

APPLICATION FOR EXEMPTION OF IMPACT FEES
Georgetown County, SC

1. Name of owner/applicant: _____
 2. Site address of dwelling: _____
 3. Mailing address of owner/applicant: _____
 4. Total number of persons residing in residence: _____
 5. "Adjusted gross income", "wages, salaries, tips, etc..." or "total income", whichever is highest, from IRS 1040 Form, 1040EZ Form or other tax form from most recent tax year.

 6. Is all income from all people residing in the household reflected on the above IRS forms? Yes _____ No _____
 7. If no, include the excluded person's income on this line with a brief description: _____

 8. Does anyone in the household receive food stamps? Yes _____ No _____
 9. If yes, provide documentation from Dept. of Social services.
 10. List the following assets;
 - Cash on hand _____
 - Cash in checking account _____
 - Savings account _____
 - Certificates of Deposit _____
 - Annuities, stocks, trusts, bonds _____
 - Other financial assets _____
 11. List all real property owned.
 - _____
 - _____
 - _____
 - _____
 - _____
-

Certification: I certify that the above information is correct and understand that incorrect information may lead to loss of exemption of the impact fees and other legal action by the County.

Signature(s): _____ Date _____
_____ Telephone: _____

To be completed by staff

The above reflected household income is below 80% of the area median income for a family of _____, based on the latest data. Attach data form.

Staff name: _____ Staff signature: _____
Date: _____

Approval of exemption of impact fees.

Director of Planning and Code Enforcement Signature: _____
Date: _____