

## **Dillon County Auditor**

www,dilloncountysc.gov 401 W Main St Room 203 | P O Box 32 | Dillon, SC 29536 Phone: (843)774-1418 | Fax: (843)841-3729

## **Boat Residential Status Affidavit**

This form is used to appeal the taxable value of a Watercraft for 6% instead of a 10.5% tax rate. The application must be signed by the watercraft owner (or representative) and returned in person, by fax, or mail to the Auditor's Office before the bill due date.

## **Owner Information**

(Name-Please print)  (Address – NO PO Box)			(Date)	
			(Telephone #)	(Telephone #)
(City)	(State)	(Zip)	(E-mail)	_
Is this propert	y equipped wi	th: cookinç	g, sleeping and toilet facilities?	
Yes	:Complete remainder of form.			
No	:Property does not qualify.			
Does this prope	rty qualify as y	your prima	ry residence in Greenville Count	:y?
No	:Complete remainder of form.			
Yes	:For primary residency visit Real Property Services.			
_	•	ercraft as y	our primary or secondary reside	nce ?
No Yes	<del></del>			
	Wate	ercraft Inf	ormation	
Year	Make		Model	
	Title# (WA) or USCG Doc No			
Jnder penalty of perjury pursu	ant to SC Code Sectio	n 12-37-800, my	signature certifies the above information is true ar	nd accurate.
Signature		Date		

Rev6/9/2021

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