

# Black Locust Auto Sales (Demonstration)

IN Dealer #: 123456 Retail Tax #: 987654

Phone: 260-446-4820

7155 County Road 19

Fax:

Auburn, IN 46706

Account: Test2 Day: 27th Month: December Year: 2006

## Purchaser

Name: Wilson, Daniel V DOB: 5/23/1978 SSN 123-456-7890

DL #: SC 01145666 Insurance: AllState

## Co-Purchaser

Name: Wilson, Jennifer Jeanne DOB: 1/30/1978 SSN

DL #:  Insurance: AllState

## Address Information

### Home Address

Address 106 Roxanne Ave

City: Williamston County: Anderson State: Sc Zip: 29697

Mailing Address:  City:  ST:  Zip:

Vehicle Address:  City:  ST:  Zip:

Temp Address: Exp Dat  City:  ST:  Zip:

## Phone Numbers

Daytime:  Home  Work:  Mobile

## Vehicle Information

Make Dodge Model Durango Year: 2000 BodyStyle: SUV

VIN 4D020304 Weight 4,500 Mileage: 76,050

## License Details

GV  Transferring a License Plate ☒ Plate Number:

## Lienholder Information

Reference 297619878 Lienholder: Carolina First

Address: 725 Spring Street City Greenville State: SC Zip 29601

Amount  Contact:  Phone

# Black Locust Auto Sales (Demonstration)

IN Dealer #: 123456 Retail Tax #: 987654

Phone: 260-446-4820

7155 County Road 19

Fax:

Auburn, IN 46706

1. Selling Price:	\$12,150.00
2. License Plates, Transfer& Title:	\$0.00
3. SalesTax:	\$0.00
4. Warranty:	\$0.00
5. Total Cash Selling Price	\$12,150.00
6. Trade-in	
Make: _____ Model: _____ Year: _____	
VIN: _____	
Allowance: _____	
Less Payoff: _____ To: _____	
7. Down Payment:	\$0.00
8. Deposit:	\$0.00
9. Other Payment:	\$0.00
10. Total Down Payment:	\$0.00
11. Unpaid Balance:	\$12,150.00

The undersigned purchaser expressly accepts the above mentioned motor vehicle as being in satisfactory condition. As part of the consideration for this agreement, the undersigned purchaser hereby represents that the vehicle traded in to seller is free and clear of all liens and encumbrances; that he/she is the legal owner thereof, and has legal right to sell the same, and that he/she is eighteen (18) years of age or older.

Signature of Seller:

Signature of Purchaser:

Signature of Co-Purchaser

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



Personally appeared before me Williamston Consulting Auto Sales 987654  
(Seller) (Dealer Retail Tax #)  
106 Roxanne Ave Williamston, SC 29697  
(Address)

who being duly sworn, deposes and says that on the 27th day of December 2006,

he sold the following motor vehicle: Make Dodge Model Durango  
Year 2000 Identification (Serial) No. 4D020304

License No. \_\_\_\_\_ to Wilson, Daniel V and Wilson, Jennifer Jeanne  
(Buyer)  
106 Roxanne Ave Williamston Anderson Sc 29697  
(Street) (City) (County) (State) (Zip)

Special Mailing Address

Deponent further states that there are no liens or encumbrances on the said vehicle except as listed below:

Lienholder Carolina First Amount \_\_\_\_\_

Address 725 Spring Street Greenville SC Date \_\_\_\_\_

I certify that the odometer now reads 76,050 (no tenths) miles and to the best of my knowledge that it reflects the actual mileage of the vehicle described below, unless one of the following statements is checked.

☐ (1) I hereby certify that to the best of my knowledge, the odometer reading reflects the amount of mileage in excess of its mechanical limits.

☐ (2) I hereby certify that the odometer reading is NOT the actual mileage. WARNING-ODOMETER DISCREPANCY

Federal law (and State law, if applicable) requires that you state the mileage upon transfer of ownership. Failure to complete or providing a false statement may result in fines and/or imprisonment.

