

**State of South Carolina
Thirteenth Judicial Circuit Solicitor's Office
W. Walter Wilkins, Solicitor**

**113 Court Street
Pickens, SC 29601**

**Expungement Application 2021
(Pickens County Only)**

**Telephone: 864-467-8425
Telefax: 864-898-5632**

Eligibility: Submitting an application for expungement does not guarantee that the charge(s) can be removed from your criminal record. Applications may be submitted to the Solicitor's Office or you may hire an attorney. Eligibility for expungement is determined by the South Carolina Law Enforcement Division (SLED) and the South Carolina Legislature. Laws regarding expungements are subject to change at any time with or without notice. **Falsification of any information on this application may result in criminal charges and/or forfeiture of fees. All fees are non-refundable regardless of whether the charge(s) are found to be statutorily ineligible for expungement. Fees are due at the time of application.**

1. List the Pickens County charge(s) that you are trying to get expunged including the warrant or ticket number.

Please answer the following questions.	Yes	No
2. Do you have any pending charges in any Court in any county in South Carolina or in any other state or country? If so, list the charges.		
3. Have you ever had an expungement in South Carolina?		
4. Are you currently applying for an expungement in another county in South Carolina?		
5. Were you fingerprinted for the charge(s) that you are trying to get expunged?		
6. Do you have any out of state arrests or convictions?		
7. Were your charge(s) dismissed in Magistrate or Municipal Court?		
8. Were you required to register as a sex offender for the charge(s) that you are trying to get expunged?		
9. Are you applying on behalf of someone else? If so, what is your relationship to the person?		

PLEASE PRINT CLEARLY

Name:

First	Middle	Last	Suffix

List All Other Names Used (Maiden, Divorced, Alias, Nickname):

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Mailing Address: (Post Office Box or Street Address) Apartment/Lot Number

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City	State	Zip Code

Home or Cell Phone Number:	E-mail Address:

Social Security Number:	Driver's License Number:

Sex:	Race:	Date of Birth:	Age:

Attorney Name/Address:	Bar#:	Date:

Mail expungement(s) to attorney: Yes No

Attorney Signature: _____ **Date:** _____

Applicant Signature: _____ **Date:** _____