

## AGRICULTURAL STRUCTURE EXEMPTION APPLICATION

Cherokee County Assessor | 110 Railroad Ave. Gaffney, SC 29340 | Phone: 864-487-2552

assessor@cherokeecountysc.com							
	Owner N	er Name(s)			Pa	arcel Number	Tax Year
Total Num	nber of Acres in	Agricultural U					
All farm buildir crops, farm eq equipment exc machinery and	juipment, or farm supp cept for motor vehicles	uctures owned by a lies and all farm mad licensed for use on rm machinery or equ	chinery the hig uipmen	and equip hways. Fo it which co	ment inclu r the purpo	to house livestock, poultry ding self-propelled farm no ose of this section "self-pro in itself the means for its	nachinery and opelled farm
All far Owne	ment Exempts: rm buildings and agri ed by a producer in th to house livestock, p	nis state	ı equip	oment or f	arm suppl	lies	
	Numbe	er of Agricultu	ıral S	Structu	ires on	property:	
Please desc	cribe the type of str	uctures such as b	arns,	sheds, o	r storage	buildings located on t	his property.
Quantity	D	escription				Use	SIZE
Do any structures have kitchens and/or bathrooms PLEASE IDENTIFY							
Certification - Authorization for Inspection - Signature - Date							
required pursua conviction, mu- application, me Assessor to ver Stabilization an	g for Agricultural Use, it ant to section 12-43-220 st be fined not more that tests the requirements to rify farm income with the	is unlawful for a pers (d)(3). A person viol 1 \$200. In making thi qualify as agricultural a Department of Reverse I understand that if the	on to ke ating th s applic real pro nue and he use	nowingly a se provision cation, I cer operty as o d Taxation, is changed	nd willfully ns of this sec tify the pro f January I the Interna on all or an	make a false statement on ction is guilty of a misdeme perty, which is the subject of the current tax year. I all Revenue Service, or the Ay portion of this tract after	anor and upon of this so authorize the gricultural
By signing t	his application, you ag			site inspec e exemptio		Agricultural buildings to	which you are
	Yo	u will be notified in w		<del>-</del>		enied.	
Signature:Soc Sec#/EIN				DATE SIGNED:			
Signed by(Ple	ease check one)	Owner			Agent	(If agent signing docume	entation is required)
Daytime	Phone:			Email:			