



Peter J. Tecklenburg
Charleston County Auditor
Charleston, South Carolina

DATE: _____ TAX YEAR: _____

I, _____ CERTIFY THAT MY
WATERCRAFT, _____ US COAST GUARD
Name of Vessel

DOCUMENTATION NUMBER OR S. C. REGISTRATION NUMBER _____
CONTAINS A COOKING AREA WITH AN ONBOARD POWER SOURCE, A
TOILET WITH EXTERIOR EVACUATION, AND A SLEEPING QUARTER AND
THUS IS QUALIFIED FOR A 6% ASSESSMENT WITH CHARLESTON COUNTY
IN THE STATE OF SOUTH CAROLINA.

PER S.C. CODE THE APPLICANT MUST BE AN INDIVIDUAL, A SOLE
PROPRIETORSHIP, PARTNERSHIP, OR AN "S" CORPORATION, INCLUDING A
LIMITED LIABILITY COMPANY TAXED AS A SOLE PROPRIETORSHIP,
PARTNERSHIP, OR "S" CORPORATION.

Owner's Signature

Address

Phone Number

Watercraft Location