

ILLINOIS ENVIRONMENTAL PROTECTION AGENCY
E-85 Fuel Rebate Application Form

Applicant Information

Name _____ (Last) (First)	Phone No. _____ (Area Code)
Address _____ (Street) (City) (State) (Zip)	
Your Email address _____	

For Individual Applicants Only

Social Security Number _____ - _____ - _____

For Businesses/Governments/Organizations

Company Name _____	# Vehicles in fleet _____
Federal Employer Ident. Number (FEIN) _____	# Employees _____

Vehicle Information

Make _____	Model _____	Model Year _____
Date vehicle was purchased _____	VIN # _____	
License Plate # _____	State _____	

Fuel Information

Number of gallons of E-85 purchased during the past year for this vehicle _____	
Number of miles this vehicle traveled from January to December of this year _____	

I certify that the information on this application is true and accurate to the best of my knowledge.

Applicant Signature _____	Date _____
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Mail this application and supporting documentation as requested on the instructions to the following address:

Illinois Environmental Protection Agency
Alternate Fuels Rebate Program #6
P.O. Box 19276
Springfield, Illinois 62794-9276

If you have any questions, call the Illinois EPA at (217) 557-1441.