

OFFICE OF THE COUNTY
ASSESSOR
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13 EAST CANAL STREET
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29150
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Sumter County
Sumter, South Carolina
29150

PERMANENT MOBILE HOME APPLICATION

DATE: _____
TAKEN BY: _____

NAME: _____

ADDRESS: _____ PROP. LOC: _____
CSZ: _____

I REQUEST THAT THE MOBILE HOME AND LAND DESCRIBED BELOW BE COMBINED FOR TAXING PURPOSES AND REQUEST THAT THE APPROPRIATE INSPECTIONS BE MADE.

I UNDERSTAND THERE IS A \$50.00 NON-REFUNDABLE FEE FOR THIS INSPECTION.

SIGNATURE: _____

MOBILE HOME TMS NO: _____

MOBILE HOME OWNER OF RECORD: _____

LAND TMS NO: _____

LAND OWNER OF RECORD: _____

MOBILE HOME MUST HAVE THE TONGUE, WHEELS, AND AXLES REMOVED AND MUST BE ON A PERMANENT MASONRY FOUNDATION.

\$50.00 FEE MUST BE ENCLOSED WITH APPLICATION.

TAX YEAR _____

TAX MAP NO. _____

REVISED 9/22/98