



**State of Illinois
Resident Car Rental Limited License Application**

Illinois Department of Insurance
320 W. Washington Street
Springfield, IL 62767-0001

Important Notice: Disclosure of this information is **required** under the Illinois Revised Statutes' insurance laws. Failure to provide this information will result in this form not being processed. This form has been approved by the Forms Management Center.

This application must be typed.		
Fee Requirement: Attach a check or money order payable for \$180 for a 2 year license , payable to the Director of Insurance .		
Name of Applicant	FEIN #	
Business Address (number, street)	Telephone #	
City, State, Zip Code	E-mail address	
Check one: <input type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Limited Liability Company		
THE FOLLOWING QUESTIONS MUST BE ANSWERED:		
1. Does the car rental company applying for this limited license offer car rental franchises?	Yes <input type="checkbox"/> No <input type="checkbox"/>	
2. Is the applicant a franchise of a car rental company?	Yes <input type="checkbox"/> No <input type="checkbox"/>	
3. Has the applicant, officer or director been convicted of a felony? If "yes," attach certified copies of the indictment, judgement and sentencing order.	Yes <input type="checkbox"/> No <input type="checkbox"/>	
4. Has the firm or any officer or director been refused a license to act as an insurance agent, broker, producer or solicitor, or has a license to act as such ever been denied, suspended, revoked or surrendered for disciplinary reasons in any state either as an individual or as a member of a firm? If "yes," attach a copy of the order and other applicable documents.	Yes <input type="checkbox"/> No <input type="checkbox"/>	
5. Is the applicant a person in the business of providing primarily private passenger vehicles to the public under a rental agreement or a period not to exceed 30 days?	Yes <input type="checkbox"/> No <input type="checkbox"/>	
<p>❖❖❖ Declaration ❖❖❖</p> <p>I, the undersigned, declare under penalties of revocation or refusal of license that the statements made in this application are true, correct and complete to the best of my knowledge and belief.</p>		
_____	_____	_____
Print Name and Title	Signature	Date

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