\_\_\_\_\_  
(Signature of Seller)

\_\_\_\_\_  
(Print Seller's Name)

\_\_\_\_\_  
(Signature of Buyer)

\_\_\_\_\_  
(Print Buyer's Name)

Property Tax Section  
Check One:

☐ Purchase License Plate

D.L. Number SC 01145666

License Plate Issued transferred

☒ Transfer License Plate

\_\_\_\_\_  
Signature of Buyer/if purchasing plates





# South Carolina Department of Motor Vehicles

## Application for Certificate of Title and Registration for Motor Vehicle or Manufactured Home/Mobile Home

Form 400  
(Rev. 4/10)

No strikeovers, erasures, or correction fluid is acceptable on this form. For more information, visit our website at [www.scdmvonline.com](http://www.scdmvonline.com) or call our Customer Call Center at (803) 896-5000.

### SECTION A ☐ EXPEDITE (additional \$20.00 fee) Check here to expedite this title.

Check the box next to the type of transaction you need. Please enclose the required documents and fees with your completed and signed application. For expedited services (within 3 business days) include an additional \$20.00 fee. Make checks payable to: SC DMV. **DO NOT SEND CASH.**

<input type="checkbox"/> <b>NEW TITLE &amp; REGISTRATION</b> 1) Manufacturer Certificate of Origin (MCO) or Title. 2) Paid Property Tax Receipt 3) \$15.00 title fee and 4) Regular registration fee. 5) Sales Tax (5% of selling price or \$300.00 max.) 6) Insurance Information	<input checked="" type="checkbox"/> <b>TITLE AND PLATE TRANSFER</b> 1) Manufacturer Certificate of Origin (MCO) or Title. 2) List Previous Tag # _____ 3) Previous registration in owner's name. 4) \$15.00 title 5) \$10.00 transfer fee 6) Sales Tax (5% of selling price or \$300.00 max.) 7) Insurance Information	<input type="checkbox"/> <b>TITLE FOR MOBILE OR MANUFACTURED HOME</b> 1) Manufacturer Certificate of Origin (MCO) or Title. 2) Consumer Insulation Report required for \$300.00 sales tax cap, if mobile home is energy efficient. 3) \$15.00 title fee	<input type="checkbox"/> <b>TITLE ONLY</b> 1) Manufacturer Certificate of Origin (MCO) or Title. 2) \$15.00 title fee 3) Sales Tax (5% of selling price or \$300.00 max.) <input type="checkbox"/> <b>DUPLICATE TITLE</b> 1) <input type="checkbox"/> Lost <input type="checkbox"/> Stolen or <input type="checkbox"/> Destroyed Title 2) \$15.00 title fee.	<input type="checkbox"/> <b>LEASED VEHICLE</b> 1) Do not complete Section D. Complete Section E and all other applicable sections.  <b>MAIL YOUR APPLICATION TO:</b> SC DMV P.O. Box 1498 - 10311 Wilson Blvd. Blythewood, SC 29016 - 0024
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### SECTION B - VEHICLE INFORMATION Please print or type in black ink only.

VEHICLE IDENTIFICATION NUMBER 4D020304	MAKE Dodge	YEAR MAKE 2000	BODY STYLE SUV	MODEL Durango	EMPTY WEIGHT 4,500	GVW
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### SECTION C - ODOMETER MILEAGE (Miles not kilometers)

FEDERAL AND STATE LAW REQUIRES THAT YOU STATE THE MILEAGE IN CONNECTION WITH THE TRANSFER OF OWNERSHIP. FAILURE TO COMPLETE OR PROVIDING A FALSE STATEMENT MAY RESULT IN FINES AND/OR IMPRISONMENT.

I STATE THAT THE ODOMETER NOW READS 76,050 (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 ODOMETER READING REFLECTS THE AMOUNT OF MILEAGE IN EXCESS OF ITS MECHANICAL LIMITS.

