



**OPTIONAL EXCESSIVE MILEAGE APPEAL FORM**  
(Federal Motor Vehicle Informative and Cost Saving Act)

**COUNTY OF GREENWOOD AUDITOR'S OFFICE**

**528 MONUMENT ST SUITE 107**

**GREENWOOD, SC 29646**

**PHONE (864) 942-8543 FAX (864) 942-8724**

**NOTICE!!!!!!!!!!**

**Appeal must be postmarked not later than the tax due date.  
An appeal DOES NOT extend the tax due date.**

**Late appeals ARE NOT subject to review.  
All timely appeals are subject to review for up to 30 days.**

**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: Special Mailing/New Address:

Owner Name Name

Resident Address Address

City, State, Zipcode City, State, Zipcode

**SECTION 3 Tax Refunding (When Applicable) and Contact Information**

Social Security or Federal ID Number: Contact Phone Number:  
(IRS Requirement for 1099 Purpose)

**SECTION 4 Odometer Disclosure Statement**

Odometer Reading (Whole Miles Only):

**\*\*\*\*\*!!!!!! 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