

RESERVED FOR DATE STAMP	<b>EDGEFIELD COUNTY</b> <b>ASSESSOR'S OFFICE</b> 206 Penn Street, Suite 1 Edgefield, SC 29824 Tel: (803) 637-4066 Fax: (803) 637-4119 www.edgefieldcounty.sc.gov	TAX MAP NUMBER   TAX YEAR
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**APPLICATION MUST BE RECEIVED NO LATER THAN JANUARY 15**

**APPEAL OF REAL PROPERTY APPRAISAL/ASSESSMENT**

NAME OF PROPERTY OWNER(S)	PROPERTY LOCATION
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**INCOMPLETE, UNSIGNED AND UNSUPPORTED APPLICATIONS WILL NOT BE PROCESSED**

Under The Provisions Of Section 12-60-2510-2560, Code Of Laws Of S.C., 1976, I Hereby Appeal To The Appraisal/Assessment Of The Following Described Property:

PROPERTY TYPE (Circle One)	Single-Family Home / Commercial / Vacant Land / Agricultural Land / Mobile Home Only / Mobile Home & Land Multiple-Family Apts (Number of Units) _____ / Other(Describe):						
Year Purchased	Purchase Price	Year Built	Total Rooms	Full Baths	Half Baths	Total Bedrooms	Fireplaces
	\$						
Heated Living Area	Circle all that apply	Basement Square Footage	LIST ALL OTHER BUILDINGS ON PROPERTY				
	Porch Deck Stoop Screen Porch Patio	Finished Unfinished					
Garage or Carport?	Attached Detached	Square Footage	BONUS ROOM		Finished SQ. FT.		
NO YES	Single Double		NO YES		Unfinished SQ.FT.		
SWIMMING POOL	INGROUND ABOVEGROUND	VINYL FIBERGLASS GUNITE	SIZE:				
Central Heat	Central Air	Other (Describe)	Fuel Type	WATER SOURCE		PRIVATE WELL	COUNTY WATER
NO YES	NO YES		Gas Electric Oil	SEWAGE DISPOSAL		PRIVATE SEPTIC	COUNTY SEWER
Is this <b>YOUR</b> full time <b>LEGAL</b> residence?		Is this a <b>RENTAL</b> property?		If this is a Rental property:			
NO YES		NO YES		Monthly Rent \$			
Is ANY portion of this property used as a BUSINESS?			IF YES: Describe				
NO YES			What area is used as business:				

STATE YOUR REASON FOR YOUR APPEAL AND INCLUDE ANY SUPPORTING DOCUMENTS YOU MAY HAVE.

OWNER'S ESTIMATE OF TOTAL MARKET VALUE OF LAND AND IMPROVEMENTS	\$
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Filing Of An Appeal Of The Assessment Of Real Property Does Not Preclude The Tax Liability.  
 Incomplete, Unsigned And Unsupported Applications Will Not Be Processed. This Form Must Be Returned To The Edgefield County Assessor's Office No Later Than January 15, Or Within Ninety (90) Days Of The Date Of The Assessment Notice, Whichever Comes First, Of The Current Tax Year To Appeal The Appraised Value.  
 I Certify That The Descriptions And Statements Contained In This Application Are, To The Best Of My Knowledge, Both Correct And True And Permission Is Granted To Conduct Inside And Outside Inspections Of The Subject Property As Deemed Necessary By The Edgefield County Assessor's Office.  
 I Accept That The Burden Of Proof Falls On Me And I Shall Attach All Documentation With This Form For Processing And Consideration. I Also Acknowledge That, As A Result Of This Form, My Property Value Is Not Guaranteed To Decrease. I Am Authorizing And Requesting A New Appraisal To Be Done On My Property And Understand That The Value May Increase, Decrease Or Remain At Its Current Value.

OWNER SIGNATURE	DATE
MAILING ADDRESS	TELEPHONE NUMBER
	HOME:
	CELL:

**APPLICATIONS DUE ON OR BEFORE JANUARY 15 OR WITHIN 90 DAYS OF THE DATE OF THE ASSESSMENT NOTICE.**