



Notification of Conviction to the Commission

PART 1A. CONVICTED PERSON'S INFORMATION (Employee, Intern, Recovery Manager)

| | | | |
|---|--------|---------------|------------------------|
| INSTRUCTIONS: | | | |
| This section must be completed if a Recovery Manager holding a Class "MR" License, Recovery Employee holding a Class "E" Recovery Permit or a Recovery Intern holding a Class "EE" Recovery Permit was convicted of any crime other than a minor traffic violation since the license or permit was last issued. | | | |
| Full Legal Name of Convicted Person: | | | License or Permit No.: |
| Residence Address: | | Phone Number: | |
| City: | State: | Zip Code: | Email: |

PART 1B. CONVICTED PERSON'S INFORMATION (Repossession Agency)

| | | | |
|--|--------|---------------|------------------------|
| INSTRUCTIONS: | | | |
| This section must be completed if a sole proprietor; or any partner, any member or any corporate officer of a repossession agency holding a Class "R" License; or a business entity holding a Class "R" License was convicted of any crime other than a minor traffic violation since the Class "R" License was last issued. | | | |
| Full Legal Name of Convicted Person or Entity: | | | |
| Affiliation with Repossession Agency holding Class "R" License: <input type="checkbox"/> Partner <input type="checkbox"/> Member <input type="checkbox"/> Corporate Officer <input type="checkbox"/> Sole Proprietor | | | |
| <input type="checkbox"/> Repossession Agency holding Class "R" License | | | |
| Full Legal Name or Trade Name of Class "R" License holder: | | | Class "R" License No.: |
| Business Address: | | Phone Number: | |
| City: | State: | Zip Code: | Email: |

PART 2. CONVICTION INFORMATION

| | | | |
|--|---------------------|--|------------------|
| INSTRUCTIONS: | | | |
| List below the criminal offense(s) for which the person identified in Part 1A and/or Part 1B was convicted since the license or permit was last issued. <u>Complete a separate block for each offense.</u> Exclude convictions for minor traffic violations. Use additional pages of this form as necessary. | | | |
| Offense Description: | | | Case Docket No.: |
| Arresting Agency: | | Approximate Date of Arrest: | |
| Sentencing Court: | Date of Conviction: | Guilty Plea entered? <input type="checkbox"/> NO <input type="checkbox"/> YES | |
| Sentence or Penalty Imposed: | | | |
| <input type="checkbox"/> imprisonment (Years____, Months____, Days____) <input type="checkbox"/> conditional discharge (Years____, Months____, Days____) | | | |
| <input type="checkbox"/> probation (Years____, Months____, Days____) <input type="checkbox"/> court costs, fees, restitution, fines \$_____ | | | |



Notification of Conviction to the Commission

PART 3. VERIFICATION

The undersigned certifies that all information presented in this notification is true, correct, complete and that copies of any documents presented to the Commission as part of this notification are genuine. This certification is made under oath and under penalty of perjury. It is understood that knowingly making a false statement on this notification will result in the suspension or revocation of the license or permit.

SIGNATURE

Name (Printed):

Signature:

Date:

APPLICATION INSTRUCTIONS

1. The Notification of Conviction to the Commission form, or photocopies of this form, must be used. Incomplete or incorrect notifications shall be refused or rejected by the Commission.
2. No fee is required to file this form.
3. Submit this form to:
 - Illinois Commerce Commission
 - ATTN: Processing and Information
 - 527 East Capitol Avenue
 - Springfield, Illinois 62701
4. For persons who have been convicted that fall into categories of persons who must complete Part 1A and Part 1B, complete both parts.
5. For Part 1B, the checkbox "Repossession Agency holding Class "R" License" refers to business entities that have been convicted. Sole proprietors must use the "Sole Proprietor" checkbox.
6. Verification:
 - a. If a **Recovery Manager** holding a Class "MR" License is identified as the convicted person in Part 1A, then the Recovery Manager holding the Class "MR" License must sign this notification.
 - b. If a **Recovery Employee** holding a Class "E" Recovery Permit is identified as the convicted person in Part 1A, then the Recovery Employee holding the Class "E" Recovery Permit must sign this notification.
 - c. If a **Recovery Intern** holding a Class "EE" Recovery Permit is identified as the convicted person in Part 1A, then the Recovery Intern holding the Class "EE" Recovery Permit must sign this notification.
 - d. If a **Repossession Agency** holding a Class "R" License is identified as the convicted business entity in Part 1B, then the verification must be made by a partner, member or corporate officer on behalf of the Class "R" License holder.
 - e. If a **partner** of a repossession agency holding a Class "R" License that is a partnership is identified as the convicted person in Part 1B, then the verification must be made by the convicted partner.
 - f. If a **member** of a repossession agency holding a Class "R" License that is a limited liability company is identified as the convicted person in Part 1B, then the verification must be made by the convicted member.
 - g. If a **corporate officer** of a repossession agency holding a Class "R" License that is a corporation is identified as the convicted person in Part 1B, then the verification must be made by the convicted corporate officer.
 - h. If the **sole proprietor** of a repossession agency holding a Class "R" License that is a sole proprietorship is identified as the convicted person in Part 1B, then the verification must be made by the convicted sole proprietor.
7. **This form must be received by the Commission no later than 7 days after the entry of judgment of conviction. Failure to comply with the provisions of 92 Ill. Adm. Code 1480.418 shall result in disciplinary action.**