

Office Use Only: Stamp Here

Anderson County Assessor's Office

401 East River Street
Anderson, SC 29624
Telephone (864) 260-4028/ Fax (864) 260-4099
Assessor@andersoncountysc.org

**CORRESPONDENCE REVISION REQUEST****All Forms must be accompanied by the Owner of Record's Driver's License.****If requesting a name change, the request must be accompanied by a legal document such as a marriage license or court order.****PARCEL IDENTIFICATION AND CONTACT INFORMATION***The contact information in this section is not maintained in our records.*

TMS #		PHYSICAL ADDRESS	
PHONE NUMBER		EMAIL ADDRESS	

CORRESPONDENCE INFORMATION*The correspondence information in this section is maintained in our records.*

CURRENT CORRESPONDENCE INFORMATION		REQUESTED CORRESPONDENCE INFORMATION	
NAME(S)		REQUESTED NAME(S)	
MAILING ADDRESS		REQUESTED MAILING ADDRESS	

PLEASE READ THE FOLLOWING DISCLAIMER AND REQUIREMENT INFORMATION BEFORE SIGNING AND SUBMITTING THIS FORM.

By signing below, I am indicating that I fully understand that this is NOT a legal document. If approved, the information on this request only updates the correspondence information that the Anderson County Assessor's Office uses for Ad Valorem Taxation purposes only and in no way has any impact on legal ownership. If I wish to update the ownership of my parcel, I understand that I am advised to consult a real estate attorney to have a deed drafted and recorded with the Anderson County Register of Deeds. **Furthermore, I understand that in order for this request to be approved I must supply additional documentation to the Anderson County Assessor's Office, which may include but is not limited to Articles of Incorporation/Organization, driver's license, marriage license, and or final divorce decree.** I understand that these requests are processed in the order they are received and processing times may differ depending on the circumstance(s) presented. Furthermore, I am fully aware that filing a request does not automatically result in the request being approved and it is my responsibility to ensure that any deadlines related to the application(s) or filing of other matters relating to the functions of the Anderson County Assessor's Office are met. I am also acknowledging that it is my responsibility to ensure taxes are paid before penalty dates to avoid penalties, because neither penalties nor fees will be waived as a result of this request. Given all of the presented information above, I hereby authorize that I am in fact a party who may legally update the correspondence for this parcel and accept full responsibility for the changes presented on this request, as it is my desire to have the correspondence information updated as presented in the above request.

Signature of Owner _____ Date _____

Print Owner Name _____

FOR OFFICE USE ONLY

Received By: _____ Date: _____

Processed By: _____ Date: _____

NOTES:
