



**STATE OF SOUTH CAROLINA**  
**DEPARTMENT OF CONSUMER AFFAIRS**  
**2010 MOTOR VEHICLE REPURCHASES AND**  
**REPLACEMENTS INFORMATION**

S.C. Code Ann. § 56-28-10 et seq.  
 NOTE: THIS FORM MUST BE FILED BY JANUARY 31<sup>ST</sup>

Manufacturer's Name \_\_\_\_\_  
 Street Address \_\_\_\_\_ Contact Person \_\_\_\_\_  
 Mailing Address \_\_\_\_\_  
 City/State/Zip \_\_\_\_\_ Telephone No. (\_\_\_\_) \_\_\_\_ - \_\_\_\_\_

**1. Vehicle Information**

- a. Make \_\_\_\_\_
- b. Model \_\_\_\_\_
- c. Year \_\_\_\_\_
- d. VIN \_\_\_\_\_
- e. Color \_\_\_\_\_
- f. Sales Price \_\_\_\_\_
- g. New Auto Dealer \_\_\_\_\_

\_\_\_\_\_  
 Business Name  
 \_\_\_\_\_  
 Address  
 \_\_\_\_\_

h. Customer

\_\_\_\_\_  
 Customer Name  
 \_\_\_\_\_  
 Address  
 \_\_\_\_\_

**2. Repurchase or Replacement Information**

- a. Date sold to customer \_\_\_\_\_
- b. Date of notice to manufacturer \_\_\_\_\_
- c. Last cure opportunity applicable  Yes  No
  - 1. Date of last cure notice: \_\_\_\_\_
  - 2. Date of last cure repairs began: \_\_\_\_\_
  - 3. Date last cure repairs completed: \_\_\_\_\_
- d. Arbitration procedure applicable  Yes  No
  - 1. Date of arbitration notice: \_\_\_\_\_
  - 2. Date of arbitration proceeding: \_\_\_\_\_
  - 3. Date of arbitration decision: \_\_\_\_\_
  - 4. Amount of refund, if refund made: \_\_\_\_\_
- e. Reason for decision if adverse to consumer:
  - a. Used vehicle
  - b. Vehicle not purchased in South Carolina
  - c. No last cure notice submitted
  - d. Improper last cure notice submitted
  - e. Not 3 attempts for same problem
  - f. Not 30 days out of service
  - g. No substantial impairment alleged
  - h. Problem corrected
  - i. Problem a result of abuse or alteration
  - j. Consumer no longer possessed the vehicle
  - k. Pre-hearing settlement
  - l. Other (Please specify)

- e. Was lawsuit filed?  Yes  No  
 1. Date of filing of lawsuit: \_\_\_\_\_  
 2. County of lawsuit \_\_\_\_\_  
 3. Civil Action No. \_\_\_\_\_  
 4. Result of lawsuit \_\_\_\_\_
- f. Date vehicle was replaced or repurchased \_\_\_\_\_

**3. Defect or Nonconformity Information**

- a. Specific nature of problem \_\_\_\_\_
- b. Number of repair attempts \_\_\_\_\_
- c. Number of calendar days out of service \_\_\_\_\_
- d. Who made the repair attempts \_\_\_\_\_

Business Name \_\_\_\_\_

Address \_\_\_\_\_

- e. When was the vehicle finally repaired? \_\_\_\_\_
- f. Who made the repairs that corrected the vehicle \_\_\_\_\_
- g. Will the notice and repair records and invoices be retained for at least three years from the date of the repairs?  Yes  No

**4. Disposition Information**

- a. How was the vehicle finally disposed of? \_\_\_\_\_
- b. Where was the vehicle resold? \_\_\_\_\_
- c. Who repurchased the vehicle? \_\_\_\_\_

Business Name \_\_\_\_\_

Address \_\_\_\_\_

- d. What kind of warranty was given at the time of repurchase? \_\_\_\_\_
- e. Does this warranty expressly cover the vehicle for twelve months or twelve thousand miles and expressly include any component related to the decision to repurchase?  Yes  No

\_\_\_\_\_  
Signature of Authorized Representative

Please Print Representative's Name

SWORN AND SUBSCRIBED to before me  
this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
Notary Public for \_\_\_\_\_  
My Commission Expires: \_\_\_\_\_