

PETER J. TECKLENBURG

Charleston County Auditor



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MOTOR VEHICLE HIGH-MILEAGE DISCOUNT APPEAL

OWNER _____ **TAX DISTRICT** _____

MAILING ADDRESS _____

STREET / P.O. BOX CITY STATE ZIPCODE

<u>Description of Vehicle</u>
<u>Year & Make</u> _____
<u>Model</u> _____
<u>Serial/Vin No.</u> _____
<u>PIN No.</u> _____

<u>Odometer Mileage</u>
<u>Current Reading</u>
I certify that the following is a true and accurate odometer reading for this vehicle as of this date.

(Mileage Shown on Odometer)

I understand that the auditor may require a sight verification of the above indicated vehicle's odometer reading. I further understand that under penalty of law, I am hereby certifying that the information given herein is correct and true to the best of my knowledge and belief.

Signature _____ Date _____

E-Mail Address _____ Fax No. _____

You may appeal the appraised value of your vehicle because of high mileage if the vehicle averages over 15,000 miles annually based on the age of the vehicle. Divide the total mileage shown on the vehicle's odometer by the age of the vehicle. If the result is at least 15,000 miles, complete and return this form. Appeals cannot be made until after you receive your tax bill, but must be made before the end of the month that taxes are due on the vehicle. Once the tag renewal date expires, appeals cannot be accepted for that year's taxes. If you do not receive a tax bill before your vehicle license plate is due to expire, contact this office for a bill. The amount of any discount is based on a table provided by the S.C. Department of Revenue.

YOU WILL BE NOTIFIED BY LETTER OR E-MAIL OF ACTION TAKEN.

THIS SECTION FOR INTERNAL USE ONLY

Initial Contact Date _____ IP ML PH EM

No Change _____ Decrease _____ Increase _____

Auditor's Estimate of Value _____ New Receipt Number _____

Remarks _____

Certified By _____ Date _____

Return Notification Via: Letter _____ E-mail _____