☐ I CERTIFY THAT THE ODOMETER READING IS NOT THE ACTUAL MILEAGE. **WARNING ODOMETER DISCREPANCY.**

### SECTION D - OWNER INFORMATION Your complete legal name must be used on all title and registration documents.

NEW PRIMARY OWNER COMPLETE LEGAL NAME (LAST, FIRST, MIDDLE) Wilson Daniel V		SC CUSTOMER NO., DRIVER LICENSE NO., SOC. SEC., OR FEIN SC 01145666		DATE OF BIRTH 5/23/1978	
NEW CO-OWNER COMPLETE LEGAL NAME (LAST, FIRST, MIDDLE) Wilson Jennifer Jeanne		SHARED OWNERSHIP <input checked="" type="checkbox"/> AND <input type="checkbox"/> OR		DATE OF BIRTH 1/30/1978	
PRIMARY OWNER'S RESIDENCE STREET ADDRESS (APT. NO. IF APPLICABLE) 106 Roxanne Ave		CITY Williamston	STATE Sc	ZIP CODE 29697	COUNTY Anderson
MAILING ADDRESS (IF DIFFERENT FROM ABOVE)		CITY	STATE	ZIP CODE	COUNTY
ADDRESS WHERE VEHICLE IS HOUSED (IF DIFFERENT FROM ABOVE)		CITY	STATE SC	ZIP CODE	COUNTY
DAYTIME TELEPHONE NUMBER		TEMPORARY ADDRESS (IF APPLICABLE)		EXPIRATION OF TEMPORARY ADDRESS	

### SECTION E - LEASING INFORMATION Complete only for a leased vehicle.

LEASING COMPANY NAME		PHONE NO.	CONTACT PERSON	CUSTOMER NO.	
ADDRESS		CITY	STATE	ZIP CODE	
NAME OF LESSEE (PERSON LEASING VEHICLE)		DRIVER LICENSE NO., SOC. SEC. NO., OR FEIN		DATE OF BIRTH	
LESSEE'S SC RESIDENCE STREET ADDRESS (APT. NO. IF APPLICABLE)		CITY	STATE SC	ZIP CODE	COUNTY
LESSEE'S MAILING ADDRESS (IF DIFFERENT FROM ABOVE)		CITY	STATE	ZIP CODE	COUNTY
ADDRESS WHERE VEHICLE IS HOUSED (IF DIFFERENT FROM ABOVE)		CITY	STATE SC	ZIP CODE	COUNTY

### SECTION F - LIEN INFORMATION If you are a lienholder, are you a SC ELT participant? ☐ YES ☐ NO

CUSTOMER NO., OR FEIN 297619878	LIENHOLDER NAME (FIRST LIEN) Write "None" if vehicle is paid in full. Carolina First	DATE OF LIEN	CONTACT PERSON	TELEPHONE NUMBER	
MAILING ADDRESS 725 Spring Street		CITY Greenville	STATE SC	ZIP CODE 29601	
CUSTOMER NO., OR FEIN	LIENHOLDER NAME (SECOND LIEN)	DATE OF LIEN	CONTACT PERSON	TELEPHONE NUMBER	
MAILING ADDRESS		CITY	STATE	ZIP CODE	





