

HOWARD COUNTY INFORMATION SHEET
SOLE PROPRIETORSHIP (or Individual Homeowner(s))

FORM D

SOLE PROPRIETOR'S NAME: _____

ADDRESS: _____

TELEPHONE: (WORK) _____ (CELL) _____

FAX: _____ E-MAIL: _____

I do solemnly declare and affirm under the penalties of perjury that the information contained within is true and correct to the best of my knowledge.

(Signature) (Date)

(Signature) (Date)

(Type or Print Name)

(Type or Print Name)

* * * * *

IF APPLICABLE

BUSINESS OR TRADE NAME: _____

MD STATE ASSESSMENT REGISTRATION NO. (Business License): _____

I solemnly declare and affirm under the penalties of perjury that the information contained within and attached hereto is true, correct and complete.

(Signature) (Date)

(Type or Print Name)