

APPLICATION FOR REFUND/CREDIT OF PERSONAL PROPERTY TAX

COUNTY OF LEXINGTON AUDITOR'S OFFICE

212 S. LAKE DRIVE STE # 103

LEXINGTON, SC 29072

PHONE (803) 785-8181 FAX (803) 785-8538

SECTION 1 Tax and Property Information (As Shown on Receipt) Receipt # District Type Description SECTION 2 Owner and Mailing Information (As Shown on Receipt) Property Owner: Mailing Address (If Different): Owner Name Name Name Resident Address Address	012)
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 Surrender of SC license plate (DMV issued 5051) Notice of Change on Address (LCF400) 	
Paid in Error Explanation:	
 Tax Exempt Non-resident Active Duty Military (LES and Military ID) 100% Total and Permanent Disabled Veteran (Department of Revenue certification) 100% Wheelchair Bound (Department of Revenue certification) Other: 	
Ollot.	
*****!!!!! READ THE BELOW STATEMENT CAREFULLY BEFORE SIGNING THIS DOCUMENT !!!!!*****	
I hereby certify that the information provided, regarding the personal property subject of this application is correct. I understand that under applicable state law, incorrect or false information given may result in civil liability and or civil or criminal penalties, SC Code of Laws Ann. § 12-37-750 (2000), § 12-37-780 (2000), § 12-37-800 (2000).	
Signature Date Signature Date	