



# South Carolina Department of Motor Vehicles

## RENTAL CAR QUALITY ASSURANCE SERVICE PROVIDER CHANGE REQUEST

RC-001G  
(06/2024)

This form is used by Rental Car Participants who are requesting a service provider change. This form must be emailed to [Rentalcar@dmv.sc.gov](mailto:Rentalcar@dmv.sc.gov) or mailed to SCDMV-RCQA PO Box 1498, Blythewood, SC 29016-0022.

### 1. RENTAL CAR PARTICIPANT INFORMATION

Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Customer Number(s): \_\_\_\_\_

Rental Car Participant \_\_\_\_\_

Physical Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Telephone Number \_\_\_\_\_ Email Address \_\_\_\_\_

\_\_\_\_\_  
Authorized Personnel Name

\_\_\_\_\_  
Authorized Personnel Signature

### 2. SERVICE PROVIDER INFORMATION (\*completed by the Rental Car Participant)

Current Service Provider \_\_\_\_\_

Service Provider Contact Name \_\_\_\_\_

New Service Provider \_\_\_\_\_

New Service Provider Contact Name \_\_\_\_\_

Email Address of New Service Provider \_\_\_\_\_

Physical Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Telephone Number \_\_\_\_\_

#### FOR RCQA UNIT ONLY

☐ Change Approved ☐ Change Not Approved

Comments:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Last Date to Process Transactions with Current Service Provider \_\_\_\_\_

First Date to Process Transactions with New Service Provider \_\_\_\_\_

RCQA Signature \_\_\_\_\_ Date \_\_\_\_\_