# South Carolina Department of Motor Vehicles

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<input type="checkbox"/> <b>NEW TITLE &amp; REGISTRATION</b> 1) Manufacturer Certificate of Origin (MCO) or Title. 2) Paid Property Tax Receipt 3) \$15.00 title fee and 4) Regular registration fee. 5) Sales Tax (5% of selling price or \$300.00 max.) 6) Insurance Information	<input type="checkbox"/> <b>TITLE AND PLATE TRANSFER</b> 1) Manufacturer Certificate of Origin (MCO) or Title. 2) List Previous Tag # 3) Previous registration in owner's name. 4) \$15.00 title 5) \$10.00 transfer fee 6) Sales Tax (5% of selling price or \$300.00 max.) 7) Insurance Information	<input type="checkbox"/> <b>TITLE FOR MOBILE OR MANUFACTURED HOME</b> 1) Manufacturer Certificate of Origin (MCO) or Title. 2) Consumer Insulation Report required for \$300.00 sales tax cap, if mobile home is energy efficient. 3) \$15.00 title fee	<input type="checkbox"/> <b>TITLE ONLY</b> 1) Manufacturer Certificate of Origin (MCO) or Title. 2) \$15.00 title fee 3) Sales Tax (5% of selling price or \$300.00 max.) <input type="checkbox"/> <b>DUPLICATE TITLE</b> 1) <input type="checkbox"/> Lost <input type="checkbox"/> Stolen or <input type="checkbox"/> Destroyed Title 2) \$15.00 title fee.	<input type="checkbox"/> <b>LEASED VEHICLE</b> 1) Do not complete Section D. Complete Section E and all other applicable sections.  <b>MAIL YOUR APPLICATION TO:</b> SC DMV P.O. Box 1498 - 10311 Wilson Blvd. Blythewood, SC 29016 - 0024
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### SECTION B - VEHICLE INFORMATION Please print or type in black ink only.

VEHICLE IDENTIFICATION NUMBER	MAKE	YEAR MAKE	BODY STYLE	MODEL	EMPTY WEIGHT	GVW
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### SECTION C - ODOMETER MILEAGE (Miles not kilometers)

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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 ODOMETER READING REFLECTS THE AMOUNT OF MILEAGE IN EXCESS OF ITS MECHANICAL LIMITS.

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### SECTION D - OWNER INFORMATION Your complete legal name must be used on all title and registration documents.

NEW PRIMARY OWNER COMPLETE LEGAL NAME (LAST, FIRST, MIDDLE)		SC CUSTOMER NO., DRIVER LICENSE NO., SOC. SEC., OR FEIN		DATE OF BIRTH
NEW CO-OWNER COMPLETE LEGAL NAME (LAST, FIRST, MIDDLE)		SHARED OWNERSHIP <input type="checkbox"/> AND <input type="checkbox"/> OR	SC CUSTOMER NO., DRIVER LICENSE NO., SOC. SEC., OR FEIN	DATE OF BIRTH
PRIMARY OWNER'S RESIDENCE STREET ADDRESS (APT. NO. IF APPLICABLE)		CITY	STATE	ZIP CODE COUNTY
MAILING ADDRESS (IF DIFFERENT FROM ABOVE)		CITY	STATE	ZIP CODE COUNTY
ADDRESS WHERE VEHICLE IS HOUSED (IF DIFFERENT FROM ABOVE)		CITY	STATE SC	ZIP CODE COUNTY
DAYTIME TELEPHONE NUMBER	TEMPORARY ADDRESS (IF APPLICABLE)	EXPIRATION OF TEMPORARY ADDRESS		

### SECTION E - LEASING INFORMATION Complete only for a leased vehicle.

LEASING COMPANY NAME		PHONE NO.	CONTACT PERSON	CUSTOMER NO.
ADDRESS		CITY	STATE	ZIP CODE
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LESSEE'S SC RESIDENCE STREET ADDRESS (APT. NO. IF APPLICABLE)		CITY	STATE SC	ZIP CODE COUNTY
LESSEE'S MAILING ADDRESS (IF DIFFERENT FROM ABOVE)		CITY	STATE	ZIP CODE COUNTY
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### SECTION F - LIEN INFORMATION If you are a lienholder, are you a SC ELT participant? ☐ YES ☐ NO

CUSTOMER NO., OR FEIN	LIENHOLDER NAME (FIRST LIEN) Write "None" if vehicle is paid in full.	DATE OF LIEN	CONTACT PERSON	TELEPHONE NUMBER
MAILING ADDRESS		CITY	STATE	ZIP CODE
CUSTOMER NO., OR FEIN	LIENHOLDER NAME (SECOND LIEN)	DATE OF LIEN	CONTACT PERSON	TELEPHONE NUMBER
MAILING ADDRESS		CITY	STATE	ZIP CODE



< This section intentionally left blank >

### SECTION G - SALES TAX EXEMPTION

Complete this section if you are entitled to a sales tax exemption and sign in the space provided verifying the exemption.

