Office of the County Assessor 843-958-4100



3875 Faber Place Drive, Suite 100 North Charleston, SC 29405-8547

4% LEGAL RESIDENCE EXEMPTION - NOTIFICATION OF PART YEAR RENTAL

NAME & MAILING ADD	RESS OF OWNER	PHYSICAL LOCATION OF THE PROPERTY				
(CORRECT THE ADDRE						
(CORRECT THE ADDRE	55 IF NECESSART)					
The residence(s) found on the p	roperty identified above is re	ented. # of Res	sidences Rented:			
Rented more than 72 days a	Rented more than 72 days annually Rented for 72 days or less annually No longer being rented.					
If entire home is rented:	Number of days actually rent Number of days you plan to					
If a <u>portion</u> of home is rented:	Number of bedrooms rented		Square Footage of area rented:			

Calendar Year in question:

If the entire residence(s) rented more than 72 days, you must check the appropriate box above, sign this form at the bottom, and return the form to the Assessor's Office at the address shown above.

If the entire residence(s) rented <u>72 days or less</u>, or you no longer rent the property, you must check the appropriate box above, sign this form at the bottom, provide the information listed below, and return the form and information to the Assessor's Office at the address shown above.:

- Copies of first two (2) pages of most recently filed Federal 1040*
- A copy of Schedule E from the owner's most recently filed federal tax return*
- Copies of the first three (3) pages of your most recently filed SC/other state income tax return*
- See the back of the form for how to redact non-essential information from your tax return

*S.C. Code Ann. § 12-43-220(c)(2)(iv) says in part that the owner "...is allowed the four percent assessment ratio allowed by this item, if the residence that is the subject of the application is not rented for more than seventy-two days in a calendar year. For purposes of determining eligibility, rental income, and residency, the assessor annually may require a copy of applicable portions of the owner's federal and state tax returns, as well as the Schedule E from the applicant's federal return for the applicable tax year."

REQUIRED: Owner's Information	REQUIRED: □ Spouse's Information (spouse MUST sign if applicant is married and not separated-even if spouse is not an owner) OR □ Co-Owner IF occupant of property
Original Signature:	Original Signature:
Print Name Legibly:	Print Name Legibly:
Social Security Number:	Social Security Number:
Date: Phone:	Date: Phone:
Office use only: Reviewed/Approved: Yes No Rem	oved □Yes □ No By:

IF YOU HAVE QUESTIONS – CALL THE ASSESSOR'S OFFICE 843-958-4100 (select option #1) Or visit <u>www.charlestoncounty.org</u> for forms, contacts and further information.

DO NOT FAX – DO NOT EMAIL

HOW TO REDACT YOUR TAX RETURNS

Redact the tax return as shown (SC/other state returns have information similar to the 1040) using a heavy marker or pen to cover up:

- Social Security Numbers •
- Account numbers
- Routing numbers
- Income amounts

If a line is blank - leave it blank. If a line is filled in with a zero – leave the zero. If a line contains an N/A – leave the N/A.

The income amounts (dollar figures) are typically not needed for this process but it is necessary for the Assessor's Office to know if some lines contained data. Therefore, do not cover up the lines with plain paper and do not fold the form when copying to hide the income lines.

If you have any questions about redacting or about what parts of the returns are needed, call the Assessor's Office at 843-958-4100. Customer service representatives will be happy to assist you and answer your questions.

	the year Jan. 1-Dec. 31, 2016, or other tax year beginning ur first name and initial				, 2016, ending , 20				See separate instructions. Your social security number	
										,
If a joint return, spouse's first name and initial Last name								Spouse's social security number		
Ho	ome ado	dress (n	umber and street). If you I	nave a P.O. box,	see instructions.			Apt. no.	Make sure the S and on line 6c	
City, town or post office, state, and ZIP code. If you have a foreign address, also complete spaces below (see instructions).									Presidential Election Campaig	
Exen	nptio	ns	b Spouse				n www.www	THE REAL	on 6a and 6b	
and the second s		c Dependents:	Last name	(2) Dependent's social security number	(3) Dependent's relationship to you	(4) ✓ if child under age 17 qualifying for child tax credit (see instructions)		No. of children on 6c who: • lived with you • did not live with		
Tax Dependent				disk of all a standaughter			2	you due to divorce or separation		
If more depen									(see instructions)	
instruc									Dependents on 6c not entered above	
check	here I					-			Add numbers on	
		-	d Total cumber		claimad				lines about h	
Income		1	Wages, salaries, tips, e				7		a state of the local district of the local distribution	
		8a	Taxable interest. Attac		A REAL PROPERTY AND A REAL	a fe e a a es	8a			
Attach Form	(s)	b	Tax-exempt interest.		ALCONDUCTION OF A DECIMAL AND A	b	-			
W-2 here. Al		9a	Ordinary dividends. Att	ach Schedule			. 9a		n/a	
attach Form	5	b	Qualified dividends .	1 1 1 1 1 1	the second second second second second	b				
W-2G and 1099-R if tax		10	Constanting of the	s, or offsets of	state and local income	laxes	10			
was withheld.		11	Alimony received						n/a	
		12	Business income or (loss). Attach Schedule C or C-EZ						C1234 56	
If you did not	8	13	Contraction of the second states		D if required. If not req	uired, check here	13		0	
get a W-2,	8	14	Other gains or (losses).	1	797		14			
see instructio	ins.	15a	IRA distributions .	15a	b	faxable amount	15b			
		16a	Pensions and annuities	16a	b	faxable amount	16b			
	1000	17			ips. S corporations, trus		the second se		45678 10 69	
Refund	73		72 is more than line 61			and the second		3		
	74a	Amou	int of line 73 you want r	efunded to yo	u. If Form 8888 is atta	ched, check here		4a		
Pirect deposit?	Þ b	Routi	ng number	3 4 5 6	► c Typ	e: Checking	Savings			
ee structions.	► d		ant number	0 1 1 1	2 1 5 1 4	75				
mount	76	Construction of the Area in the	nt of line 73 you want ap int you owe. Subtract I							
ou Owe	77		ated tax penalty (see in	COLUMN COLUMN						
bled Dorts	-	77 Estimated tax penalty (see instructions) 77 Do you want to allow another person to discuss this return with the IRS (see instructions)? Yes, Complete below							w. No	
hird Party Designee	De	signee's			Phone		sonal identificat			
Sian	nar	ne 🕨	12		no. 🕨	nur	nber (PIN)			
ann	6 Inte	And many	None of montains I described then	I have a second of	this and an and an annumber	a nellock line and statem	apple: mould be place b	and of my house	failed here easied	

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