PICKENS COUNTY AUDITOR

222 McDaniel Avenue B-7 Pickens SC 29671

Office (864) 898-5895 Clemson (864) 868-9207 Fax (864) 898-5846

MOTOR HOME

Email: brents@co.pickens.sc.us



CAMPER

County Auditor R. Brent Suddeth

<u>AFFIDAVIT FOR QUALIFICATION OF MOTOR HOME, BOAT, WATERCRAFT, OR CAMPER FOR</u> RESIDENTIAL STATUS

BOAT/WATERCRAFT

OWNER(S)			Telephone #	
MAILING ADDRESS				
CITY	SC ZIP CODE			
	y the manufacturer with the No	he appropriate livi	ng facilities? (cooking, sleeping, and toilet	
Do you own any other prop (According to the Internal Revenue C			ence? Yes Noences, one primary and one secondary)	
VEHICLE INFORMATION: (M	lotor Home/Camper)			
MAKE/CHASSISLENGTH				
MANUFACTURER(IF KNOWN)				
MODEL NAME/NUMBER	DDEL NAME/NUMBERYEAR			
NUMBER OF SLIDE OUTS	VIN NUMBER			
DESCRIPTION OF BOAT/WAT	ERCRAFT:			
YEAR MANUFACTUR	RER	MODEL	LENGTH	
HORSEPOWER	SERIAL NO	RE	GISTRATION NO	
TITLE NO. WA	OR MA		HULL NO	
DOC. NAME	OFFICIAL USCG DOC. NO)	OR OTHER REG#	
an interest expense on a qualified plaxation in this State and is consider	orimary or second residence is al ered real property rather than pe	so a primary or second ersonal property for pro	uctible pursuant to the Internal Revenue Code a residence for purposes of ad valorem property perty tax purposes. By ordinance, the governing qualifications required for motor homes pursuan	
portion of the indebtedness (or if the	nere is no indebtedness could have	ve claimed the interest	rements and that I am claiming the Interest portion of the indebtedness) pursuant to the property secures the loan or would secure any	
SIGNATURE				
SIGNATURE		DATE		