If you qualify for an extended lease, but do not want one, you are also entitled to both the moving expense reimbursement previously described, and the payment equal to 3 months' rent. In order to receive the 3 month rent payment, you must complete and return the enclosed form within 60 days of the date of this notice or by(Date), but you should not execute the enclosed lease.

All application forms, executed le	eases, and n	noving expense	requests should be
addressed or delivered to:		•	

"

11-137.

- (a) (1) In this section the following words have the meanings indicated.
- (2) "Annual income" means the total income from all sources, of a designated household, for the income tax year immediately preceding the year in which the notice is given under $\S 11-102.1$ of this title, whether or not included in the definition of gross income for federal or State tax purposes. For purposes of this section, the inclusions and exclusions from annual income are the same as those listed in $\S 9-104(a)(8)$ of the Tax Property Article, "gross income" as that term is defined for the property tax credits for homeowners by reason of income and age, but shall not include unreimbursed medical expenses if the tenant provides reasonable evidence of the unreimbursed medical expenses or consents in writing to authorize disclosure of relevant information regarding medical expense reimbursement at the time of applying for an extended lease.
 - (3) "Designated household" means any of the following households:
- (i) A household which includes a senior citizen who has been a member of the household for a period of at least 12 months preceding the giving of the notice required by § 11–102.1 of this title; or
- (ii) A household which includes [a handicapped citizen] AN INDIVIDUAL WITH A DISABILITY who has been a member of the household for a period of at least 12 months preceding the giving of the notice required by § 11–102.1 of this title.
- (4) $\underline{\text{(I)}}$ ["Handicapped citizen" means a person with a measurable limitation of mobility due to congenital defect, disease, or trauma.] "DISABILITY" MEANS:
- $\stackrel{\mbox{\scriptsize (1)}}{}$ $\stackrel{\mbox{\scriptsize 1.}}{}$ A PHYSICAL OR MENTAL IMPAIRMENT THAT SUBSTANTIALLY LIMITS ONE OR MORE OF AN INDIVIDUAL'S MAJOR LIFE ACTIVITIES; OR
- (H) $\underline{2}_{\cdot}$ A RECORD OF HAVING A PHYSICAL OR MENTAL IMPAIRMENT THAT SUBSTANTIALLY LIMITS ONE OR MORE OF AN INDIVIDUAL'S MAJOR LIFE ACTIVITIES; OR