



OFFICE OF THE SECRETARY OF STATE

VEHICLE SERVICES DEPARTMENT
COMMERCIAL & FARM TRUCK DIVISION
501 S. SECOND ST.
RM. 300 HOWLETT BUILDING
SPRINGFIELD, ILLINOIS 62756

JESSE WHITE
SECRETARY OF STATE

Application for Identifying Number
Nurse Tank - Fertilizer Trailer

ASSIGNED NUMBER ISSUED TO TRAILER/CARRIAGE UNIT - NOT TANK

Form with fields: Applicant Name (Company or Last, First, MI), Applicant Address, City, State (IL), Zip Code, County, Contact Name, Phone Number(s), Quantity of ID #'s Requested, I/We have personally checked each trailer/carrriage unit and have found no manufacturer's numbers stamped, engraved, etched or affixed to the unit(s), Initials

For the purposes of registration only as an implement of husbandry as defined in 625 ILCS 5/1-130, and exempted from titling requirements as stated in 625 ILCS 5/3-102, but requiring registration as defined in 625 ILCS 5/3-809 (a), I/We hereby apply for a unique identifying number(s) for Nurse Tank(s)- Fertilizer Trailers, and request the Secretary of State to issue such in accordance with the Powers of the Secretary of State as stated in 625 ILCS 5/3-209 (b) 2.

I/We further affirm that this identification number is being requested for registration purposes only and no certificate of title exists at this time or will be applied for or obtained while in my/our possession using this identification number. Should any title document be found, I/We will immediately correct the registration to use the identification number provided thereon. I/We understand that subsequent title documentation derived from any bona-fide manufacturer information is at my/our option.

I/We further affirm that legal ownership and/or possession falls to the above named applicant and that the Secretary of State shall be held harmless regarding ownership or possession rights once this identification number is issued and affixed to the vehicle described upon the registration application.

I/We further affirm that this identification number(s) will be permanently affixed to the chassis or carriage portion of the unit(s) in a manner chosen by the applicant. Tank manufacturer's information or tank Identification numbers shall not be used at any time to identify this vehicle for registration purposes.

My signature and initials, shown above, shall constitute a legal and binding agreement for the purpose stated therein. ALL OF THIS I/WE AFFIRM TO BE TRUE AND CORRECT UNDER PENALTY OF PERJURY!

Signature _____ Date _____ Title _____

This affirmation may NOT be used for any dual registered units from an out of state applicant.

Form with fields: Number(s) Assigned, Date Stamp and Auditor, Approved by