VEHICLE PURCHASED FROM INDIVIDUALS AND TITLED IN SOUTH CAROLINA ARE SUBJECT TO SALES TAX UNLESS EXEMPT. THE TAX IS 5% OF THE SALES PRICE UP TO A MAXIMUM OF \$300.00. (MOBILE HOMES ARE CALCULATED DIFFERENTLY.)

☐ THE VEHICLE WAS TRANSFERRED FROM: ☐ MY PARENT ☐ MY SPOUSE ☐ MY CHILD ☐ MY BROTHER/SISTER ☐ MY GRANDPARENT ☐ MY GRANDCHILD  
☐ THE VEHICLE WAS TRANSFERRED TO ME AS: ☐ LEGAL HEIR ☐ BENEFICIARY ☐ DISTRIBUTTEE  
☐ I AM NON-RESIDENT MILITARY PERSONNEL ☐ THE VEHICLE WAS A BONA FIDE GIFT

SIGNATURE \_\_\_\_\_

### SECTION H - ADDITIONAL INFORMATION

DATE OF PURCHASE 12/27/2006		DATE FIRST OPERATED IN S.C.	ENERGY EFFICIENT MANUFACTURED/MOBILE HOME? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
NEW OR USED? New	PRIOR TITLE NUMBER		PRIOR TITLE STATE	
THE VEHICLE DESCRIBED ON THIS APPLICATION IS: <input type="checkbox"/> REBUILDABLE <input type="checkbox"/> NON-REBUILDABLE				
THE VEHICLE SUSTAINED THE FOLLOWING DAMAGE: <input type="checkbox"/> COLLISION <input type="checkbox"/> FIRE <input type="checkbox"/> WATER <input type="checkbox"/> STOLEN (RECOVERED) <input type="checkbox"/> STOLEN (UNRECOVERED)				
AGENCY REFERENCE NUMBER		Calculate the Salvage Percentage: Predamaged Value _____ Estimate for Repairs _____ Percentage _____		
SALVAGE% _____				

### SECTION I - SELLER INFORMATION

Applicant should initial verifying the sales price of the vehicle.

SELLER OR DEALER NAME Black Locust Auto Sales		SC DEALER/WHOLESALE NUMBER 123456	SC SALES TAX NUMBER 987654	SALES PRICE \$12,150.00	CUSTOMER INITIALS
ADDRESS 7155 County Road 19			CITY Auburn	STATE IN	ZIP CODE 46706

### SECTION J - INSURANCE CERTIFICATION

A VEHICLE MUST BE INSURED WITH LIABILITY INSURANCE COVERAGE WHEN IT IS REGISTERED AND IT MUST REMAIN INSURED WHILE REGISTERED, WHETHER OR NOT IT IS OPERATED. OR THE UNINSURED MOTORIST FEE MUST BE PAID. PENALTIES ARE SEVERE FOR VIOLATION OF THIS REQUIREMENT.

UNDER PENALTIES OF PERJURY, I (WE) DECLARE THAT THIS VEHICLE IS INSURED BY A LIABILITY INSURANCE POLICY ISSUED THROUGH AN INSURANCE COMPANY LICENSED TO DO BUSINESS IN SOUTH CAROLINA AND IT WILL REMAIN INSURED THROUGHOUT THE REGISTRATION PERIOD.

NAME OF INSURANCE COMPANY AllState

### SECTION K - DONATE LIFE SC

YES, I WISH TO DONATE \$5.00, MORE OR LESS, TO DONATE LIFE SC. AMOUNT OF DONATION: \$\_\_\_\_\_,00

### SECTION L - SIGNATURE OF OWNER

UNDER PENALTIES OF PERJURY, I DECLARE THAT I AM THE OWNER OF THIS VEHICLE AND REQUEST THAT A SOUTH CAROLINA CERTIFICATE OF TITLE AND/OR REGISTRATION BE ISSUED. 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.

