

South Carolina Department of Motor Vehicles APPLICATION FOR A DEALER OR WHOLESALER LICENSE

DLA-1 (Rev. 12/2024)

This form must be completed in its entirety. If space provided is insufficient, please reply on a separate sheet of paper and attach as part of the application. Do not staple documents. **Submit original bond and power of attorney with application**. **Please note:** A bond and power of attorney are not required to renew your license. A license cannot be renewed in a canceled status. If your license is canceled, contact the Business License Unit to obtain further requirements.

| Check One | ☐ Renewal | ☐ Firs | t Time Application | Check On | e Dealer (Retail/Wh | olesale) 🗌 Re | creational Vehicle | | |
|--|---|------------------------------------|----------------------------|-------------------------|--|-----------------|------------------------|--|--|
| | Change of: | | | | ☐ Wholesale (Only) | □ Мс | otorcycle Wholesale | | |
| | ☐ Name ☐ Address ☐ Category | | | | ☐ Motorcycle | ☐ Wh | nolesale Auction | | |
| | ☐ Ownershi | ip 🗌 Persona | l Representative | | | | | | |
| | | · — act Business Lice | · | | | | | | |
| | | new bond is req | | | | | | | |
| Application Fees | Renewal: Lic | cense Fee \$15 | 0 Plate Fee \$20 each | h (submit wi | submit with application at an SCDMV branch office) | | | | |
| | First Time Application: License Fee \$150 Plate Fee \$20 each (not required at time of application submission) | | | | | | | | |
| | Business Name or Address Change: License Fee \$150 Plate Fee \$1 each registration update (submit with application) | | | | | | | | |
| | Category Change: License Fee \$150 Plate Fee \$20 each (Not required at time of application submission) | | | | | | | | |
| | Wholesale Auction: License Fee \$50 (annually) | | | | | | | | |
| Check One | Are you a manufacturer, distributor, or franchisor of motor vehicles? Yes No If yes, state law prohibits retail sales of motor vehicles by manufacturer, distributor, or franchisor making you ineligible for a | | | | | | | | |
| | | aw pronibits re olesaler licens | | cies by man | uracturer, distributor, or | ranchisor makir | ig you meligible for a | | |
| | | | | | | | | | |
| I (we) hereby South Carol | | ense to engag | je in the PRINCIPAL B | SUSINESS o | f selling or dealing in r | notor vehicles | within the State of | | |
| Name of Dea | | | | | | | | | |
| | treet Address | | | | | | | | |
| City | | | State | | | County | | | |
| - | Special Mailing Address City State ZIP | | | | | | | | |
| | Cell Number: Business Number | | | | | | | | |
| Email Address: Do you conduct business at a location other than the principal business address? Yes No | | | | | | | | | |
| • | | | • • | | ess? | same sign) | | | |
| ` | Property Street | | The or your principal back | | oo ana mast display the | <u> </u> | | | |
| | | | awfully conduct busines | ss at this loca | ation? | | | | |
| Check Only | • | anchised | ☐ Non-franchised | | | | | | |
| If franchised, | If franchised, list Make(s) of Vehicles | | les: 1. | | | 3. | | | |
| | | | - | 1 1 | - | | | | |
| 1. Do you | have a surety | / bond in effe | ct? | 0 | | | | | |
| Name of Su | rety Company | | | Name of Li | ability Insurance | | | | |
| Address of Surety Company | | у | | Name of Policyholder | | | | | |
| (Street, City, State, ZIP) | | | | (Dealership | 's Name) | | | | |
| | Surety Bond # | | | Policy # Effective Date | | | | | |
| | Effective Date | | / / to / / | | | / / to | 1 1 | | |
| Name of Prin | • | | | Name of Ag | gent/Agency | | | | |
| (Dealership's Name) Telephone # of Bond Comp. | | | | | Telephone # of Agent | | | | |
| relephone # | oi Bona Comp | | - | relephone | # or Agent | | | | |
| 2. Was the | business a li | censed South | Carolina dealer/whol | esaler durii | ng the previous years? | Yes | □ No | | |
| | If yes, list the license # Indicate # of demonstration plates assigned | | | | | | | | |
| , 55, 115, 116 | # of Motor Vehicles | | | | Recreational Vehicles | ŭ | cles | | |
| DUDCHASE | D (during pro- | vious voor) | " 31 MOTO! VEHICLES | # 01 | 1.00104HOHAI VEHICIES | # Of Motorcy | | | |
| | D (during prev | | | | | | | | |
| SOLD (durin | g previous ye | ar) | | | | | | | |



