



TENNESSEE DEPARTMENT OF REVENUE
VEHICLE TAXPAYER SERVICES DIVISION
MULTI-PURPOSE APPLICATION

OFFICIAL VEHICLE REGISTRATION

278013

NEW OR CURRENT TITLE NUMBER 92855385		TRANSACTION CODE N01	REGISTRATION ONLY NUMBER	
OWNER INFORMATION *LEGAL STATUS: 1 (AND) 2 (OR) 1 LAST NAME WELLS FARGO EQUIPMENT FINANCE INC		ENTER NAME CODE IN BOX 1 (SAME) 2 (DIFFERENT) 3 (MULTIPLE LAST NAME) 4 (COMPANY) 5 (OVER 78 CHARACTERS) FIRST NAME 3100 WEST END AVE 530		MIDDLE INITIAL 5
ADDRESS 1 (MAILING) 733 MARQUETTE AVE 700		ADDRESS 2 (PHYSICAL) 3100 WEST END AVE 530		
CITY MINNEAPOLIS	STATE MN	ZIP CODE 55402	CITY NASHVILLE	STATE TN
CITY OF RESIDENCE/PRINCIPAL BUS OR INCORP LOCATION DAVIDSON 019		PURCHASE DATE 10/08/2013	TELEPHONE # 6153395218	*INSURANCE POLICY #
VEHICLE INFORMATION VIN 1GRAP0628ED450817		MAKE GRDN	MODEL CCC	YEAR 2014
SURRENDERED TITLE # MSO		STATE TN	PREVIOUS STATES TITLED	VEHICLE USE F
COLOR CODE (enter appropriate code) UPPER 9		MOBILE HOME LGTH 9	WIDTH 9	# AXLES 9
GROSS VEHICLE WEIGHT		VEHICLE TYPE S		CURRENT MILEAGE
PLATE INFORMATION * (required for Title and Registration and Registration Only Transactions) SEE REVERSE SIDE FOR COMPLETE INSTRUCTIONS		CLASS CODE/ISSUE YR(2) U502728		EXPIRATION DATE (1)(2)(3) PERMANENT
TEMP OPERATOR PERMIT #(3)		# OF SEATS(5)	ZONE(COUNTY NAME)(6)	USDOT / REGISTRANT #(7)
LIEN INFORMATION (if lien present)		LIEN CODE		FIRST LIENHOLDER
LIEN CODE		CITY		STATE
STREET		CITY		STATE
LIEN CODE		CITY		STATE
STREET		CITY		STATE
LESSEE / REGISTRANT INFORMATION (OWNER OF PLATE)		LEGAL STATUS		NAME CODE
NAME		CITY		STATE
ADDRESS		CITY		STATE
VEHICLE COST / TAX INFORMATION (required for Title & Registration Transactions)		TAXABLE AMOUNT		SALE TAX PAID
SALE PRICE		TRADE IN ALLOWANCE		DEALER #
DEALER NAME		DEALER ADDRESS		DEALER #
*Required for Duplicate Title - T.C.A. 55-3-115 (submit legible or altered Certificate of Title)		RTND DUE TO NON DELIVERY		ALTERED
LOST		STOLEN		MUTILATED
Under penalties of perjury, I hereby certify all information provided is true and correct to the best of my knowledge, and acknowledge that it is not the responsibility of the Motor Vehicle Division or its assignees to determine the accuracy of the information provided by me or on my behalf.		POWER OF ATTORNEY/AUTHORIZED SIGNATURE (IF APPLICABLE)		DATE
SIGNATURE OF CERTIFIER/OWNER		POWER OF ATTORNEY/AUTHORIZED SIGNATURE (IF APPLICABLE)		DATE
INVOICE NUMBER 13284 @		COUNTY NAME DAVIDSON	CO NUMBER 19	DATE OF APPLICATION 10/11/2013
OFFICE USE ONLY REGISTRATION FEE 79.75		EMISSION: TRAILER		LEASE FEE
COMPUTATION OF SALES TAX USE TAX		SALES OR USE TAX		SA TAX
LOCAL TAX		ADDITIONAL TAX		COLLECTED IN STATE OF
ID / RESIDENCY VERIFICATION		CITY WHEEL TAX		CITY WHEEL TAX
TOTAL FEES COLLECTED 97.25		CHANGE: 0.00		RDA-692