South Carolina Department of Motor Vehicles

Application to Record/Update a Lien

All title liens that are 12 years old from the lien date will expire.

400-L
(Est. 02/18)

To record a lien, submit this completed application along with the current title (electronic titles must be printed for submission). The new title with the lien recorded will be transmitted electronically to the lien holder. To record/update a lien, the odometer is NOT required; however, it will be updated if indicated. If a duplicate title is needed, please indicate below.

CHECK IF DUPLICATE TITLE NEEDED: ☐ **LIEN RECORDING FEE ($15.00)** ☐ **DUPLICATE TITLE & LIEN RECORDING ($30.00)** **EXPEDITED TITLE FEE: $35.00 (INCLUDES $20.00 EXPEDITED FEE) IF MAILED, TITLE CAN NOT BE EXPEDITED.**

SECTION A – VEHICLE INFORMATION

VEHICLE IDENTIFICATION	MAKE	YEAR	CURRENT SC TITLE NUMBER

SECTION B – ODOMETER MILEAGE

Federal and state law requires that you state the mileage in connection with the transfer of ownership. **To record/update a lien, the odometer is NOT required; however, the odometer will be updated if indicated.**

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

☐ I certify that to the best of my knowledge the mileage stated is in excess of its mechanical limits (the odometer started at zero again).

☐ I certify that the odometer reading is not the ACTUAL mileage. **WARNING ODOMETER DISCREPANCY.**

SECTION C – OWNER INFORMATION

PRIMARY OWNER'S / REGISTRANT'S LEGAL NAME (LAST, FIRST, MIDDLE)	SHARED OWNERSHIP	CO-OWNER'S / CO-REGISTRANT'S LEGAL NAME (LAST, FIRST, MIDDLE)
	☐ AND ☐ OR	

PRIMARY OWNER'S CUSTOMER NO., SC DRIVER'S LICENSE NO.	DATE OF BIRTH	CO-OWNER'S CUSTOMER NO., SC DRIVER'S LICENSE NO.	DATE OF BIRTH

SECTION D – LIEN INFORMATION

CUSTOMER NO.	LIENHOLDER NAME	DATE OF LIEN	CONTACT PERSON	TELEPHONE NUMBER

MAILING ADDRESS	CITY	STATE	ZIPCODE

CUSTOMER NO.	LIENHOLDER NAME (SECOND LIEN)	DATE OF LIEN	CONTACT PERSON	TELEPHONE NUMBER

MAILING ADDRESS	CITY	STATE	ZIPCODE

SECTION E – SIGNATURE OF OWNER

UNDER PENALTIES OF PERJURY, I DECLARE THAT I AM THE OWNER OF THIS VEHICLE. I FURTHER CERTIFY THAT THE INFORMATION ON THIS APPLICATION IS CORRECT TO THE BEST OF MY KNOWLEDGE. THE VEHICLE IS SUBJECT TO THE LIENS NAMED AND NO OTHERS. ALSO, IF REGISTERING A COMMERCIAL VEHICLE OVER 10,000 LBS. I CERTIFY THAT I AM FAMILIAR WITH THE FEDERAL MOTOR CARRIER SAFETY REGULATIONS AND/OR FEDERAL HAZARDOUS MATERIALS REGULATIONS. **MUST BE SIGNED IN INK BY OWNER OR AUTHORIZED AGENT (ATTACH POWER OF ATTORNEY IF APPLICABLE)**

_____ _____

SIGNATURE OF OWNER **DATE** **SIGNATURE OF CO-OWNER** **DATE**

THIS SECTION FOR DMV USE ONLY

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PROCESSED BY AND OFFICE #