SIGNATURE OF OWNER (S) - MUST BE SIGNED IN INK BY OWNER OR AUTHORIZED AGENT (ATTACH POWER OF ATTORNEY IF APPLICABLE)

DATE \_\_\_\_\_

### DISCLOSURE STATEMENT

56-3-240 (SOUTH CAROLINA CODE OF LAWS) - THE DEPARTMENT SHALL OBTAIN THE FEDERAL EMPLOYER IDENTIFICATION NUMBER OR SOCIAL SECURITY NUMBER WHEN A VEHICLE IS REGISTERED WITH A GROSS VEHICLE WEIGHT OF MORE THAN 26,000 POUNDS OR A BUS COMMON CARRIER. THE DRIVER PRIVACY PROTECTION ACT OF 1994 (DPPA), 18 USC SECTION 2721-2725 RESTRICT THE DISCLOSURE OF PERSONAL INFORMATION CONTAINED IN OUR RECORDS.

### PENALTY FEES

FAILURE TO REGISTER WITHIN 45 DAYS OF THE DATE OF PURCHASE OR THE DATE OF OPERATION IN SOUTH CAROLINA WILL RESULT IN PENALTY FEES IN ADDITION TO REGULAR TITLE AND/OR REGISTRATION FEES. THE LATE PENALTY FEE SCHEDULE IS AS FOLLOWS:

46 - 60 DAYS LATE - \$10.00

61 - 75 DAYS LATE - \$25.00

76 - 135 DAYS LATE - \$50.00

OVER 135 DAYS LATE - \$75.00

### THIS SECTION FOR DMV USE ONLY

CHECK APPROPRIATE BOX: ☐ BRAND ☐ NO BRAND

RATED BY	TRANSACTION FEES	
OFFICE/OFFICE NUMBER	EXPEDITED FEE	WEIGHT INCREASE
PLATE NUMBER	LICENSE FEE	TRANSFER
EXPIRATION DATE	UNINSURED FEE	TITLE
PLATE CLASS	USE OR SALES TAX	DONATE LIFE SC
SUSPENSE REASON	PENALTY	TOTAL



Section 12-36-930, Code of Laws of South Carolina, 1976, As Amended, provides:

- (A) The tax imposed by this article on sales of motor vehicles, as defined in Section 56-1-10, trailers, semitrailers, or pole trailers of a type to be registered and licensed, to a resident of another state, is the lesser of:
- (1) an amount equal to the sales tax, which would be imposed in the purchaser's state of residence, or
  - (2) the tax that would be imposed under this article.
- (B) At the time of the sale, the seller shall:
- (1) obtain from the purchaser a notarized statement of the purchaser's intent to license the vehicle, within ten days, in the purchaser's state of residence, and
  - (2) retain a signed copy of the notarized statement. The purchaser shall give a copy to the sales tax agency of the purchaser's state of residence.
- (C) No tax is due if a nonresident will not receive credit in his state of residence for sales tax paid to this State under this section.

#### DEFINITIONS:

**Motor Vehicle:** Every vehicle which is self-propelled and customarily used on highways; provided, however, that the term shall **not** include self-propelled motor vehicles not designed or used primarily for transportation of persons or property and incidentally operated or moved over the highways, including farm tractors, road construction and maintenance machinery, ditchdigging apparatus, truck cranes and similar vehicles, this enumeration to be deemed partial and not to exclude other such vehicles which are within the general terms of this definition.

**Trailer:** Every vehicle with or without motive power, other than a pole trailer, designed for carrying persons or property and for being drawn by a motor vehicle and so constructed that no part of its weight rests upon the towing vehicle.

**Semitrailer:** Every vehicle with or without motive power, other than a pole trailer, designed for carrying persons or property and for being drawn by a motor vehicle and so constructed that some part of its weight and that of its load rests upon or is carried by another vehicle.

**Pole Trailer:** Every vehicle without motive power designed to be drawn by another vehicle and attached to the towing vehicle by means of a reach or pole or by being boomed or otherwise secured to the towing vehicle and ordinarily used for transporting long or irregularly shaped loads such as poles, pipes or structural members capable, generally, of sustaining themselves as beams between the supporting connections.

