and fourth Wednesdays of each month. Once DAP approves the design, the project will be presented to the Program Review Committee.

**SUBMIT 4 COPIES** of this application package, including all supporting materials required to Howard County Department of Planning and Zoning. Applications may be submitted in person, or by mail to Howard County Department of Planning and Zoning, 3430 Court House Dr., Ellicott City, MD 21043 and should include an electronic copy.

**PROCESS INFORMATION**

The Program Review Committee (Committee) will meet to review the application for a Tax Credit. The Committee will make a recommendation for approval of a Certificate of Eligibility (Certificate) to the County Executive who will sign the Certificate.

In order to receive a tax credit, no work can proceed until the Certificate of Eligibility is issued. Once work is complete, the applicant will be required to submit a Route 1 Final Tax Application no later than April 1 prior to the first tax year for which the credit is being requested (see Appendix B). Verified expenses must have been incurred within the 12 months prior to the application date. A representative of the county will inspect the work to verify that the completed work is the work that had been approved for the tax credit.

Upon approval of the Tax Credit, the property owner will be required to enter into an agreement with the County regarding maintenance of the improvements for which the credit is received (See Appendix C for sample agreement).

**Permit Information**

Approval for project eligibility does not eliminate the need for any building permit or sign permit that may be required. Those permits may be applied for in the Department of Inspections, Licenses and Permits located on the first floor of the Howard Building at 3430 Court House Dr., Ellicott City, MD. Any questions regarding the permit process or requirements should be directed to the Department of Inspections, Licenses and Permits at (410) 313-2455.

**HOWARD COUNTY ROUTE 1 TAX CREDIT**

*APPLICATION FOR CERTIFICATE OF ELIGIBILITY PRE-APPROVAL*

**FOR STAFF USE ONLY**

**Date Received:**

**Application #:**

**Need DAP:**

**SUBMIT 4 COPIES** of this application package, including all supporting

materials required to Howard County Department of Planning and Zoning.

Applications may be submitted in person or by mail to:

3430 Court House Dr., Ellicott City, MD 21043

Please also submit an electronic copy to Dace Blaumanis at 410-313-4324 or

[dblaumanis@howardcountymd.gov](mailto:dblaumanis@howardcountymd.gov).

**For questions, please contact Ms. Blaumanis at 410-313-4324**.

**PROPERTY INFORMATION:**

Address of Subject Property: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Tax Account Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Map \_\_\_\_\_\_\_\_\_ Parcel \_\_\_\_\_\_\_\_\_\_\_ Block \_\_\_\_\_\_\_\_\_\_\_\_ Lot \_\_\_\_\_\_\_\_\_\_\_

**PROPERTY OWNER INFORMATION:**

Owner Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact Person if different from owner: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone No. (W) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (H) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (C) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Contact Preference \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**ELIGIBILITY REQUIREMENTS:**Please check appropriate box.

In accordance with §20-129D of the Howard County Code, I request a certificate of eligible work to qualify for a property tax credit on an eligible property that is a commercial or industrial property that is less than 10 acres and includes no residential component and

Directly fronts Route 1.

Is readily visible from the nearest road edge on Route 1 and adjoins a parcel that fronts Route 1.

**ALL APPLICATIONS MUST INCLUDE:**

Labeled color photographs of existing property conditions (final application must show completed work).

A detailed description and samples of materials, colors and dimensions of proposed work. You are encouraged to submit renderings and/or elevations as well.

**DESCRIPTION OF PROPOSED PROJECT:** Attach additional pages if necessary

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**ELIGIBLE IMPROVEMENTS:** Check all that apply

Exterior renovations to a building façade

Exterior painting and cleaning of a building façade

Structural improvements to a building facade

Removal, replacement, or rehabilitation of false façades, architectural features or siding

Restoration, enhancement, or addition of primary architectural features

Installation, replacement, or enhancement of streetscape amenities (e.g. landscaping, walkways seating areas, bike racks, lighting, etc.)

