

MAILING ADDRESS

South Carolina Department of Motor Vehicles

Title Application

No strikeovers, erasures or correction fluid is acceptable on this form.

South Carolina and federal law dictates that motor vehicle and driver's license records maintained by the SCDMV may be disclosed in certain situations. For further details on the disclosure of personal information and the types of information disclosed, go to the SCDMV website

Form 400 (03/2022)

www.scdmvonline.com/Privacy. Applications are accepted at SCDMV branches or can be mailed to: SCDMV P.O. Box 1498 - 10311 Wilson Blvd, Blythewood, SC 29016-0038 Motor Carrier Services applications can be mailed to SCDMV P.O. Box 1498, Blythewood, SC 29016-0027. Visit our website www.scdmvonline.com for a complete list of required documents and fees. SECTION A EXPEDITE (additional \$20.00 fee) Check here to expedite this title. Title can only be expedited in branch office. CHECK ALL THAT APPLY ☐ TITLE ■ NEW PLATE ☐ TRANSFER PLATE NUMBER □ LEASE ☐ MOPED □ RECORD LIEN □ DUPLICATE TITLE (SECTION B - VEHICLE INFORMATION) Please print or type in black ink only. VEHICLE IDENTIFICATION NUMBER /ODEL BODY STYLE FUEL TYPE (GAS OR ELECTRIC) EMPTY WEIGHT GVW MOPED - ENGINE CUBIC CENTIMETERS OR WATTAGE SECTION C - ODOMETER MILEAGE) (Miles not kilometers) FEDERAL AND STATE LAW REQUIRES THAT YOU STATE THE MILEAGE IN CONNECTION WITH THE TRANSFER OF OWNERSHIP. FAILURE TO COMPLETE OR PROVIDING A FALSE STATEMENT MAY RESULT IN FINES AND/OR IMPRISONMENT I STATE THAT THE ODOMETER NOW READS (NO TENTHS) AND TO THE BEST OF MY KNOWLEDGE THAT IT REFLECTS THE ACTUAL MILEAGE OF THE VEHICLE DESCRIBED ABOVE UNLESS ONE OF THE FOLLOWING STATEMENTS IS CHECKED: DO NOT CHECK ONE OF THE FOLLOWING UNLESS IT APPLIES. EXEMPT CAUTION ☐ I CERTIFY THAT TO THE BEST OF MY KNOWLEDGE THE ODOMETER READING REFLECTS THE AMOUNT OF MILEAGE IN EXCESS OF ITS MECHANICAL LIMITS. I CERTIFY THAT THE ODOMETER READING IS NOT THE ACTUAL MILEAGE. WARNING ODOMETER DISCREPANCY. SECTION D - OWNER/LESSEE INFORMATION Your complete legal name must be used on all title and registration documents. NEW PRIMARY OWNER/LESSEE COMPLETE LEGAL NAME (LAST, FIRST, MIDDLE) SC CUSTOMER NO., DRIVER LICENSE NO., SOC, SEC., OR FEIN DATE OF BIRTH NEW CO-OWNER/LESSEE COMPLETE LEGAL NAME (LAST, FIRST, MIDDLE) SHARED OWNERSHIP SC CUSTOMER NO., DRIVER LICENSE NO., SOC. SEC., OR FEIN DATE OF BIRTH ☐ AND OR PRIMARY OWNER'S/LESSEE RESIDENCE STREET ADDRESS (APT. NO. IF APPLICABLE) CITY STATE ZIP CODE COUNTY MAILING ADDRESS (IF DIFFERENT FROM ABOVE) STATE ZIP CODE Unless you indicate otherwise, the addresses above will be used by the State Election Commission to update your voter registration: Update Voter ☐ Do not update my residence address. ☐ Do not update my mailing address. ADDRESS WHERE VEHICLE IS HOUSED (IF DIFFERENT FROM ABOVE) ZIP CODE COUNTY STATE SC DAYTIME TELEPHONE NUMBER TEMPORARY ADDRESS (IF APPLICABLE) EXPIRATION OF TEMPORARY ADDRESS Complete only for a leased vehicle. **SECTION E - LEASING COMPANY INFORMATION** LEASING COMPANY NAME PHONE NO. CONTACT PERSON CUSTOMER NO. ADDRESS ZIP CODE CITY STATE COUNTY If you are a lienholder, are you a SC ELT participant?

