

# Off Site Sale Permit Application



**Jesse White**  
Secretary of State  
State of Illinois

<b>FOR OFFICE USE ONLY</b>	LICENSE YEAR ENDING DECEMBER 31, _____
DRS # _____	CURRENT DL # _____

Type or Print Firm's Legal Name			
Business Address			
City or Town	<b>IL</b>	ZIP Code	County
Retailers Occ. Tax Number	Business Telephone		
Indicate the makes of vehicles sold or manufactured:			
TYPE OF BUSINESS ENTITY: <input type="checkbox"/> Proprietorship <input type="checkbox"/> Trust <input type="checkbox"/> Other <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation			

Attach a copy of the written contract or letter from the sponsor stating the dates and location of the Off Site Sale

## Off Site Sale Information

Name of the Off Site Sale	Date(s) of Off Site Sale (SHALL NOT EXCEED 7 DAYS)	Address of Off Site Sale
FEE FOR PERMIT IS \$25.00                                      Type of Remittance: <input type="checkbox"/> draft <input type="checkbox"/> check <input type="checkbox"/> money order # _____		
<b>I HEREBY ATTEST AND DULY VERIFY THAT ALL OF THE INFORMATION CONTAINED IN THIS APPLICATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND THAT THE LOCATION OF THE OFF SITE SALE IS WITHIN THE RELEVANT MARKET AREA OF MY ESTABLISHED OR ADDITIONAL PLACE OF BUSINESS.</b>		
_____ Written Signature of Authorized Person		_____ Date