South Carolina Department of Motor Vehicles APPLICATION FOR A DEALER OR WHOLESALER LICENSE

DLA-1 (Rev. 12/2024)

I hereby estimate that I will sell approximately _____ motor vehicles and will insure ____ plates during the upcoming year. I understand that the number of license plates may be First time dealers or dealers licensed less than increased or decreased according to actual sales. one calendar year Sales Tax number assigned by S.C. Department of Revenue (Sales Tax #) Do you sell motor vehicles on credit? ☐ Yes □No If yes to #4, have you filed any credit notifications or maximum rate documents with the Department of ☐ Yes □ No Consumer Affairs? 6. Do you have a Dealer's Manual? (Note: The Dealer Manual is available at www.scdmvonline.com) ☐ Yes □No For the following questions, use a separate sheet of paper if there is not enough space provided on this form for your answers. Do you use a floor planner? If yes, list the following: ☐ Yes □ No Floor Planner Name Contact Number 8. Is your business financially backed by another person or business? If yes, list the following: ☐ Yes ☐ No Name/Business Address Contact Number If applicable, this business is a subsidiary of: Contact Number Name/Business Address 9. Does your business financially back any other dealer or wholesaler? If yes, list the following: ☐ Yes ☐ No Name Address Contact Number 10. Has the applicant, any owner, any sales personnel, or agency been licensed in any state or jurisdiction as a motor vehicle dealer? If yes, answer the following on a separate sheet of paper: a) name of business, b) address, and c) the dates the business was in operation. Also indicate whether any claims or charges of ☐ Yes ☐ No fraudulent or deceptive trade practices or odometer rollbacks were brought against these individuals or entities. 11. Has the applicant, any owner, any sales personnel, or agency ever: made a material misstatement in an application for a dealer license? ☐ Yes □No b) violated any provision of Chapter 15 of Title 56 or Article 3 of Chapter 19 of Title 56? □ No ☐ Yes c) committed any fraud connected with the sale or transfer of a motor vehicle? ☐ Yes ☐ No d) employed fraudulent devices, methods, or practices in connection with meeting the requirements ☐ Yes ☐ No placed on dealers and wholesales by the laws of this State? violated any law involving the acquisition or transfer of a title to a motor vehicle? ☐ Yes e) ☐ No ☐ Yes f) tampered with, altered, or removed motor vehicle information or markings? ☐ No violated any federal or state law regarding the disconnecting, resetting, altering, or other unlawful ☐ No g) ☐ Yes tampering with a motor vehicle odometer, including the provisions of 49 USC 32701-32711? h) given, loaned, or sold a dealer license plate to any person or otherwise allowed the use of any dealer ☐ Yes ∏No license plate in any way not authorized by Section 56-3-2320? i) accepted or delivered a certificate or title to any other dealer, wholesaler, or any other person in which ☐ Yes ☐ No the title or assignment of title is signed in blank? or failed to maintain records of each motor vehicle transaction as required by Chapter 15 of Title 56 or ☐ Yes ☐ No by state or federal law pertaining to odometer records? If you check yes for any above, give: a) details related to event, and b) if criminal charges were involved: 1) name and address of court; 2) the name and address of the law enforcement agency involved; 3) date of any arrests, indictments, and convictions; 4) name of offenses charged or convicted of; and 5) if convicted, punishment imposed. Provide all details on a separate sheet of paper for each event checked yes and provide copies of any relevant paperwork related to each event. 12. Has the applicant, any owner, any sales personnel, or any agent been convicted of, pled guilty to, or pled nolo contendere to any of the following offenses, in any state, within the last 10 years: a) A violent crime as defined in S.C. Code 16-1-60? □ Yes □No b) a crime involving illegal drugs, other than simple possession of marijuana? ☐ Yes ΠNο c) a crime involving tax evasion or failure to pay taxes or fees as required by law? ☐ Yes □No d) a crime involving the illegal use, carrying, or possession of a dangerous weapon? ☐ Yes ☐ No e) any crime having an element of identity theft, misuse of another person's identity ☐ Yes ☐ No information, larceny, embezzlement, false statements, falsification of documents, false swearing or dishonest or deceitful dealing? or ☐ Yes ☐ No f) a crime having an element of criminal sexual battery or conduct of any type or degree with a minor or any adult? If you check yes for any above, give: a) details related to event, b) name and address of court, c) the name



