



South Carolina Department of Motor Vehicles

STATE BOARD OR COMMISSION PLATE APPLICATION

5048
(Rev. 06/18)

Please complete an application for each license plate requested and attach a copy of the current SC vehicle registration.

- Applications are NOT required for renewals.

Mail Applications to:
State Board and Commission Plates
SC Department of Motor Vehicles
PO Box 1498, SC 29016-0038

MEMBER INFORMATION

New Member \$15 special plate fee **New Vehicle \$15 special plate fee** **Plate Transfer \$10 transfer fee required**

| | | | | |
|-------------------------------|-------|------------|----------------|-----------------------|
| Last Name | | First Name | | M.I. |
| Street Address | | | | |
| Mailing Address | | | | |
| City | State | Zip Code | E-mail Address | |
| Vehicle Identification Number | | Make | Year | Current Plate Number |
| Name of Insurance Company | | | | Assigned Plate Number |
| Telephone Number (Home) | | (Work) | (Mobile) | |

REGISTERED OWNER INFORMATION AS LISTED ON VEHICLE REGISTRATION (Required)

| | | |
|---------|-------|----------|
| Name | | |
| Address | | |
| City | State | Zip Code |

Yes, I wish to donate \$5.00, more or less, to Donate Life S.C. Amount of donation \$_____ .

I certify all information provided in this application is true and correct.

Signature
Print Name
Date

State Board, Commission or Court Name and Number
Assigned Plate Number

| DMV USE ONLY | | |
|---------------------|-----------------------|-----------------------|
| Plate Number _____ | Customer Number _____ | Clerks Initials _____ |