





ILLINOIS SECRETARY OF STATE – APPLICATION FOR VEHICLE TRANSACTION(S)

Application cannot be accepted with alterations (changes) or white-out.

1. Type of transaction(s):		2. Current Plate Number	
<input type="checkbox"/> Title and Transfer <input type="checkbox"/> Title and Registration <input checked="" type="checkbox"/> Title Only <input type="checkbox"/> Duplicate Title <input type="checkbox"/> Corrected Title <input type="checkbox"/> Salvage Certificate <input type="checkbox"/> Junking Certificate <input type="checkbox"/> Plates Only <input type="checkbox"/> Sticker Only <input type="checkbox"/> Transfer Only <input type="checkbox"/> Corrected ID Card <input type="checkbox"/> Duplicate ID Card <input type="checkbox"/> Set of Plates Replacement <input type="checkbox"/> Sticker Replacement <input type="checkbox"/> Reclass of License Plates <input type="checkbox"/> Resale of License Plates <input type="checkbox"/> Other:		3. Plate Type Requested	
		4. Exp. Month Year	
		5. OWNER INFORMATION	
		First Last Middle SPENCER RENFRO W First Last Middle	
Residence/Business Street Address 127 DUFFS LANE		STATE ZIP IL 62049	
City		6. Owner 1 DL/FEIN #	
HILLSBORO		Owner 2 DL/FEIN #	
6026655051/			
7. VEHICLE INFORMATION			
Vehicle Identification Number (VIN) 2G1FP22K9X2134314		VIN Second Stage Info.	
8. Purchase Date New <input type="checkbox"/> Used <input checked="" type="checkbox"/> Month Day Year Year Make Model Body Style Color 06/24/2020 1999 CHEVROLET CAMARO COUPE BLK / BLK			
9. Current Odometer Reading (No Tenths) 000MNR		<input type="checkbox"/> Actual <input type="checkbox"/> Not Actual <input type="checkbox"/> In Excess of Mechanical Limits <input checked="" type="checkbox"/> 10 yrs. or older (mileage not required)	
10. Surrender Title Number and State #20269694014 State: IL		11. File Number	
12. Unit Number			
13. MAIL TITLE TO (IF DIFFERENT THAN ABOVE)		14. VEHICLE INSURANCE INFORMATION (TRAILERS EXEMPT)	
Name		Insurance Company Name (Do not list agent)	
Street Address		Policy Number	
City State ZIP		Expiration Date	
15. FIRST LIENHOLDER		16. SECOND LIENHOLDER	
Name		Name	
Street Address		Street Address	
City State ZIP		City State ZIP	
17. TRANSFER INFORMATION		18. SELLER'S INFORMATION (INDIVIDUAL OR DEALERSHIP)	
Year Make/Model		Name Dealer # SPENCER W RENFRO SOS	
VIN		Street Address 127 DUFFS LANE	
19. BENEFICIARY		City State ZIP HILLSBORO IL 6249	
Street Address		20. REASON FOR REPLACEMENT PLATES/STICKER	
City State/Country ZIP		<input type="checkbox"/> Lost <input type="checkbox"/> Stolen <input type="checkbox"/> Destroyed <input type="checkbox"/> Requesting a Different Number <input type="checkbox"/> Respacing	
21. REASON(S) FOR CORRECTED OR DUPLICATE TITLE		24. AUDITOR'S USE ONLY	
State all reasons for corrections or duplication.		TRP NUMBER Tax Form Number \$150.00 PV 145211736	
22. Daytime Phone Number (optional) 217-313-4416		Circle Quarter: 1st 2nd 3rd 4th	
23. Signature(s)			
1. SIGN HERE			
2. SIGN HERE			
Your signature on the application authorizes the Secretary of State to lower the amount of your check if the fee submitted is greater than the fee required for mail-in transactions. I/we hereby affirm that the information is true and correct and, when applicable, will abide by the Mandatory Insurance Law requiring liability insurance throughout the registration period. If applying for a title for a motor vehicle nine years old or newer, I/we also acknowledge awareness of the odometer certification made by the seller.		03/07/2022	
OFFICE USE ONLY		Verified by CRT <input type="checkbox"/> I.D. <input type="checkbox"/> REMITTER/DRIVER SERVICES FACILITY STAMP:	
6026655051			
Control #			
CUSTOMER RECEIPT		Date: _____	





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5. OWNER INFORMATION			
First		Last	Middle
SPENCER		RENFRO	W
First		Last	Middle
Residence/Business Street Address 127 DUFFS LANE			
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Vehicle Identification Number (VIN)		VIN Second Stage Info.	
2G1FP22K9X2134314			
8. Purchase Date 06/24/2020 Month Day Year	New <input type="checkbox"/> Used <input checked="" type="checkbox"/>	Year	Make
		1999	CHEVROLET
		Model	Body Style
		CAMARO	COUPE
		Color	BLK / BLK
9. Current Odometer Reading (No Tenths) 000MNR	<input type="checkbox"/> Actual <input type="checkbox"/> In Excess of Mechanical Limits <input checked="" type="checkbox"/> 10 yrs. or older (mileage not required)	<input type="checkbox"/> Rebuilt <input type="checkbox"/> Flood <input type="checkbox"/> Other Branded Title State	<input type="checkbox"/> MCY C.C. <input type="checkbox"/> Mobile Home Sq. Ft. <input type="checkbox"/> Rental <input type="checkbox"/> Leased
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17. TRANSFER INFORMATION		18. SELLER'S INFORMATION (INDIVIDUAL OR DEALERSHIP)	
Year	Make/Model	Name	Dealer #
		SPENCER W RENFRO	SOS
VIN		Street Address	
		127 DUFFS LANE	
19. BENEFICIARY		City	State ZIP
Name		HILLSBORO	IL 6249
Street Address		20. REASON FOR REPLACEMENT PLATES/STICKER	
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6026655051			
CUSTOMER RECEIPT			
Date: _____			
Control #			



