

Request for Cancellation of Certificate

File the original with: Public Service Commission of South Carolina Clerk's Office Motor Carrier Matters P.O. Box 11649 Columbia, S.C. 29211 (803) 896 - 5100 FAX (803) 896-5199	Mail or fax a copy to: S.C. Office of Regulatory Staff Transportation Department 1401 Main Street, Suite 900 Columbia, S.C. 29201 (803) 737-0578 FAX (803) 737-0815
---	--

DATE: _____

Please consider this a request to cancel my:

- | | |
|---|---|
| <input type="checkbox"/> Class C Taxi Certificate | <input type="checkbox"/> Class A Restricted Certificate |
| <input type="checkbox"/> Class C Charter Certificate | |
| <input type="checkbox"/> Class C Charter Bus Certificate | |
| <input type="checkbox"/> Non-Emergency Certificate | |
| <input type="checkbox"/> Class E Household Goods Certificate | |
| <input type="checkbox"/> Class E Hazardous Wastes Certificate | |

My Certificate Number is _____.

(Name of Company)

DBA _____
(If applicable)

(Street Address)

(Mailing Address if different from Street Address)

(City, State, Zip Code)

(City, State, Zip Code)

(Telephone Number)

(Signature)

(Title) Owner, President, etc.