## **Greenville County Auditor**



www.greenvillecounty.org/Auditor

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Phone: 864-467-7040 Fax: 864-467-5960 Email: gcauditor@greenvillecounty.org

## **Boat or Boat Motor Appeal Affidavit**

If you would like to request a review of your boat or boat motor value, please fill out Section 1 and return it to the Auditor Office in person, by fax, mail, or **email**. Please Note: Appeals do not extend the due date of a boat or boat motor property tax bill.

|  |  |                 | ection 1    |  |  |
|--|--|-----------------|-------------|--|--|
| Account #  | <b>#</b> :                               |                 | Date:       |  |  |
| Owner Na   | me:                                      |                 | (8)         |  |  |
| Address:   | Owner Name:(Please print) Address:Street |                 |             |  |  |
| Street   |  |                 |             |  |  |
|  |  |                 | State       | Zip  |  |
| Boat #:  | WΔ #                                     | Make:           | Model:      | Length:  |  |
|  | MA#                                      |                 | Model:      |  |  |
|  | MA #                                     | _               |             |  |  |
| Total Taxable Value (as shown on the latest tax notice) \$ |  |                 |             |  |  |
| Reason for Appeal:   |  |                 |             |  |  |
| Nouse  | on for Appear.                           |                 |             |  |  |
| To be completed by a Registered Marine Dealer              |  |                 |             |  |  |
|  |  | •               | C           |  |  |
|  |  |                 |             | btaining an appraisal from a aler representative and the |  |
| propert  | y owner and mu                           | st be submitted |             | original tax notice. You may                             |  |
|  |  |                 | · • • ·     |  |  |
| Registered Marine Dealer Name:(Please print)               |  |                 |             |  |  |
| Dealer Phone: App  |  |                 |             |  |  |
|  |  |                 |             |  |  |
| Appraisal completed by (Company Representative):           |  |                 |             |  |  |
| Signature of Company Representative:                       |  |                 |             |  |  |
|  |  |                 |             |  |  |
|  |  |                 |             |  |  |
| Signature of Watercraft Owner:                             |  |                 |             |  |  |
| Owner Phone:   |  |                 |             |  |  |
| Owner E-mail:  |  |                 |             |  |  |
|  |  |                 | <del></del> |  |  |

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