#### INSTRUCTIONS

1. This form **must** be completed in its entirety.
2. Distribution of the completed form and all copies must be properly handled.
3. A copy of this affidavit must be retained by the seller to support any deduction taken on the sales tax return.

#### Social Security Privacy Act Disclosure

It is mandatory that you provide your social security number on this tax form. 42 U.S.C 405(c)(2)(C)(i) permits a state to use an individual's social security number as means of identification in administration of any tax. SC Regulation 117-201 mandates that any person required to make a return to the SC Department of Revenue shall provide identifying numbers, as prescribed, for securing proper identification. Your social security number is used for identification purposes.

#### The Family Privacy Protection Act

Under the Family Privacy Protection Act, the collection of personal information from citizens by the Department of Revenue is limited to the information necessary for the Department to fulfill its statutory duties. In most instances, once this information is collected by the Department, it is protected by law from public disclosure. In those situations where public disclosure is not prohibited, the Family Privacy Protection Act prevents such information from being used by third parties for commercial solicitation purposes.



# BUYERS GUIDE

IMPORTANT: Spoken promises are difficult to enforce. Ask the dealer to put all promises in writing. Keep this form.

Dodge	Durango	2000	4D020304
Vehicle Make:	Model:	Year:	VIN Number:

DEALER STOCK NUMBER (OPTIONAL)

WARRANTIES FOR THIS VEHICLE

## ☐ AS IS - NO WARRANTY

YOU WILL PAY ALL COSTS FOR ANY REPAIRS. The dealer assumes no responsibility for any repairs regardless of any oral statements about the vehicle.

## ☒ WARRANTY

☐ FULL: ☒ LIMITED WARRANTY. The dealer will pay \_\_\_\_\_ % of the labor and \_\_\_\_\_ % of the parts for the covered systems that fail during the warranty period. Ask the dealer for a copy of the warranty document for a full explanation of warranty coverage, exclusions, and the dealer's repair obligations. Under state law, "implied warranties" may give you even more rights.

Systems Covered	Duration
Engine	60 days
Transmission	30 Days
Brakes	Until first time you stop

☐ SERVICE CONTRACT. A service contract is available at an extra charge on this vehicle. Ask for details as to coverage, deductible, price, and exclusions. If you buy a service contract within 90 days of the time of sale, state law "implied warranties" may give you additional rights.

PRE-PURCHASE INSPECTION: ASK THE DEALER IF YOU MAY HAVE THIS VEHICLE INSPECTED BY YOUR MECHANIC EITHER ON OR OFF THE LOT.

SEE THE BACK OF THIS FORM for important additional information, including a list of some major defects that may occur in used motor vehicles.



## Below is a list of some major defects that may occur in used motor vehicles.

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### Frame & Body

Frame -- cracks, corrective welds, or rusted through  
Dogtracks -- bent or twisted frame

### Engine

Oil leakage, excluding normal seepage  
Cracked block or head  
Belts missing or inoperable  
Knocks or misses related to camshaft lifters and push rods  
Abnormal exhaust discharge

### Transmission & Drive Shaft

Improper fluid level or leakage, excluding normal seepage  
Cracked or damaged case which is visible  
Abnormal noise or vibration caused by faulty transmission or drive shaft  
Improper Shifting in any gear  
Manual clutch slips or chatters

### Differential

Improper fluid level or leakage, excluding normal seepage  
Cracked or damaged housing which is visible  
Abnormal noise or vibration caused by faulty differential

### Cooling System

Leakage including radiator  
Improperly functioning water pump

### Electrical System

Battery leakage  
Improperly functioning alternator, generator, battery, or starter

### Fuel System

Visible leakage

### Inoperable Accessories

Gauges or warning devices  
Air conditioner  
Heater & Defroster

### Brake System

Failure warning light broken  
Pedal not firm under pressure (DOT specs)  
Not enough pedal reserve (DOT specs)  
Does not stop vehicle in straight (DOT specs)  
Hoses damaged  
Drum or rotor too thin (Mfr specs)  
Lining or pad thickness less than 1/32 inch  
Power unit not operating or leaking  
Structural or mechanical parts damaged

