

# DEALER CERTIFICATION VEHICLE INFORMATION



JESSE WHITE  
SECRETARY OF STATE  
STATE OF ILLINOIS

## VEHICLE INFORMATION

Name of Owner(s)	(1) Last	First	Middle Initial
	(2) Last	First	Middle Initial
Address of Owner			
City		State	ZIP Code

I hereby certify and affirm that I have made a physical inspection of the vehicle and the information below is true and correct.

### Vehicle Description

Year	Make	Model	
Body Style		Cyl.	H.P.
Vehicle Identification Number			

### For Second Stage Vehicle Use Only

Year	Make	Model	Body Style
Vehicle Identification Number			

## CERTIFICATION INFORMATION

Type or Print Name of Vehicle Dealership		
Address		
City	State	ZIP Code

Dealer (or Authorized Representative) making inspection:

\_\_\_\_\_  
Signature