

**Anne Arundel County, Maryland**

**Solid Waste Disposal Charge  
Refund Request**

(Housing Development Organizations with Non-Profit Charitable Status under IRS Section 501(c)(3) only)

**Instructions**

This form is to be used to request a refund of solid waste disposal charges paid as authorized by Anne Arundel County Code Article 13-4-106 (f). A refund will only be approved for charges paid by an eligible housing development organization (or paid on its behalf by a contractor) to Anne Arundel County for the construction or rehabilitation of housing for low to moderate income households.

The completed form should be mailed to: **Office of Finance  
Utility Billing and Customer Service, MS 1103  
P. O. Box 2700  
Annapolis, MD 21404**

**Refund Information**

(Attach original of the disposal ticket)

Ticket Number	Date	Amount	Ticket Number	Date	Amount
_____	_____	\$ _____	_____	_____	\$ _____
_____	_____	\$ _____	_____	_____	\$ _____
_____	_____	\$ _____	_____	_____	\$ _____

Total Refund requested: \$ \_\_\_\_\_

Make check payable to: \_\_\_\_\_

**Property Information**

Owner(s) Name: \_\_\_\_\_

Property Address: \_\_\_\_\_

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

**Household Income Information**

<u>Income Limits by Household Size (person) – HUD 2011</u>							
1	2	3	4	5	6	7	8
\$44,950	\$51,400	\$57,800	\$64,200	\$69,350	\$74,500	\$79,650	\$84,750

(Check the appropriate box)

Documentation attached which verifies that the property meets the income limitation.  
(Must be a low to moderate-income household that earns up to 80 percent of the median income for the Baltimore Metropolitan Statistical Area, adjusted for household size, as determined annually by the U.S. Department of Housing and Urban Development.)

Effective 7-1-11 to 6-30-12

Certification of household income.

(In lieu of providing documentation of the household income, the non-profit, charitable housing development organization may provide the following certification. The certification must be signed by an authorized representative of the housing development organization and witnessed.)

**Certification of Household Income**

I solemnly affirm under the penalties of perjury and upon personal knowledge that the household income for the property described in the Property Information portion of this form meets the eligibility requirements of Anne Arundel County Code Article 13-4-106 (f).

Signature \_\_\_\_\_ Date \_\_\_\_\_  
Printed Name \_\_\_\_\_  
Title \_\_\_\_\_  
\_\_\_\_\_

Witness \_\_\_\_\_ Date \_\_\_\_\_  
Printed Name \_\_\_\_\_

Documentation/certification previously submitted for this property.

**Housing Development Organization Information**

Organization Name: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(Check the appropriate box)

Documentation attached which verifies that the named housing development organization has non-profit charitable status under Section 501(c)(3) of the Internal Revenue Code.

Documentation previously submitted for this organization.

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The applicant hereby certifies and agrees: (1) that he/she is an authorized representative of the organization requesting the refund; (2) that the information provided is correct; and (3) that the refund being requested is for disposal charges paid for solid waste coming from the above cited property.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Title: \_\_\_\_\_

Effective 7-1-11 to 6-30-12

**FOR OFFICE USE ONLY**

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Approved    Disapproved    Date: \_\_\_\_\_

By: \_\_\_\_\_

Approved    Disapproved    Date: \_\_\_\_\_

Supervisor: \_\_\_\_\_