



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



STATE

279594

NEW OR CURRENT TITLE NUMBER <b>93169347</b>		TRANSACTION CODE <b>N01</b>	REGISTRATION ONLY NUMBER	
OWNER INFORMATION (LEGAL STATUS: 1 (AND) 2 (OR) ) ENTER NAME CODE IN BOX 1 (SAME) 2 (DIFFERENT) 3 (MULTIPLE LAST NAMES) 4 (COMPANY) (OVER 28 CHARACTERS) <b>5</b> MAO <input checked="" type="checkbox"/> ILU <input checked="" type="checkbox"/>				
LAST NAME <b>WELLS FARGO EQUIPMENT FINANCE INC</b>		FIRST NAME <b>WELLS FARGO EQUIPMENT FINANCE INC</b>	MIDDLE INITIAL	
ADDRESS 1 (MAILING) <b>733 MARQUETTE AVE 700</b>		ADDRESS 2 (PHYSICAL) <b>3100 WEST END AVE</b>		
CITY <b>MINNEAPOLIS</b>	STATE <b>MN</b>	ZIP CODE <b>55402</b>	CITY <b>NASHVILLE</b>	STATE <b>TN</b>
CITY OF RESIDENCE/PRINCIPAL BUS OR INCORP LOCATION <b>DAVIDSON 019</b>		PURCHASE DATE <b>04/07/2014</b>	*LEASED <input checked="" type="checkbox"/> *SERVICE OPTIONS <input checked="" type="checkbox"/> <small>SEE REVERSE SIDE FOR INSTRUCTIONS</small>	TELEPHONE # <b>37203</b>
VEHICLE INFORMATION				
VIN <b>1GRAP0629FD456045</b>	MAKE <b>GRDN</b>	MODEL <b>CCC</b>	YEAR <b>2015</b>	BODY <b>SE</b>
TITLE BRAND - translation <b>NEW</b>		CODE <b>N</b>	TYPE OF FUEL - translation <b>9</b>	
SURRENDERED TITLE # <b>MSO</b>	STATE <b>TN</b>	PREVIOUS STATES TITLED	VEHICLE USE <b>F</b>	VEHICLE TYPE <b>S</b>
COLOR CODE (enter appropriate code) UPPER <b>9</b>	MOBILE HOME LGTH <b>9</b>	WIDTH <b>9</b>	# AXLES <b>9</b>	GROSS VEHICLE WEIGHT <b>9</b>
*VEHICLE TRADE-IN DESCRIPTION <b>9</b>				
COMPANY VEHICLE # <b>9</b>				
PLATE INFORMATION (required for Title and Registration and Registration Only Transactions) SEE REVERSE SIDE FOR COMPLETE INSTRUCTIONS				
PLATE # (1) <b>U515186</b>	CLASS CODE/ISSUE YR (1)(2) <b>8020/1994</b>	VALIDATION # (1)	COUNTY STICKER # (1)	CITY STICKER # (1)(2)
*PLATE # (TRADE IN) (2)		CLASS CODE/ISSUE YR (2)		EXPIRATION DATE (1)(2)(3) <b>PERMANENT</b>
TDR STICKER # (4)	TEMP OPERATOR PERMIT # (3)	# OF SEATS (5)	ZONE (COUNTY NAME) (6)	USDOT / REGISTRANT # (7)
MOTOR CARRIER # (8)				
LIEN INFORMATION (if present)				
LIEN CODE	FIRST LIENHOLDER			LIEN DATE
STREET				
CITY				
STATE				
ZIP CODE				
LIEN CODE	SECOND LIENHOLDER			LIEN DATE
STREET				
CITY				
STATE				
ZIP CODE				
*LESSEE / REGISTRANT INFORMATION (OWNER OF PLATE)				
LEGAL STATUS <input type="checkbox"/> NAME CODE <input type="checkbox"/> MAO <input type="checkbox"/> ILU <input type="checkbox"/>				
NAME				
ADDRESS				
CITY				
STATE				
ZIP CODE				
VEHICLE COST / TAX INFORMATION (required for Title & Registration Transactions)				
SALE PRICE	TRADE IN ALLOWANCE	TAXABLE AMOUNT	SALE TAX PAID	*TAX EXEMPTION REASON / SALES TAX # <b>100551600</b>
DEALER NAME		DEALER ADDRESS	DEALER # <b>99999</b>	
*Required for Duplicate Title - T.O.A. 55-3-115 (submit original or altered Certificate of Title)				
<input type="checkbox"/> LOST	<input type="checkbox"/> STOLEN	<input type="checkbox"/> MUTILATED	<input type="checkbox"/> RTND DUE TO NON DELIVERY	<input type="checkbox"/> ALTERED
<input type="checkbox"/> ILLEGIBLE				
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.				
SIGNATURE OF CERTIFIER/OWNER		POWER OF ATTORNEY/AUTHORIZED SIGNATURE (IF APPLICABLE)		DATE <b>4/11/2014 8:57:13 AM</b>
				<b>04/11/2014</b>
INVOICE NUMBER <b>14101 @</b>				
COUNTY NAME <b>DAVIDSON</b>				
CO NUMBER <b>19</b>				
DATE OF APPLICATION <b>04/11/2014</b>				
BY AUTHORITY OF REGISTRAR OF MOTOR VEHICLES (COUNTY CLERK) <b>BRENDA WYNN</b>				
SDELK - 1				
OFFICE USE ONLY				
REGISTRATION FEE <b>79.75</b>	CREDIT	LEASE FEE	TRANS FEE	CLERK FEE
EMISSION: TRAILER		Received 04/08/2014		
ISSUANCE FEE <b>12.00</b>		TITLE FEE <b>5.50</b>		TOTAL TAX COLLECTED <b>.00</b>
COMPUTATION OF <input type="checkbox"/> SALES TAX <input type="checkbox"/> USE TAX	SALES OR USE TAX	SA TAX	LOCAL TAX	ADDITIONAL TAX
COLLECTED IN STATE OF		COUNTY WHEEL TAX		CITY WHEEL TAX
*SERVICE OPT FEE		ORGAN DONOR	POSTAGE	VER
ID / RESIDENCY VERIFICATION		*TOTAL FEES COLLECTED <b>97.25</b>		

SF-1357 Port: WK129/DR117/8020 Cash: 0.00 Check: 97.25 Check#: 204196 Credit: 0.00 Auth#: Change: 0.00