

Mail or deliver original to: Cherokee County Assessor's Office 110 Railroad Ave, Gaffney, SC 29340

assessor@cherokeecountysc.com

(864) 487-2552

## LEGAL RESIDENCE APPLICATION

You must answer ALL questions and provide required documents, or your application will **not** be processed

Tax N	1ap Number:   Tax Year:						
Phys	ical Address:						
Maili	ng Address:						
1.	Owner-Occupant's name:						
2.	2. Check Appropriate 1) Single 2) Married 3) Divorced 4) Legally Separated						
	5) Widowed (Must provide copy of finalized divorce or judge signed legal separation of maintenance						
	<mark>agreement</mark> ).						
3.	Are the owner-occupants United States citizens? Yes: No: No:						
4.	Are all vehicles of the owner-occupants registered in Cherokee County? Yes: No:						
5.	Do the owner-occupants file a South Carolina State Income Tax Return? Yes: No:						
6.	Type of Residence: 1) Single family 2) Duplex 3) Townhome 4) Mobile Home						
	5) Mobile Home & land						
7.	Date of Occupancy:						
8.	If this is a contiguous homesite, list the homesite parcel:						
9.	Are there any structures or land area rented on the property? If yes, describe:						
10	. Owner-occupants previous address:						
11	. Do you own any other residences anywhere in the United States? (If yes, list the address <b>and</b> county).						
	. If the owner-occupant(s) owned their previous residence, has it been sold? (If YES, list the date of sale. If not,						
	<mark></mark>						
	. Is this property owned by a single-member Limited Liability Company (LLC)? Yes: No: (If YES, provide						
	e articles of incorporation, operating statement, or other documents showing the applicant is the single member).						
	. Is this property held in a trust? Is the grantor/trustee/settlor a current beneficiary of the trust? Yes: U No: U						
	YES, a "trust certificate" or copy of the relevant trust document which identifies the beneficiaries are required).						
15	. Are you purchasing this property under a contract of sale? (If yes, provide copy of recorded contract) Yes: No:						

## **Proof of Residency:**

To process this application, you **must** be able to provide the below listed identification (if married, spouse's identification is required).

- South Carolina state driver's license or ID at your current address (REQUIRED)
- Either:
- a. Cherokee County vehicle registration at your current address or a paid vehicle tax receipt at your current address
- b. State and Federal Income Tax Return

## **Certification and Signature:**

Under penalty of perjury, I certify that:

A: The residence which is the subject of this application is my legal residence and where I am domiciled at the time of this application. Neither I, nor any member of my household\* claim to be a legal resident of any other jurisdiction (city, county, or state) other than South Carolina for any purpose; and

B. that neither I, nor any member of my household\* claim the special assessment ratio allowed by this section on another residence.

\*"Member of my household" means: (a) the owner-occupant's spouse, except when that spouse has filed a complaint for separate support and maintenance with the appropriate family court, lives separate and apart in a different residence, and no longer cohabitates as husband and wife with the owner-occupant; and (b) any child under the age of eighteen years of the owner-occupant claimed or eligible to be claimed as a dependent on the owner-occupant's federal income tax return.

Owner Occupant:	Spouse or Co-Owner:
Signature:	Signature:
Print Name:	Print Name:
Social Security No.:	Social Security No.:
Phone No.:	Phone No.:
Date:	Date:

## **Important Information**

You may not receive any further notification if your application is approved for the 4% ratio. If approved, the 4% ratio will be reflected on your tax bill. If your application is not approved, you will receive a written denial letter in the mail. If your application is not approved by the time the bill is due, pay the bill and a refund will be issued if the application is approved, and the special assessment ratio is granted. For more information regarding legal residence, please review South Carolina State Law Section 12-43-220.

Assessor's Office Verification								
	Approved:	Denied:	Tax Year:	Date:	Saff Initials:			