



Read this information first

Form REG-3-D must be filled out in its entirety to complete your registration or to change information previously provided for a registered business. Signature stamps are not acceptable. You can fax Form REG-3-D to us at 217 785-6013. If you prefer, mail your completed Form REG-3-D to the Central Registration Division, Illinois Department of Revenue, PO Box 19030, Springfield Illinois 62794-9030.

Step 1: Provide your business or organization information

Internet applicants must provide the application code. If you are changing information for a previously registered business, tell us your Illinois Business Tax number (IBT no.).

Form fields for Step 1: Name of your business, Street address of your business, City, State, ZIP, Daytime telephone, Application code, and Illinois Business Tax number (IBT no.).

Step 2: Sign here

Under penalties of perjury, I certify I have examined all the information provided for my registration or renewal application and, to the best of my knowledge, it is true, correct, and complete.

Signature and Date fields for Step 2, along with Printed name, Title, and Address fields.

Step 3: Tell us the person(s) responsible for filing returns and paying taxes and fees due

The tax responsibilities listed below require the person who will be responsible for filing tax returns and paying the tax or fee due to complete the following information and sign. If you need to identify more, attach additional sheets using a similar format.

Form fields for Step 3: Name, Address, Daytime telephone, and Social Security number (SSN).

Check all tax types for which you are responsible for filing returns and paying the tax or fee due.

- Checkboxes for: Withholding Income Tax, Motor Vehicle Renting Tax, Motor Fuel Tax, Sales, Service & Use Taxes, Hotel Operators' Tax, Environmental Impact Fee & Underground Storage Tax.

Under penalties of perjury, I state that I am personally responsible for filing and paying the taxes and fees listed above.

Signature and Date fields for the first person in Step 3.

Form fields for Step 3: Name, Address, Daytime telephone, and Social Security number (SSN).

Check all tax types for which you are responsible for filing returns and paying the tax or fee due.

- Checkboxes for: Withholding Income Tax, Motor Vehicle Renting Tax, Motor Fuel Tax, Sales, Service & Use Taxes, Hotel Operators' Tax, Environmental Impact Fee & Underground Storage Tax.

Under penalties of perjury, I state that I am personally responsible for filing and paying the taxes and fees listed above.

Signature and Date fields for the second person in Step 3.

This form is authorized by 20 ILCS 687/6-1 et seq.; 35 ILCS 5/1 et seq., 105/1 et seq., 110/1 et seq., 115/1 et seq., 120/1 et seq., 130/1 et seq., 135/1 et seq., 143/10-1 et seq., 145 et seq., 155/1 et seq., 173/5-1 et seq., 505/1 et seq., 510/1 et seq., 615/1 et seq., 620/1 et seq., 625/1 et seq., 630/1 et seq.; 35 ILCS 635/1 et seq., 636/5-1 et seq., 640/2-1 et seq.; 230 ILCS 20/1 et seq., 25/1 et seq., 30/1 et seq.; 235 ILCS 5/1-1 et seq.; 305 ILCS 20/5 et seq.; 415 ILCS 125/301 et seq. Disclosure of this information may be REQUIRED. Failure to provide information could result in this form not being processed and possible penalties. This form has been approved by the Forms Management Center. IL-492-0001