



Henry McMaster
Governor

Kevin A. Shwedo
Executive Director

State of South Carolina
Department of Motor Vehicles

June 26, 2018

FAYE G. SANDERS
117 HARTSFIELD DR.
EASLEY, SC. 29642

RE: Case # 18-0694
Customer # 25401052

Dear Ms. Sanders:

This letter is to acknowledge receipt of your partially completed medical statements dated June 21, 2018. In reviewing your medical statements it was found you failed to complete page 1 of 4. Before the Department can make an informed decision as to your ability to safely operate a motor vehicle, you must submit the above information to this office within the next (15) fifteen days. We request that all correspondence be sent to South Carolina Department of Motor Vehicles, Driver Improvement Office, and P.O. Box 1498, Blythewood, SC 29016-0016.

Please note that in addition to the medical statements, in order to assess your ability to safely operate a motor vehicle, you may be required to demonstrate your knowledge, skills and ability to exercise ordinary and reasonable control in the operation of a motor vehicle.

If you should have any questions concerning the above, please do not hesitate to contact this office at (803) 896-9925.

Driver Improvement Supervisor

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Henry McMaster
Governor



Kevin A. Shwedo
Executive Director

State of South Carolina
Department of Motor Vehicles

June 14, 2018

FAYE G. SANDERS
117 HARTSFIELD DR.
EASLEY, SC. 29642

RE: Case # 18-0694
Customer # 25401052

Dear Ms. Sanders:

The South Carolina Department of Motor Vehicles has received information indicating that your medical condition to safely operate a motor vehicle may be inadequate to warrant continuance of your driving privileges. In order for this office to make an informed decision as to your medical fitness to safely operate a motor vehicle, you and your treating physician(s) must complete the enclosed medical statements in their entirety within the next thirty (30) days. We request that all correspondence be mailed to South Carolina Department of Motor Vehicles, Driver Improvement office, Post Office Box 1498, Blythewood, SC 29016-0016.

Please note that in addition to the medical statements, you may be required to demonstrate your skills and ability to exercise ordinary and reasonable control in the operation of a motor vehicle. Failure to comply may result in the revocation of your driving privileges.

If you should have any questions concerning the above, please do not hesitate to contact our office at (803) 896-9925.

Driver Improvement Supervisor
/are

Enclosure
Medical Statements