



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



STATE

ty Stickers:

FOR CURRENT TITLE NUMBER

TRANSACTION
CODE
N01

REGISTRATION ONLY NUMBER

3627863

ENTER NAME CODE IN BOX 1 (SAME) 2 (DIFFERENT) 3 (MULTIPLE LAST NAMES) 4 (COMPANY) 5 (COVER 28 CHARACTERS)
FIRST NAME MIDDLE INITIAL LAST NAME

3SE TRAILER LEASING LLC

ADDRESS 1 (MAILING)

10233 GOVERNOR LN BLVD

WILLIAMSPORT

STATE

ZIP CODE

CITY

STATE

ZIP CODE

MD

21795

TYPE OF RESIDENCE/PRINCIPAL BUS OR INCOME LOCATION

PURCHASE DATE

08/11/2014

*LEASED ☐ *SERVICE OPTIONS ☐
(SEE REVERSE SIDE FOR INSTRUCTIONS)

TELEPHONE #

240 772 5501

*PLACARD/HEARING IMPAIRED CLS/YR

*INSURANCE POLICY #

HAMILTON 033

VEHICLE INFORMATION

MAKE MODEL YEAR BODY TITLE BRAND - translation CODE TYPE OF FUEL - translation CODE
N 9

3H3V532C8FT328409

HYTR

3H3

2015

SE

NEW

UNRENDERED TITLE #

STATE

PREVIOUS STATES TITLED

VEHICLE USE

VEHICLE TYPE

CURRENT MILEAGE

ODOMETER ACTUAL (B) NOT ACTUAL (B)
INDICATOR OVER 18 YRS / 16,000 LBS (1)
(LIM CMT) IN EXCESS OF MECHANICAL LIMITS (2)

CODE

1

MSO

CA

COLOR CODE (enter appropriate code)
UPPER LOWER
O

MOBILE HOME
LOTH WIDTH

AXLES

GROSS VEHICLE WEIGHT

*VEHICLE TRADE-IN DESCRIPTION

COMPANY VEHICLE #

328409

PLATE INFORMATION (Required for Title and Registration and Registration Only Transactions) SEE REVERSE SIDE FOR COMPLETE INSTRUCTIONS

PLATE # (1)

CLASS CODE/ISSUE YR (1)(3)

VALIDATION # (1)

COUNTY STICKER # (1)

CITY STICKER # (1)(2)

*PLATE # (TRADE IN) (2)

CLASS CODE/ISSUE YR (2)

EXPIRATION DATE (1)(2)(3)

PERMANENT

U526459

8020/1994

TOR STICKER # (4)

TEMP OPERATOR PERMIT # (3)

OF SEATS (5)

ZONE (COUNTY NAME) (6)

USDOT / REGISTRANT # (7)

MOTOR CARRIER # (8)

LIEN INFORMATION (If lien present)

LIEN CODE FIRST LIENHOLDER

SUNTRUST BANK

CITY

BALTIMORE

STATE

MD

ZIP CODE

21202

STREET
120 E BALTIMORE ST 25 FL

LIEN CODE SECOND LIENHOLDER

CITY

STATE

ZIP CODE

STREET

*LESSOR / REGISTRANT INFORMATION (OWNER OF PLATE)

LEGAL STATUS

NAME CODE

MAO

ILU

NAME

CITY

STATE

ZIP CODE

ADDRESS

VEHICLE COST / TAX INFORMATION (Required for Title & Registration Transactions)

SALE PRICE

TRADE IN ALLOWANCE

TAXABLE AMOUNT

SALES TAX PAID

*TAX EXEMPTION REASON / SALES TAX #

DEALER NAME

DEALER ADDRESS

DEALER #

*Required for Duplicate Title - T.O.A. #5-3-115 (submit 11 legible or altered Certificate of Title)

☐ LOST

☐ STOLEN

☐ MUTILATED

☐ RTN'D DUE TO NON DELIVERY

☐ ALTERED

☐ ILLEGIBLE

Under penalty 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

08/19/2014

INVOICE NUMBER	COUNTY NAME	GO NUMBER	DATE OF APPLICATION	BY AUTHORITY OF REGISTRAR OF MOTOR VEHICLES (COUNTY CLERK)		
14231 @	HAMILTON	33	08/19/2014	W.F. (BILL) KNOWLES		
OFFICE USE ONLY		EMISSION: Trailer		TOTAL FEES COLLECTED		
REGISTRATION FEE	CREDIT	LEASE FEE	TRANS FEE	CLERK FEE	ISSUANCE FEE	TITLE FEE
79.75					12.00	6.50
COMPUTATION OF	SALES OR USE TAX	SA TAX	LOCAL TAX	ADDITIONAL TAX	COLLECTED IN STATE OF	COUNTY WHEEL TAX
☐ SALES TAX ☐ USE TAX						
*SERVICE OPT FEE	ORGAN DONOR	POSTAGE	VER	ID / RESIDENCY VERIFICATION	*TOTAL FEES COLLECTED	
					97.25	
Port: wk48/DR27/0020		Cash: 0.00	Check: 0.00	Check#:	Credit: 0.00	Auth#:
SP-1357		RCA-602		Change: 0.00		