



South Carolina Department of Motor Vehicles
THIRD-PARTY TESTER PROGRAM ACTIVITY REPORT

DL-304H
(Rev. 9/16)

Name of Third-Party Tester:

Name of person completing report: _____ **Date submitted:** _____

Notification Report – Complete columns A through E and submit to Compliance Reporting at least 48 hours prior to administering a DMV test. E-mail report to ComplianceReporting@dmv.sc.gov or fax it to (803) 896-8002.

A double-headed horizontal arrow icon with the text "Check One" below it.

Weekly Report – Complete columns A through K at the close of business Friday. Include every DMV test that was scheduled to be administered by your third-party tester program since close of business from the previous Friday. E-mail report to ComplianceReporting@dmv.sc.gov or fax it to (803) 896-8002, or mail it to:
SCDMV – Office of Inspector General, PO Box 1498, Blythewood, SC 29016-0015