

Excise Tax Credit Request For Plug-In Electric Vehicle

Applicant's Name First, Middle and Last		Date of Birth		Co-Applicant's Name First, Middle and Last		Date of Birth	
Applicant's Soundex/Maryland Driver License Number				Co-Applicant's Soundex/Maryland Driver License Number			
				FEIN #			
Applicant's Street Address				Co-Applicant's Street Address			
City or Town		County	State	Zip + 4 Code		City or Town	
Title Number	Model Year	Make	Model	Vehicle Identification Number			

Credit requests received are processed subject to funding availability.

The vehicle must meet the following conditions to qualify for credit:

- Has not been modified from original manufacturer specifications;
- Is acquired for use or lease by the taxpayer and not for resale;
- Is purchased new and titled for the first time on or after July 1, 2014, but before July 1, 2017;
- Credit limited to the acquisition of one electric vehicle per individual and 10 per business entity.

The credit allowed is calculated as follows:

- The product of \$125 times the kilowatt-hours of battery capacity of the vehicle not to exceed \$3,000. Vehicles with 25 kilowatt-hours and above will only qualify for the maximum allowed of \$3,000.

Dealership must complete the following statement:

The battery capacity of the vehicle identified above is _____ kilowatt-hours.

I/we certify this vehicle is owned or leased by an individual(s) and an excise tax credit of this type has not been previously granted to me on another vehicle (if two plug-in electric vehicles are jointly owned by individuals, each individual is entitled to receive excise tax credit for one of the vehicles). I/we certify the plug-in electric vehicle is owned or leased by a business entity and the business entity is limited to receive excise tax credit on no more than 10 plug-in electric vehicles. I/we further certify the vehicle meets the qualifications stated above and the battery capacity of the vehicle has been provided above.

Signature of Applicant		Date		Signature of Co-Applicant		Date	
Name of Dealership		Dealer Number		Signature of Dealer		Date	

Please mail completed form to: Maryland Motor Vehicle Administration
 6601 Ritchie Highway NE
 Excise Tax Refund Unit Room 202
 Glen Burnie, MD 21062