



South Carolina Department of Motor Vehicles
Response to Financial Responsibility Accident

FR-5A
(Rev. 6/13)

Note: If Notice of Financial Responsibility Accident (Form FR5) is not included with this response, please include all information in this section as listed on the FR5 form.

FR5 Reference No: _____
 Date of Accident: _____
 Date of Suspension: _____
 Customer No: _____
 Driver License No: _____

Customer Name: _____
 Year/Make: _____ VIN _____ Tag No. _____

INSURANCE (to be completed by insurance company or agent)

Your agent or insurance company can electronically submit your insurance information to DMV using the following website: www.sc-alir.com or the insurance information below can be completed by your agent or insurance company and submitted to DMV. The effective dates must cover the date of the accident for the vehicle that was involved in the accident.

Name of Company: _____
 NAIC Code: _____ Policy Number _____
 Vehicle Coverage Effective - FROM: _____ TO: _____
 Signature of Authorized Rep: _____
 Date Signed: _____ Telephone: _____

ALTERNATIVE CLEARANCE OPTION 1 - NOTARIZED RELEASE OF LIABILITY

You may submit a notarized release of liability from all persons who received property damage and/or bodily injury. You may do this by submitting a completed FR 202 or FR 202a if you are a minor. These forms can be downloaded from our website located at www.scdmvonline.com

ALTERNATIVE CLEARANCE OPTION 2 - FILE AN INSTALLMENT AGREEMENT

You may file an installment agreement that sets forth all claims for property damage and/or bodily injury, stating the amount of settlement, dates of payments and notarized signatures of all parties making agreement. You may do this by submitting a completed FR 230. This form can be downloaded from our website located at www.scdmvonline.com

ALTERNATIVE CLEARANCE OPTION 3 - POST A SECURITY DEPOSIT

You may post a security deposit with the Department in the amount on the other side of this notice which must be paid by cash, cashier's check or money order and made payable to SCDMV.

I certify that the information listed above is true to the best of my knowledge. I can be subject to criminal penalties if I deliberately provide false information.

 Owner Signature

 SC Driver License No

SC Department of Motor Vehicles
Financial Responsibility Office/ATTN FR5
PO Box 1498
Blythewood, SC 29016-0040
(803) 896-5000