Repair or replacement of doors, windows, and trim work

Structure-mounted signage, canopies and awnings

On-site free-standing signage

Cornices, parapets, and other visible roof repairs

Screening of Utility, trash and storage enclosures

Enhanced exterior building lighting that creates a noticeably enhanced appearance

Fencing that does not obscure the building

Sidewalks

New construction that enhances the building or property and is visible

Interior work necessary to maintain the structural integrity of the building

Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**SIGNATURE/CERTIFICATION:**

I HEREBY DECLARE AND AFFIRM under penalties of perjury that I am the owner of the real property in Howard County identified above, and the facts and matter contained in this Application for Certificate of Eligibility Pre-Approval and attachment(s) hereto are true and correct to the best of my knowledge, information and belief. I also authorize such periodic on-site inspection(s) by the Department of Planning and Zoning and its agents as may be necessary to (a) review this application and any petitions filed in connection herewith and (b) to enforce Route 1 Manual and other applicable laws.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Owner’s Signature Date

Appendix A

Route 1 Tax Credit Program

* Eligible improvements include:
  + 1. Exterior renovations to a building façade;
    2. Exterior painting and cleaning of a building façade;
    3. Structural improvements to a building facade
    4. Removal, replacement, or rehabilitation of false façades, architectural features or siding;
    5. Restoration, enhancement, or addition of primary architectural features;
    6. Installation, replacement, or enhancement of streetscape amenities (e.g. landscaping, walkways, seating areas, bike racks, lighting, etc.);
    7. Repair or replacement of doors, windows, and trim work;
    8. Structure-mounted signage, canopies and awnings;
    9. On-site free-standing signage;
    10. Cornices, parapets, and other visible roof repairs;
    11. Screening of Utility, trash and storage enclosures ;
    12. Enhanced exterior building lighting that creates a noticeably enhanced appearance.
    13. Fencing that does not obscure the building
    14. Sidewalks
    15. New construction that enhances the building or property and is visible
    16. Interior work necessary to maintain the structural integrity of the building
    17. Other upgrades, renovations or improvements made to a property deemed appropriate by the Program Review Committee.
* Ineligible improvements include:
  + 1. Improvements to building interiors;
    2. Refinancing existing debt, permit, legal and loan fees, etc.;
    3. Installation or repair of mechanical equipment, the installation or repair of electrical or plumbing systems, and the installation, relocation or repair of utilities;
    4. Routine maintenance;
    5. Removal of architecturally significant features;
    6. Security enhancements;
    7. demolition
    8. Replacements of existing fixtures that constitute repairs.
    9. Other work deemed inappropriate by the Program Review Committee.

Appendix B

**HOWARD COUNTY ROUTE 1 TAX CREDIT**

*FINAL TAX CREDIT CLAIM*

**SUBMIT ONE COPY** of this application package, including all supporting

**FOR STAFF USE ONLY**

**Date Received:**

**Application #:**

materials required, to Howard County Department of Finance no later than

April 1 prior to the first taxable year for which the credit is sought .

Applications may be submitted in person or by mail to:

3430 Court House Dr., Ellicott City, MD 21043

For questions concerning this application, please contact Jason Brown

at 410-313-3196 or [jbrown@howardcountymd.gov](mailto:jbrown@howardcountymd.gov).

**PROPERTY INFORMATION:**

Address of Subject Property: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Tax Account Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Map \_\_\_\_\_\_\_\_\_ Parcel \_\_\_\_\_\_\_\_\_\_\_ Block \_\_\_\_\_\_\_\_\_\_\_\_ Lot \_\_\_\_\_\_\_\_\_\_\_

**PROPERTY OWNER INFORMATION:**

Owner Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact Person if different from owner: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone No. (W) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (H) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (C) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Contact Preference \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

FINAL TAX CREDIT CLAIM: **ATTACH ADDITIONAL COPIES OF THIS PAGE IF NECESSARY**

**ALL APPLICATIONS MUST INCLUDE:**

A labeled color photograph showing completed work per item number listed below.

Receipts for all work being claimed – please label receipts per item number as completed below.

Completed certificate of eligibility sheet (this was mailed to you when you were pre-approved)

Completed section below.

TAX CREDIT EXPENSES:

**BRIEF DESCRIPTION OF WORK AMOUNT**

Item 1:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Item 2:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Item 3:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Item 4:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Item 5:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Item 6:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Item 7:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Item 8:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Item 9:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Item 10:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Item 11:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Item 12:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Item 13:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Item 14:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Item 15:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_

**TOTAL EXPENSES \_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**TAX CREDIT CLAIM**

(125% of above figure) \_\_\_\_\_\_\_\_\_\_\_\_\_\_

**SIGNATURE/CERTIFICATION:**

I HEREBY DECLARE AND AFFRIM under penalties of perjury that I am the owner of the real property in Howard County identified above and have incurred the costs set forth herein within the 12 months preceding submission of this Final Tax Credit Claim application, and that the contents of this application and any attachment(s) hereto are true and correct to the best of my knowledge, information, and belief. I also authorize such periodic on-site inspection(s) by the Department of Planning and Zoning and its agents as may be necessary (a) to review this application and any petitions filed in connection herewith and (b) to enforce the Route 1 Manual and other applicable laws.

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Owner’s Signature Date