

**APPLICATION FOR REVIEW OF ASSESSMENT
CHESTER COUNTY ASSESSOR'S OFFICE
P O DRAWER 580
CHESTER, SC 29706**

Review of assessment may result in any of the following actions:

(NO CHANGE IN ASSESSMENT) (DECREASED ASSESSMENT) or (INCREASED ASSESSMENT)

Owner _____ Tax Dist _____

Location of property _____ Tax Map # _____

of Acres _____ Present Value _____ Ag value _____

of Lots _____ Present Value _____

of Bldgs _____ Present Value _____

Reason for request for review (check one or both):

- A. The above property is appraised at more than the fair market value.
- B. The above property is not equitably assessed as compared with surrounding properties.

Year of purchase: _____ Cost of Land: \$ _____ Buildings: \$ _____ Total: \$ _____

Use of property: Single Family Multi-family Commercial Industrial Agricultural

Improvements on property: List and Identify all

Year built _____, # of Baths _____ # of Bedrooms _____

Why do you feel the property is assessed incorrectly? (Please provide supporting documents.)

Estimate of fair market value. (Source of value and supporting information required) : \$ _____

YOU WILL BE NOTIFIED BY MAIL OF ACTION TAKEN

I certify that the descriptions and statements contained in this application are correct and true to the best of my knowledge. I give permission to the Chester County appraiser to conduct an inside and outside inspection of the property if necessary.

Signed (Owner or Agent) _____ Date _____

Mailing address _____ Phone # _____

Email address _____