Yes (SECTION F - LIEN INFORMATION) CUSTOMER NO., OR FEIN LIENHOLDER NAME (FIRST LIEN) Write "None" if vehicle is paid in full. DATE OF LIEN CONTACT PERSON TELEPHONE NUMBER MAILING ADDRESS CITY STATE ZIP CODE CUSTOMER NO., OR FEIN LIENHOLDER NAME (SECOND LIEN) DATE OF LIEN CONTACT PERSON TELEPHONE NUMBER

CITY

STATE

ZIP CODE



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SECTION G - DISCLOSUR	E Required for	vehicles 26,000 lbs. or great	er and bus	common carriers o	nly.	
EHICLE IS REGISTERED WITH A G	GROSS VEHICLE WEIGHT OF	ENT SHALL OBTAIN THE FEDERAL I MORE THAN 26,000 POUNDS OR A BU	JS COMMON (CARRIER. THE DRIVER PR		
8 USC SECTION 2721-2725 RESTR	ICT THE DISCLOSURE OF PER	RSONAL INFORMATION CONTAINED I	OUR RECOR	RDS.		
SSN		OR	FEIN			
SECTION H - IMF/SALES T	Complete this se	ection if you are entitled to a sales tax o	exemption and	I sign in the space provide	d verifying the exemp	tion.
	JALS AND TITLED IN SOUTH CAF	ROLINA ARE SUBJECT TO IMF/SALES TAX				
THE VEHICLE WAS TRANSFERREI		ARENT MY SPOUSE MY CHIL	O MY BR	OTHER/SISTER MY	GRANDPARENT (MY GRANDCHILD
THE VEHICLE WAS TRANSFERRE	0	L HEIR BENEFICIARY DISTRIB		O		
I AM ACTIVE DUTY MILITARY	THE	VEHICLE WAS A BONAFIDE GIFT				
SECTION I – ADDITIONAL						
ATE OF PURCHASE DATE FIRST OPERATED IN S.C.				ENERGY EFFICIENT MANUFACTURED/MOBILE HOME?		
IEW OR USED PRIOR TITLE NUMBER				YES NO PRIOR TITLE STATE		
OFOTION I OF LEDING	DMATION .					
SECTION J - SELLER INFO	RMATION	SC DEALER/WHOLESALER NUMBER	SC SALES	TAX NUMBER	SALES PRICE	TRADE-IN AMOUNT
20500		OLTY		1	27475	ZIP CODE
ADDRESS			CITY		STATE	ZIP CODE
SECTION K - INSURANCE	CERTIFICATION					
A VEHICLE MUST BE INSURED WITH I WHETHER OR NOT IT IS OPERATED.		GE WHEN IT IS REGISTERED AND IT MUST	REMAIN INSU	RED WHILE REGISTERED, T	HE UNINSURED MOTOR	RIST FEE MUST BE PAID
		URANCE POLICY ISSUED THROUGH AN I	NSURANCE CO	MPANY LICENSED TO DO BU	JSINESS IN SOUTH CAI	ROLINA.
NAME OF INSURANCE COMPANY						
SECTION L - DONATE LIFE	:					
YES, I WISH TO DONATE \$5.00, MORE OR LESS, TO DONATE LIFE SC. AMOUNT OF DONATION: \$						
SECTION M - SIGNATURE	OF OWNER					
		UTH CAROLINA CERTIFICATE OF TITLE AND/O				
REGULATIONS. UNDER PENALTY OF PEI			INIOTOR GARAGE	IN ON ETT NEODENTIONO AND	OKTEBERNETINZ KOO	IN WITH ENWINE
OWNER		DATE CO-C	WNER			DATE
SIGNATURE C	DF OWNER(S) - MUST BE SIGNED) IN INK BY OWNER OR AUTHORIZED AGE	NT (ATTACH PC	OWER OF ATTORNEY IF APPL	LICABLE)	
		E OF PURCHASE OR THE DATE			INA WILL RESULT	IN PENALTY FEES
IN ADDITION TO REGULAR TO 46 - 60 DAYS LATE - \$10.00	ITLE AND/OR REGISTRAT 61 - 75 DAYS LATE - \$	GION FEES. THE LATE PENALTY 625.00 76 - 135 DAYS LATE			YS LATE - \$75.00	
JUDINIO ENTE VIOLO	J. JODAIO ERIE - (,				ONLY
				THIS SECTION	FOR DMV USE	ONLY

PROCESSED BY AND OFFICE #

PLATE NUMBER