

Sylva License Plate Agency (LPA)

Introduction

- The Sylva LPA office will cease operations on December 15, 2023, after being operated by the Painter family since 1971.
- The North Carolina Division of Motor Vehicles advertised to solicit applications for a new operator on August 22, 2023.
- After receiving and reviewing applications the contract was readvertised on October 9, 2023.
- The application deadline was November 10, 2023.
- County application was approved by DMV Commissioner on December 4, 2023.

LPA Tiers

- The Sylva LPA is considered a Tier II facility.
- 67,834 transactions in FY 2022-23. Five (5) year average 69,412.
- Tier II allows up to three personnel.
- If approved, requesting to add three new County positions (a manager and two clerks).
 - *Job descriptions attached as an agenda item.

Proposed Location – Skyland Services Center



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Anticipated Upfront Cost to County

• Construction Costs – \$17,000

• Furniture & Equipment – \$24,500

• Training Travel – \$6,000

• Office Supplies – \$2,500

• Total – \$50,000

Anticipated Timeline

- November 10, 2023 Application due to DMV.
- November 17, 2023 DMV contacted County to set interview.
- November 22, 2023 County interview with DMV.
- December 4, 2023 DMV Commissioner approved application.
- December 12, 2023 Board notified that application was approved and approval requested for new positions and allocation of costs.
- December 19, 2023 Board votes to approve contract, new positions, and allocation of costs.
- December 20, 2023 new positions are advertised. Forms completed and sent to DMV.

Anticipated Timeline Cont.

- Early Jan. Public Works Department begins construction.
- Early Feb. Public Works Department completes construction and new positions are hired.
- Mid-Feb. Three (3) weeks training is completed and DIT installs equipment (DIT information states may be 120 days).
- Late Feb. public outreach and inventory delivered.
- Early Mar. LPA opens to the public.
- Late Apr. If DIT takes 120 days to install equipment. DMV stated it typically takes 3 – 6 months to open a new location.

Financial Information FY 2022-23

Rate Description	Rate Amount	Number of Transactions	Revenue Per Transaction Type
Highway Use Tax	\$1.68	4,443	\$7,464.24
"T" Sticker	\$1.40	478	\$669.20
Property Taxes	\$1.16	23,654	\$27,438.64
Regular	\$1.89	33,057	\$62,477.73
Title	\$2.00	5,687	\$11,374.00
Removal of Inspection Stop	\$1.68	515	\$865.20
		67,834	\$110,289.01

Annual Financial Estimate

Sylva LPA								
Transaction Fees	\$110,289.01							
Notary Fees*	\$40,000							
Total Revenue	\$150,289.01							
Expenses	\$170,913.45							
Profit/Loss	(\$20,624.44)							

^{*}Notary Fees not tracked by DMV. Title transactions multiplied by \$7.00 minimum fee.

- Expenses above includes salaries for three (3) full-time positions, plus \$2,500 in office supplies.
- The salaries could increase if the applicants have experience. The County Pay Policy permits new hires to receive direct experience in certain situations.

Salary Calculation

										Retirement	Retirement	Hospitalization	Total Employer	Total Annual	Total Annual
Position	Grade	Step	FTE	Annual Wage	FICA%	FICA \$	Medi %	Medi \$	UI\$	%	\$\$	· \$\$	Fringe %	Employer \$\$	Employer Cost
Motor Vehicle Manager	21	1	100%	\$ 38,756.29	6.20%	\$ 2,402.89	1.45%	\$ 561.97	\$ 296.00	12.91%	\$ 5,003.44	\$ 14,640.00			
License Plate Agency Technician	17	1	100%	\$ 31,884.90	6.20%	\$ 1,976.86	1.45%	\$ 462.33	\$ 296.00	12.91%	\$ 4,116.34	\$ 14,640.00	37%	\$ 21,491.54	\$ 53,376.44
License Plate Agency Technician	17	1	100%	\$ 31,884.90	6.20%	\$ 1,976.86	1.45%	\$ 462.33	\$ 296.00	12.91%	\$ 4,116.34	\$ 14,640.00	37%	\$ 21,491.54	\$ 53,376.44

\$ 65,887.36 \$ 168,413.45

• Requested grades based on current grade structure for Collections staff.