RUT-50 Private Party Vehicle Use Tax Transaction

REV 06 F
RC CA ED

Step 1: Complete the purchaser's information (R-02/19)

1 Name: SPENCER W RENFRO 4 Daytime phone: (217) 313 - 4416

2 Co-owner(s): 5 ☐ SSN or ☐ FEIN:

3 Street address: 127 DUFFS LANE 6 Driver's license no:

City, State, ZIP: HILLSBORO IL 62049 7 County: MONTGOMERY

Step 2: Complete the seller's information

1 Name: SPENCER W RENFRO 3 Address: 127 DUFFS LANE

2 Daytime phone: () - HILLSBORO, IL 6249

Step 3: Describe the vehicle - Must complete Line 1 even if no tax is due

1 Purchase price: 1.00 00 4 Year: 1999 Make: CHEVROLET

2 Odometer reading: 000MNR 5 Model: CAMARO

3 Vehicle identification number (VIN): 2G1FP22K9X2134314

Step 4: Mark the ONE box that best describes your transaction if your motor vehicle qualifies as exempt from tax, an exception, or a motorcycle or ATV - If Step 4 does not apply, skip to Step 5.

1 Exemption - Write \$0 on Step 6, Lines 1, 2 and 3

- 1a Organization with tax-exempt status - Provide exemption number: E 1a ☐
- 1b Farm implement or ready-mix concrete truck 1b ☐
- 1c Rolling stock - Provide certificate of authority number: 1c ☐
- 1d You were an out-of-state resident; item used outside IL at least 3 months. Purchase date: 06 - 24 - 20 1d ☐
- 1e Estate gift for surviving spouse 1e ☐

2 Exception - Write \$15 on Step 6, Line 1. See RUT-6, Form RUT-50 Reference Guide for Step 6, Lines 2 and 3.

- 2a Estate gift for beneficiary (not surviving spouse) 2a ☐
- 2b Business reorganization 2b ☐
- 2c Transferred or purchased from spouse, parent, brother, sister, or child. Circle one. 2c ☒

3 Motorcycle or ATV - Write \$25 on Step 6, Line 1. See RUT-6, Form RUT-50 Reference Guide for Step 6, Lines 2 and 3. 3 ☐

Step 5: Mark Table A or Table B for your Illinois Private Party Vehicle Use Tax - If you marked an item in Step 4, skip to Step 6.

Table A or B - See instructions to determine tax amount due and write it on Step 6, Line 1.

If Step 3, Line 1 is less than \$15,000 use Table A for your Illinois tax due. See instructions.

Table A ☐

If Step 3, Line 1 is \$15,000 or more use Table B for your Illinois tax due. See instructions.

Table B ☐

Step 6: Figure your tax

1 Illinois Private Party Vehicle Use Tax due.	1	<u>15</u>	<u>00</u>
2 Municipal private party vehicle use tax due. See RUT-6, Form RUT-50 Reference Guide.	2	<u>0</u>	<u>00</u>
3 County private party vehicle use tax due. See RUT-6, Form RUT-50 Reference Guide.	3	<u>0</u>	<u>00</u>
4 Add Lines 1, 2, and 3.	4	<u>15</u>	<u>00</u>
5 Credit for tax previously paid to the state of <u>IL</u> .	5	<u>0</u>	<u>00</u>
6 Tax due. Subtract Line 5 from Line 4. This is your total tax due.	6	<u>15</u>	<u>00</u>

Step 7: Sign here

Under penalties of perjury, I state that I have examined this return and, to the best of my knowledge, it is true, correct, and complete. I understand that the penalty for willfully filing a false return shall be a fine not to exceed \$1,000 or imprisonment in a penal institution, other than the penitentiary not to exceed one year, or both fine and imprisonment.

Your signature _____ Date _____ Co-owner's signature _____ Date _____

Remittance agent number (if applicable) _____

This form is authorized as outlined under the tax or fee Act imposing the tax or fee for which this form is filed. Disclosure of this information is required. Failure to provide information may result in this form not being processed and may result in a penalty.

Do not write below this line.

Date received by Illinois state government

☐ Verified purchase price with bill of sale



RUT-50 Private Party Vehicle Use Tax Transaction

REV 06 F
RC CA ED

Step 1: Complete the purchaser's information (R-02/19)

1 Name: SPENCER W RENFRO 4 Daytime phone: (217) 313 - 4416

2 Co-owner(s): 5 ☐ SSN or ☐ FEIN:

3 Street address: 127 DUFFS LANE 6 Driver's license no:

City, State, ZIP: HILLSBORO IL 62049 7 County: MONTGOMERY

Step 2: Complete the seller's information

1 Name: SPENCER W RENFRO 3 Address: 127 DUFFS LANE

2 Daytime phone: () - HILLSBORO, IL 6249

Step 3: Describe the vehicle - Must complete Line 1 even if no tax is due

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Table A ☐

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Table B ☐

Step 6: Figure your tax

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4 Add Lines 1, 2, and 3.	4	<u>15</u>	<u>00</u>
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