



RMP-14 Designation and Appointment of Agent

Note: If you need additional information you may contact us weekdays between 8:00 a.m. and 4:30 p.m. at **217 782-2291**.

Step 1: Complete the designation information

1 Appointed Agent's Name _____

2 Mailing address: _____
Number and street (required)

IL

City _____ State _____ Zip _____

Step 2: Sign below (Licensee)

_____ is hereby designated as Agent to accept service of legal
Appointed Agent (as identified in Step 1, Line 1)
process directed for service upon the undersigned as well as Agent to accept legal notices of all character.

Licensee (Owner or Business name) License number (if known)

Name of Owner, partner or authorized officer of Licensee (please print)

Signature (Owner, partner or authorized officer of Licensee) Date ____ / ____ / ____

Step 3: Provide Acceptance Signature (Agent)

I, _____, hereby accept appointment as Agent for the purpose of
Appointed Agent (as identified in Step 1, Line 1)
accepting legal notices of all character within the State of Illinois for _____
Licensee (as identified in Step 2.)

Appointed Agent's Signature Date signed ____ / ____ / ____

Appointment effective date

Step 4: Mail Form RMP-14 to:



ILLINOIS DEPARTMENT OF REVENUE
MOTOR FUEL TAX
PO BOX 19477
SPRINGFIELD IL 62794-9477