



South Carolina Department of Motor Vehicles

Sworn Statement for Release of an Immobilized Motor Vehicle

VS-100
(Rev. 9/12)

STATE OF SOUTH CAROLINA

COUNTY OF _____

IN RE: _____ (name of person who was convicted of a second or subsequent offense of Driving Under the Influence, Felony Driving Under the Influence or Driving with an Unlawful Alcohol Concentration)

Driver's license number or Customer number of person who was convicted _____

SWORN STATEMENT OF _____ (name of person who is signing this sworn statement)

Driver's license number of person who is signing this sworn statement _____

I, _____ (printed name of person who is signing this sworn statement),

state, depose, and say that all of the following are true:

1. A conviction of a second or subsequent offense of Driving Under the Influence, Felony Driving Under the Influence or Driving with an Unlawful Alcohol Concentration has caused the suspension of the registration and license plate of the following vehicle.

VIN _____ License Plate No. _____

Make _____ Year _____

2. I am a registered owner of this vehicle or a member of the household of a registered owner.
3. I have not been convicted of a second or subsequent violation of SC Code of Laws §§56-5-2930, 56-5-2933, or 56-5-2945.
4. I regularly drive the motor vehicle listed above.
5. It is necessary for me to use the immobilized motor vehicle for my employment, transportation to an educational facility, or to perform essential household duties.
6. No other vehicle is available for my use.
7. I will not allow _____ (name of person who was convicted of DUI, felony DUI or DUAC) to use the motor vehicle.
8. I will immediately report to a local law enforcement agency any use of the vehicle by _____ (name of person who was convicted of second or subsequent violation DUI, felony DUI or DUAC).

I HEREBY CERTIFY THAT THE INFORMATION I HAVE PROVIDED IS TRUE, ACCURATE, AND COMPLETE UNDER PENALTY OF PERJURY IN ACCORDANCE WITH S. C. CODE OF LAWS §16-9-10.

Customer's Signature

Date

DMV Signature of Approval
(Driver Records or Shop Road Specialized Services Employee)

Date

- a) This form must be mailed to Driver Records, P.O. Box 1498, Blythewood, SC 29016-0028 or delivered to the DMV Specialized Services Office at 1630 Shop Road, Columbia, SC.
- b) A \$40.00 reinstatement fee is required if violation is before 2/10/09. A \$50.00 reinstatement fee is required if violation is on or after 2/10/09.
- c) If the license plate has already been surrendered, there will also be a \$6.00 replacement fee.
- d) Once DMV receives this information and it is approved, this document will be mailed back to you. The approved (original) document must be kept in your possession or a member of your household when operating this vehicle.