South Carolina Department of Motor Vehicles APPLICATION FOR A DEALER OR WHOLESALER LICENSE

DLA-1 (Rev. 12/2024)

| e) name of offenses originally ch whether registration as a sex off | harged and offenses ev fender is required under | I) date of any arrests, indictments, and entually convicted of; f) punishment or South Carolina law. Provide all detained and provide copies of any relevant. In the content of the cont | imposed, and g) ails on a | | |
|--|--|---|---|------------------------------|--------------|
| Has the license or demonstratio suspended, revoked, or subject paper. | | ss or any employee of your business ation? If yes, give details on a sepa | | ☐ Yes | □No |
| Do you have an immediate fami grandparent, and grandchild) what a separate sheet of paper. | ☐ Yes | □No | | | |
| | of birth, and e) social se | address, c) driver's license number ecurity number. (Any person who has rs on a separate sheet of paper. | | | |
| Name of Owner | Residence Ado | dress | Dri | iver's Licer | ise No. |
| Date of Birth | Social Security | / No. | | | |
| 16. List all Sales Manager(s) : a) na list additional managers on a se | | | sales manager of | your busir | ness. Please |
| Name of Sales Manager | Address of Sal | les Manager | Dri | iver's Licer | ise No. |
| 17. List all Employee(s) : a) name, t additional employees/agents on | | | ents of your busin | ess. Pleas | e list |
| Name of Employee/Agent | Address of Em | nployee/Agent | Dri | iver's Licer | se No. |
| 18. Have you met all requirements v | with the city or county w | here you're requesting to be license | d? | ☐ Yes | □No |
| Under penalties of perjury, I declare that all the information is true and corr | | tner, or corporate officer of the busin d that false responses to these ques | tions may result i | n denial, | |
| suspension, or revocation of the licenshave freely and knowingly executed the license. | se being sought and ma | ay subject me to prosecution for perj | ury and other crin ify that I am autho | ninal offens orized to ap | pply for |

MAIL OR EMAIL ALL FORMS AND DOCUMENTS TO:

| Standard Mail | Overnight Mail | | |
|---|--|--|--|
| South Carolina Department of Motor Vehicles | South Carolina Department of Motor Vehicles | | |
| Attn: Business License Unit | Attn: Business License Unit | | |
| P.O. Box 1498 Blythewood, South Carolina 29016-0023 | 10311 Wilson Blvd., Building C Blythewood, SC 29016-0023 | | |
| Phone: (803) 896-2611 Fax: (803) 896-8172 | Phone: (803) 896-2611 Fax: (803) 896-8172 | | |
| www.scdmvonline.com dealerdocuments@scdmv.net | www.scdmvonline.com dealerdocuments@scdmv.net | | |
| | | | |