

OFFICE OF THE
COUNTY ASSESSOR
TELEPHONE 436-2115
www.sumtercountysc.org



Sumter County
Sumter, South Carolina
29150

13 EAST CANAL STREET
SUMTER, SC 29150
e-mail JBarfield@sumtercountysc.org

APPLICATION FOR REVIEW OF APPRAISAL

OWNER: _____

PROPERTY ADDRESS: _____

LEGAL DESCRIPTION: _____ DIST: _____

If you wish to appeal the assessment on your property: Complete Steps 1 – 6 below

1) YOUR ESTIMATE OF FAIR MARKET VALUE: \$ _____

2) **ATTACH DOCUMENTATION** IN SUPPORT OF YOUR CLAIM. Appeals Court Case 1983, Cloyd vs. Mabry, indicates that *the burden of proof to lower value lies with the taxpayer.*

MARKET VALUE OF THE SUBJECT PROPERTY REFLECTS THE MARKET CONDITIONS AS OF THE LAST COUNTY REAPPRAISAL PROGRAM OR DECEMBER 31 OF THE YEAR OF LAST ASSESSABLE TRANSFER OF INTEREST (ATI). VALUE IS NOT BASED ON CURRENT VALUE. SC STATUTE 12-43-215.

3) Owner initials here to acknowledge having read the above information. Owner's initials: _____

I HEREBY REQUEST A REVIEW APPRAISAL OF THE DESCRIBED PROPERTY.

I CERTIFY THAT THE INFORMATION GIVEN IN THIS REQUEST IS TRUE TO THE BEST OF MY KNOWLEDGE AND I GRANT PERMISSION TO CONDUCT AN INTERIOR AND EXTERIOR INSPECTION OF THE PROPERTY FOR PURPOSES OF CONDUCTING AN APPRAISAL.

4) OWNER'S SIGNATURE: _____ 5) DATE: _____

6) PHONE: _____ 7) email (optional) _____

TO BE VALID, THIS FORM MUST BE RETURNED WITHIN **30 DAYS** OF A CONFERENCE AT THE SUMTER COUNTY ASSESSOR'S OFFICE, **OR**, IF NO CONFERENCE IS HELD, WITHIN **90 DAYS** FROM THE DATE ON OWNER'S "NOTICE OF CLASSIFICATION, APPRAISAL & ASSESSMENT"
REVIEW OF APPRAISAL MAY RESULT IN A DECREASE, INCREASE, OR NO CHANGE IN VALUE.

(SC CODE 12:60-2520)

REVIEW

Items to be completed by Assessor's Office: TMS NO. _____

FORM DATE: _____ CONFERENCE DATE: _____

NUMBER BLDGS: _____ APPRAISED VALUE: _____

PERSON INTERVIEWED: _____ REVIEW TAKEN BY: _____