### Steering System

Too much free play at steering wheel (DOT specs)  
Free play in linkage more than 1/4 inch  
Steering gear binds or jams  
Front wheels aligned improperly (DOT specs)  
Power unit belts cracked or slipping  
Power unit fluid level improper

### Suspension System

Ball joint seals damaged  
Structural parts bent or damaged  
Stabilizer bar disconnected  
Spring broken  
Shock absorber mounting loose  
Rubber bushings damaged or missing  
Radius rod damaged or missing  
Shock absorber leaking or functioning improperly

### Tires

Tread depth less than 2/32 inch  
Sizes mismatched  
Visible damage

### Wheels

Visible cracks, damage or repairs  
Mounting bolts loose or missing

### Exhaust system

Leaking

Dealership Black Locust Auto Sales

Address: 7155 County Road 19

Dept AS

Auburn, IN 46706

See for complaints:

RECEIPT OF ORIGINAL COPY ACKNOWLEDG

SIGNATURE OF PURCHASER

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**IMPORTANT:** The information on this form is part of any contract to buy this vehicle. Removal of this label before consumer purchase (except for purpose of test-driving) is a violation of federal law (16 C.F.R. 455).





# South Carolina Department of Motor Vehicles

**BILL OF SALE**  
(Must Be Typed or Printed in Black Ink)

**FOR DEPARTMENT USE ONLY**

Check One:

☐ Purchase License Plate

☐ Transfer License Plate

I, Williamston Consulting Auto Sales 0123456 987654  
Seller

106 Roxanne Ave Williamston SC 29697  
Street City State Zip Code

state that on the 1st day of June Yr. 2011 the following vehicle:

MAKE Toyota MODEL Corolla BODY TYPE coupe YEAR 2001

VEHICLE IDENTIFICATION NO. 3T45678 LICENSE NO. ABC123

was sold to Roberts, John Mark or Roberts, Julie Marie  
Buyer

101 East Lee Rd Greenville Sc 29615  
Street City State Zip Code

And the above described vehicle is free of all liens and encumbrances in the buyer's name except:

\$400.00 First Citizens Bank 100 South Main Asheville NC 18076  
(List here any mortgages, liens, or encumbrances)

Sale price of vehicle ..... \$ 9,995.00

Less trade-in ..... \$ 1,100.00

Taxable Total ..... \$ 8,895.00

Federal and State law requires that you state the mileage in connection with the transfer of ownership. Failure to complete or providing a false statement may result in fines and/or imprisonment.

I state that the odometer now reads 31,987 (no tenths) miles and to the best of my knowledge that it reflects the **ACTUAL MILEAGE** of the vehicle described herein, **UNLESS** one of the following statements is checked.

**STOP!**

**DO NOT check one of the following unless it applies.**

☐ 1. I hereby certify that to the best of my knowledge the odometer reading reflects the amount of mileage in EXCESS of its mechanical limits.

☐ 2. I hereby certify that the odometer reading is NOT the actual mileage. WARNING: ODOMETER DISCREPANCY.

**WARNING:** Federal and state law requires that you state the mileage in connection with the transfer of ownership. Failure to complete or providing a false statement may result in fines and/or imprisonment.

\_\_\_\_\_  
Signature(s) of Buyer(s) Date

\_\_\_\_\_  
Signature(s) of Seller(s) Date

\_\_\_\_\_  
Hand Print Name(s) of Buyer(s)

\_\_\_\_\_  
Hand Print Name(s) of Seller(s)

**Return to: South Carolina Department of Motor Vehicles**  
**P.O. Box 1498**  
**Columbia, S.C. 29216-0024**

**ANY ALTERATION OR ERASURE VOIDS THIS DOCUMENT.**  
**ORIGINALS MUST BE SUBMITTED TO THE DEPARTMENT.**