



APPLICATION FOR LIEN CERTIFICATE
(FEE \$50.00)

INSTRUCTIONS

1. Print or type.
2. Original and two (2) copies required.
3. Each application must include a payment of \$50.00 or indicate charge number _____.
4. This office is not responsible for errors due to improper or incomplete description or account number. Write in spaces provided the exact information as recorded on the books of the Supervisor of Assessments. Prepare a separate application for each property that is separately assessed.

5. Mail to: _____ OR _____ Return to: _____

Anne Arundel County
Utility Billing and Customer Service
P.O. Box 427, MS 1103
Annapolis, Maryland 21404

The Arundel Center
44 Calvert Street, Room 110
Annapolis, Maryland 21401

Current Real Property Number	Prior Number (if transferred after July 1)	Personal Property Account Number (Status Not Given Without Number)

Name of current owner: _____

Premise Address _____

Property Description:					
Sub-division	Block/Section	Lot	Map	Block	Parcel

Expected date of settlement: _____ Deed Reference No.: _____

APPLICATION IS HEREBY MADE FOR A CERTIFICATION OF THE STATUS OF LIENS ON THE DESCRIBED PROPERTY.

Name of Applicant: _____ Will Pick Up

Mailing Address: _____

City, State, Zip Code: _____ Please Mail

Phone Number: _____

Signature: _____ Date: _____

FOR OFFICE USE ONLY	ACCOUNT: 1042-6280
	CERTIFICATE:
	DATE IN: