



VACANT LAND APPEAL FORM

PICKENS COUNTY ASSESSOR

222 McDaniel Ave., B8 | Pickens, SC 29671
Phone: 864-898-5872

OWNER INFORMATION

NAME OF OWNER(S)		TAX YEAR
DAYTIME TELEPHONE NO. () ()	AGENT TELEPHONE NO. () ()	EMAIL ADDRESS

ACCOUNT NUMBER & VALUE INFORMATION (An appeal form must be completed for each account number.)

ACCOUNT NUMBER	PROTESTED MARKET VALUE	YOUR OPINION OF MARKET VALUE
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Utilities & Off-Site Improvements		Land Characteristics		
Type	Public Private None	Type	Yes No	Comments: (If "yes", describe or attach documents).
Water		Covenants & Restrictions		
Sewer		Ground Lease		If "yes", enter monthly lease amount: ▶
Septic		Easements		
Gas		Flood Issues		
Electric		Terrain -Topography	Describe:	
Asphalt Rd.		Views	Describe:	
Concrete Rd.		Contamination		If "Yes", attach Environmental Protection Agency or DHEC document(s).
Gravel Rd.		Access		
Dirt Rd.		Mobile Homes		If "Yes", how many? Owner(s):
Street Lights		Auxiliary Buildings		If "Yes", how many? Describe:
Sidewalk		Dockable-Lake Property		If "No", attach supporting Duke Energy document.
Boat Dock/Slip		Buildable		If "No", attach supporting document.

What are you appealing? (Check all that apply.)

Market Value	Legal Residence Rate Denial	Agricultural Rate Denial	Other (describe below:)
Fee Appraisal - Has a fee appraisal been performed within the past 5 years? Yes No			If "Yes", attach entire appraisal report
Other - Provide any other information and documents to support your opinion of market value or classification:			

CERTIFICATION, FILING STATUS, DATE, SIGNATURE

I certify under penalty of perjury under the laws of the State of S.C. that all information, including any accompanying statements or documents, is true and correct to the best of my knowledge. I understand that filing an appeal does not extend the time to pay taxes and that the taxes must be paid to avoid penalties and interest. I understand that the effective date of the assessor's value is 12/31/2018 unless an Assessable Transfer of Interest (ATI) has occurred. I understand that an agent cannot assume the fiduciary and other legal responsibilities, including the filing of an appeal, without proper documentation signed by the account owner. I understand that written appeals must be timely filed with the Assessor and cannot be filed by fax, email, or other electronic means. I understand that an appeal cannot be delivered to or filed with any other county agency or official.

SIGNATURE ▶	DATE
PRINT NAME OF AUTHORIZED SIGNER	TITLE OF SIGNER: (SELECT FROM LIST OR ENTER TITLE BELOW)
COMPANY NAME	EMAIL ADDRESS

FILING STATUS

OWNER
 ATTORNEY
 CPA
 SPOUSE
 PARTNER OF PARTNERSHIP
 CHILD
 PARENT
 BROTHER/SISTER
 AGENT (Agents can not file an appeal without proper documentation).
 ENROLLED AGENT (UNDER CIR. 230)
 CORPORATE OFFICER OR DESIGNATED EMPLOYEE