Annual Financial Estimate with Experience

Sylva LPA								
Transaction Fees	\$110,289.01							
Notary Fees	\$40,000							
Total Revenue	\$150,289.01							
Expenses	\$210,473.61							
Profit/Loss	(\$60,184.60)							

- Expenses above includes salaries for three (3) full-time positions, plus \$2,500 in office supplies.
- Applying ten (10) years experience to each position.

Salary Calculation with 10 Years Experience

Position	Grade	Step	FTE	Annual Wa	ze FICA%	FICA \$	Medi %	Medi \$	UI \$	Retirement	Retirement \$\$	Hospitalization	Total Employer Fringe %	Total Annual Employer \$\$	Total Annual Employer Cost
Motor Vehicle Manager	21	•		\$ 51,160.		6 \$ 3,171.94		\$ 741.82			\$ 6,604.80				
License Plate Agency Technician	17		100%			6 \$ 2,609.56		\$ 610.30			\$ 5,433.78				
License Plate Agency Technician	17	10	100%	\$ 42,089.	72 6.209	6 \$ 2,609.56	1.45%	\$ 610.30	\$ 296.00	12.91%	\$ 5,433.78	\$ 14,640.00	32%	\$ 23,589.65	\$ 65,679.37

\$ 72,633.85 \$ 207,973.61

Annual Financial Estimate, 2.5 Employees

Sylva	LPA
Transaction Fees	\$110,289.01
Notary Fees	\$40,000
Total Revenue	\$150,289.01
Expenses	\$137,053.24
Profit/Loss	\$13,235.77

- Could consider hiring two (2) full-time positions (a manager and a clerk) and one (1) part-time clerk position.
- Potential to receive complaints with increased wait times.
- Would request a later discussion with the Board if part-time position needed to be made into a full-time position.

Base Salary Calculation

Position	Grade	Step	FTE	Annual Wage	FICA%	FICA \$	Medi %	Medi \$	UI \$	Retirement %	Retirement \$\$	Hospitalization \$\$	Total Employer Fringe %	Total Annual Employer \$\$	Total Annual Employer Cost
License Plate Agency Manager	21	1	100%	\$ 38,756.29	6.20%	\$ 2,402.89	1.45%	\$ 561.97	\$ 296.00	12.91%	\$ 5,003.44	\$ 14,640.00	34%	\$ 22,904.29	\$ 61,660.58
License Plate Agency Technician	17	1	100%	\$ 31,884.90	6.20%	\$ 1,976.86	1.45%	\$ 462.33	\$ 296.00	12.91%	\$ 4,116.34	\$ 14,640.00	37%	\$ 21,491.54	\$ 53,376.44
License Plate Agency Technician	17	1		\$ 15,942.45	6.20%			\$ 231.17	\$ 296.00		\$ 2,058.17	,	11%		\$ 19,516.22
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\$ 47,969.60 \$ 134,553.24

Annual Financial Estimate, 2.5 Employees with Experience

Sylva LPA								
Transaction Fees	\$110,289.01							
Notary Fees	\$40,000							
Total Revenue	\$150,289.01							
Expenses	\$170,461.93							
Profit/Loss	(\$20,172.92)							

- Expenses above includes salaries for two (2) full-time positions, and one (1) part-time position, plus \$2,500 in office supplies.
- Applying ten (10) years experience to each position.

Salary Calculation, 2.5 Employees with 10 Years Experience

Position	Grade	Step	FTE	Annual Wage	FICA%	FICA \$	Medi %	Medi \$	UI \$	Retirement %	Retirement \$\$	Hospitalization \$\$	Total Employer Fringe %	Total Annual Employer \$\$	Total Annual Employer Cost
License Plate Agency Manager	21	10	100%	\$ 51,160.32	6.20%	\$ 3,171.94	1.45%	\$ 741.82	\$ 296.00	12.91%	\$ 6,604.80	\$ 14,640.00	29%	\$ 25,454.56	\$ 76,614.88
License Plate Agency Technician	17	10	100%	\$ 42,089.72	6.20%	\$ 2,609.56	1.45%	\$ 610.30	\$ 296.00	12.91%	\$ 5,433.78	\$ 14,640.00	32%	\$ 23,589.65	\$ 65,679.37
License Plate Agency Technician	17	10	50%	\$ 21,044.86	6.20%	\$ 1,304.78	1.45%	\$ 305.15	\$ 296.00	12.91%	\$ 2,716.89		11%	\$ 4,622.82	\$ 25,667.68

\$ 53,667.03 \$ 167,961.93

Forms



REQUEST FOR NEW DMV OFFICE LOCATION OR EXISTING DMV OFFICE MOVES

This form is provided by NCDIT-Transportation and is used to order the data circuit for new/existing office moves.

