

Account Number	Fleet Number	License Year	Expiration Month	<b>South Carolina International Registration Plan SCHEDULE C Supplemental Application for Apportioned Registration</b>		<b>Type of Operation:</b> <input type="checkbox"/> Exempt Commodity Carrier <input type="checkbox"/> Household Goods Carrier <input type="checkbox"/> Private Carrier <input type="checkbox"/> For-Hire Carrier <input type="checkbox"/> Rental Company  Leased to: <input type="checkbox"/> Private <input type="checkbox"/> Haul for Hire  <b>MUST PROVIDE COPY OF LEASE</b>  Date first operated as a fleet: _____	<b>FOR OFFICE USE ONLY</b> New Account__ Existing Account__ Months Billed__ County No.__  Identification Provided_____ Weight Group_____ Temporary Operating Authority Permit Requested? __ Yes __ No  Accepting a Temporary Operating Permit makes you liable for payment of license fees from the issue date through the remainder of the license year. <b>Changes or cancellations must be made within 3 days from the date of issue.</b> Issue Date_____ Expiration Date_____  TA # _____ Registrant's Initials _____	
Name of Registrant							Federal Employer I.D. Number (Required for Company)	
Business Address (where fleet is based)							Social Security Number (Required for Individual)	
City Code	County	State	Zip				Person to contact regarding application	
Mailing Address							City	State
City Code	County	State	Zip	U.S. DOT Number		Canadian Authority No.		

(Rev. 9/10)

I hereby declare the vehicles listed on this application to be insured motor vehicles in accordance with the S. C. Automobile Reparation Reform Act and the S.C. Motor Vehicle Financial Responsibility Act under the penalty set forth in Section 56-11-760 and will maintain security thereon during the registration period. PLEASE NOTE: If all your vehicles are covered under the same policy, you may enter the word "ALL" in the Unit Number column.

Unit Number	Name of Insurance Company (Not Agency)	Policy Number	Effective Dates	Agency/Agent's Name

Units listed on this page will be authorized to operate in the jurisdictions and at the weights listed below. Exceptions on any jurisdictions, weights or types must be grouped on separate pages.

(AB) Alberta	(CO) Colorado	(ID) Idaho	(MB) Manitoba	(MT) Montana	(NJ) New Jersey	(OH) Ohio	(RI) Rhode Island	(VA) Virginia
(AK) Alaska	(CT) Connecticut	(IL) Illinois	(MD) Maryland	(MX) Mexico	(NL) Newfoundland	(OK) Oklahoma	(SC) South Carolina	(VT) Vermont
(AL) Alabama	(DC) Dist. of Columbia	(IN) Indiana	(ME) Maine	(NB) New Brunswick	(NM) New Mexico	(ON) Ontario	(SD) South Dakota	(WA) Washington
(AR) Arkansas	(DE) Delaware	(KS) Kansas	(MI) Michigan	(NC) North Carolina	(NS) Nova Scotia	(OR) Oregon	(SK) Saskatchewan	(WI) Wisconsin
(AZ) Arizona	(FL) Florida	(KY) Kentucky	(MN) Minnesota	(ND) North Dakota	(NT) NW Territory	(PA) Pennsylvania	(TN) Tennessee	(WV) West Virginia
(BC) British Columbia	(GA) Georgia	(LA) Louisiana	(MO) Missouri	(NE) Nebraska	(NV) Nevada	(PE) Prince Edward Is.	(TX) Texas	(WY) Wyoming
(CA) California	(IA) Iowa	(MA) Massachusetts	(MS) Mississippi	(NH) New Hampshire	(NY) New York	(QC) Quebec (use axles)	(UT) Utah	(YT) Yukon Territory

Total Number of Units Added: _____ Total Number of Units Deleted: _____			**Fuel Key	D-Diesel	G-Gasoline	P-Propane
			*Vehicle Type Key:			
<input type="checkbox"/> Add Vehicle	<input type="checkbox"/> Increase Weight	<input type="checkbox"/> Add a Jurisdiction	BU – Bus FT – Full Trailer ST – Semi- Trailer		TR - Straight Truck TT – Truck Tractor	
<input type="checkbox"/> Delete Vehicle	<input type="checkbox"/> Registration Fee Transfer	<input type="checkbox"/> Vehicle Correction				
<input type="checkbox"/> Name Correction	<input type="checkbox"/> Refund Requested					

**ADDITIONS**

Unit Number	Vehicle Identification Number	Year	Make of Vehicle	* Vehicle Type Key	If Vehicle is TK, does it operate in comb. with a trailer in the state of CO?	Axles or Seats	* * Fuel	Horse Power (Buses)	Unladen Weight	Gross or Combined Weight	Purchase Price of Vehicle	Factory Price	Date of Purchase	Motor Carrier U.S. DOT No.	LEASE ↓ Is the lease expected to change during the registration year? Yes <input type="checkbox"/> No <input type="checkbox"/>	Federal Employee Identification Number of Owner  Name of Owner/Lessor

**DELETIONS**

Original or Supplement Number	Unit Number	Year	Make	Vehicle Identification Number	Gross Weight	Apportioned License Number	Replacement Equipment Number	Date Removed

**PENALTIES: Under section 56-3-840 of the S.C. State Code of Laws, a penalty fee will be charged for late registration of a newly acquired vehicle or for a late renewal as follows:**

First 14 Days - \$10.00     
 15 to 30 Days - \$25.00     
 31 to 90 Days - \$50.00     
 Over 90 Days - \$75.00

The undersigned certifies that the information in this application and any supporting documents are true and correct. Further, I understand that receiving Temporary Authority makes me liable for registration fees from the issue date through the remainder of the license year.			<b>OFFICE USE ONLY</b>	
Signature	Title	Date	Rated By:	Date:
			Entered By:	Date: