

South Carolina Department of Motor Vehicles REQUEST TO REMAKE PERSONALIZED OR SPECIALTY LICENSE PLATES

Complete this form to request a remake of a license plate with the same plate number. A lost or stolen license plate CANNOT be remade. To replace a license plate with the next available number in a series, complete Application to Replace License Plate or Expiration Year Decal (Form 452).

INSTRUCTIONS

P.O.		Specialty Plates P.O. Box 1498	Specialty Plates	
I wish to request a remake of my personalized or specialt	y license plate.			
Replace my old specialty plate with the new DMV redesig	gned version.			
☐ I certify the license plate is or was: (check one)				
Plate is 10 Years or Older Never Received	Defective Worn or Illegible	Faded or Cracked	Damaged in Mail	
(Required) Submit a color photo of your current plat	e with the application. (A photo is	not required if plate was	never received.)	
VEHICLE INFORMATION				
License Plate Number(include spaces)	Expiration Month	Expiration Yea	ar	
(include spaces)	_			
Vehicle Identification Number (serial number)	Make		Year	
Update Voter Registration Unless you indicate otherwise, the addures the registration: Telephone Number * Do not update my resident the registration: Yes, I wish to donate \$5.00, more or less, to Donate Life \$ INSURANCE CERTIFICATION (Required) Under penalties of perjury, I declare this vehicle is insured with period. I certify all information provided in this application	dence address.	mailing address.	ate your voter	
Insurance Company Name				
Printed Name	Signature of Registered Own	er	Date	
*optional information	Clerk's			