



## Secretary of State VEHICLE LICENSE PLATES REVOCATION REQUEST

**This space for use by  
Secretary of State**

**Secretary of State  
Vehicle Services Department  
Special Plates Division  
501 S. Second St., Rm. 520  
Springfield, IL 62756  
Fax (217) 785-1038  
www.cyberdriveillinois.com**

Please print or type

License Plate Number	Vehicle Identification Number	Vehicle Make	Vehicle Year
Last Name	First Name	Middle Initial	
Last Name	First Name	Middle Initial	
Address	City	State	ZIP Code
Phone Number(s)	Driver's License Number(s)		

**Reason for License Plate Revocation (check one):**

- |   |   |
|---|---|
| <input type="checkbox"/> Vehicle sold with license plates attached                      | <input type="checkbox"/> Registered owner moved out of state            |
| <input type="checkbox"/> License plates lost/missing/destroyed                          | <input type="checkbox"/> Vehicle towed/junked with license plates       |
| <input type="checkbox"/> Registered owner deceased (copy of death certificate required) | <input type="checkbox"/> Vehicle donated to charity with license plates |
| <input type="checkbox"/> Divorce (single owner only, copy of divorce decree required)   | <input type="checkbox"/> Non-possession of license plates               |
| <input type="checkbox"/> License plates stolen (copy of police report required)         | <input type="checkbox"/> Vehicle repossessed with license plates        |

Each request must include the correct owner(s) and vehicle information, reason for revocation and signature(s) of the registered/titled owner(s). Failure to include this information will prevent the request from being processed. A leased vehicle record must include the lessor's signature. Revocation of the license plate does not remove your name from that particular vehicle record.

Under penalties as provided by law pursuant to Section 1-109 of the Code of Civil Procedure, the undersigned certifies that the statements set forth in this instrument are true and correct, except as to matters therein stated to be on information and belief as to such matters the undersigned certifies as foresaid that he verily believes the same to be true. (735 ILCS 5/1-109)

\_\_\_\_\_  
Registered Owner's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Registered Owner's Signature

\_\_\_\_\_  
Date