

**ABBEVILLE COUNTY ASSESSOR'S OFFICE**

**REQUEST FOR PROPERTY SPLIT**

I \_\_\_\_\_  
Owner(s) of property

Request that the following property be split in accordance with the

Plat recorded in Plat Book: \_\_\_\_\_ Page: \_\_\_\_\_

Split will be for next year unless checked below:

Current tax year \_\_\_\_\_

Location: \_\_\_\_\_

Tax Map Number: \_\_\_\_\_

Reason for property split request: \_\_\_\_\_

I understand and agree that Abbeville County is splitting this property at my request. I also understand that doing this may affect my property taxes. If I ever choose to combine these parcels in the future, I will have to comply with all zoning regulations applicable at that time.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name(s): \_\_\_\_\_

Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_

**This request must be filed with the Assessor's office along with the plat.**

Please return completed form to:

Abbeville County Assessor's Office  
903 W. Greenwood St - Ste 2200  
Abbeville, SC 29620

Phone #: (864) 366-5312 Ext. 51

Fax: (864) 366-6635

Email: [assessor@abbevillecountysc.com](mailto:assessor@abbevillecountysc.com)

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Planning Dept: \_\_\_\_\_ Date: \_\_\_\_\_