		Si	te Conta	act I	nformation:				
Name:									
Email Ad	ddress:								
Telepho	ne Number(s): (can be ce	II)							
Date of	Request:								
Type of	Request:				New Office	Relocation of Existing Office			
Request	ed Completion / Move in	Date:							
(See Red	quirements 1 & 2 Below.)								
	Office Location Information:								
Current	Office Address:								
New Off	fice Address:								
Has Leas	se been Signed at New n?:				Yes	No			
(If the new	fice Phone #: office does not have a phone t, provide a number to business								
County:									
	ype e.g. (DL, State VR,								
	T). List all that apply:								
	of Workstations/								
	required:								
	of Card Readers / eld Scanners Required:								
mana ne		PEOLII	DEMENIT	S F	OR THE NEW C	DEELCE**			
1						lered to the date it is installed.			
2	NCDIT-Transportation will installs the circuit there me to trenching, directional be	order the ay be cos oring and ortation.	e data cir ts associ I conduit The site	cuit ated inst	for DMV offices I for the installa allation. This wi tact should be r	s, however when the phone company tion. This may include but is not limited Il be the responsibility of the site responsible for getting any requirements			
3	Floor space for a 26W X 30 wall space for a 19W X 218				with available	power outlet (DMV VR STANDARD) OR			
4	2X2 FT plywood backboard	for circu	uit install	atio	n on wall with #	6 ground.			
5	Floor plan of the office sho DOTHELP@NCDOT.GOV w			k an	nd workstation l	ocations submitted to			
СОММЕ	NTS:								
NCDIT-T	ransportation Client Serv	ices				Revised on: August 21, 2018			

ACH-VEND July 2021

STATE OF NORTH CAROLINA DEPARTMENT OF TRANSPORTATION ACH – EFT AUTHORIZATION FORM

Check One:	Initial Signup Change								
VENDOR INFORMAT	TON Tax ID Associated with Vendor Name								
Vendor # :	FEIN/SSN:								
Vendor Name:									
Vendor Address:									
Email: (REQUIRED)									
FINANCIAL INSTITU	TION ACCT. INFO.:								
Name on Account:									
Institution Name:									
Institution Address:									
Transit/Routing #:	(Nine digits-copy from check, not from deposit slip)								
Bank Account # :	(include any leading zeros)								
Previous Bank Info: (Ac∞unt Changes Only)	Bank Account #:(Last 4 digits only) (**Required for all banking changes**)								
Type of Acct:	Checking Savings (Check one)								
International ACH Transactions (IAT) Statement	The entire amount of my payment via direct deposit to a financial institution is is not being transferred/forwarded to a financial institution outside the U.S.								
*YOU MUST CHECK THE	APPROPRIATE BOX TO COMPLETE THIS FORM.								
PARTICIPATING VEN	NDOR ALITHORIZATION								
I, on behalf of the vinitiate ACH credit authorize any nece I acknowledge that and U.S. law.	I, on behalf of the vendor name indicated above, hereby authorize the North Carolina Department of Transportation to initiate ACH credit entries to the above designated bank for payments due from NCDOT for all programs. I (we) also authorize any necessary ACH debit entries or adjustments for any ACH credit entries made in error to the account. I acknowledge that the origination of ACH transactions to my account must comply with the provisions of North Carolina and U.S. law. I understand that this ACH authorization will remain in effect until I cancel it in writing with Accounts Payable.								
Vendor Officer's Nam (Printed)	e: Tel.:								
Signature:	Date:								
(Typed or DocuSigned sign	natures will not be accepted)								
Return completed form to NC Department of Transpo Attn: ACH Coordinator- Fis 1514 Mail Service Center Raleigh, North Carolina 270	rtation								

Questions

