VEHICLE REGISTRATION FORM

This is a vehicle registration form. As of May 23, 2022, South Carolina Code Section 58-23-560 states that the holder of a Certificate A, B, or C must pay to ORS annually, before January 1st of each year, a registration fee of **\$50 per vehicle**. You are renewing your registration for:

The 2024 Enforcement Period (January 1, 2024 – December 31, 2024)

Failure to renew or register new vehicles with the ORS could result in revocation of your operating certificate and a fine.

You can register new vehicles in one of two ways. Only choose one of these options to pay and register your vehicle. ALL REGISTRATION PAYMENTS ARE NON-REFUNDABLE.

Register and pay your registration fees online through the ORS online vehicle registration portal. The online registration
portal is located at (http://ors.sc.gov) under Regulated Utilities, Transportation. You will pay for each vehicle with a
credit or debit card.

OR

Complete and mail this form to the SC Office of Regulatory Staff, 1401 Main Street, Suite 900, Columbia, SC 29201.
 With this form, you need to include a business and/or personal check, money order, or certified/cashier check. CASH WILL NOT BE ACCEPTED. You may send one (1) money order/check as payment of the fees for multiple vehicles.

THE DEADLINE FOR RENEWAL FOR VEHICLE REGISTRATION IS December 15, 2023.

APPLICATION FOR ORS VEHICLE REGISTRATION

INSTRUCTIONS:

1. Type or write clearly on the bottom of this form

Class C:

Applicant's Signature: _____

2. You are required to complete ALL portions of this form.

Charter

3. You must be in compliance with all Public Service Commission and Office of Regulatory Staff requirements before any vehicle is placed on the active vehicle list, issued by the ORS.

Stretcher Van

Taxi

Vehicle(s) x \$50 = \$

Non-Emergency

Company Name: ______ Company DBA Name: _____

				Seating	
VEHICLE OWNER (Based on DMV registration)	VEHICLE MAKE/BODY TYPE	Year	Current Plate #	Capacity	VIN # (LAST 6 DIGITS)

There is a \$50 fee for each vehicle registered

PLEASE FILL OUT FRONT AND BACK

VEHICLE REGISTRATION FORM

VEHICLE OWNER (Based on DMV registration)	VEHICLE MAKE/BODY TYPE	Year	Current Plate #	Seating Capacity	VIN # (LAST 6 DIGITS)

PLEASE FILL OUT THE INFORMATION BELOW

CONTACT INFORMATION

*Company Mailing Address			
Address Line 1:			
Address Line 2:			
City:	State:	Zip Code:	
*Email Address:			