

REQUIRED INFORMATION ON APPLICATION

(The Assessor May Obtain Additional Information If Desired)

**APPLICATION FOR MULTIPLE LOT DISCOUNT
FOR SALUDA COUNTY**

Tax Year _____

Name of Subdivision _____

Total Number of Lots in S/D _____ Number of Lots Unsold Dec 31, last _____

Plat Reference _____ Deed Book _____ Page _____

Tax District _____ Tax Map Reference Numbers: _____
(Attach a List)

Subdivision Improvements:

Streets: Paved _____ Dirt _____ Other _____

Electrical Power: Above Ground _____ Below Ground _____

Community Water: Yes _____ No _____ Sewage: Septic Tanks _____ Central _____

Do you finance lots? Yes _____ No _____ At what rate of interest? _____

Number of years financed: _____ Number of lots sold previous year: _____

What is your anticipated sell out period (years)? _____

I hereby apply to have the unsold lots in the subdivision indicated above granted the multiple lot discount under the authority of Section §12-43-224 and Section §12-43-225 of the Code of Laws for South Carolina, 1976, as amended, and Regulation 117-128. I certify that I am the original developer and that all lots for which this discount is requested are wholly owned in fee and were not under a Contract Sale, Bond for Title, or other similar document as of December 31, last.

Print Name of Owner of Subdivision

Date

Signature of Certifying Individual