



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



STATE

City Stickers:

NEW OR CURRENT TITLE NUMBER	TRANSACTION CODE	REGISTRATION ONLY NUMBER
93627874	N01	

OWNER INFORMATION *LEGAL STATUS (1) (AND) 2 (OR) 3 ENTER NAME CODE IN BOX 4 (SAME 2 DIFFERENT) 3 (MULTIPLE LAST NAMES) 4 (COMPANY) 5 (OVER 23 CHARACTERS)		MAO	N	LD	N
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LAST NAME	FIRST NAME	MIDDLE INITIAL
BSE TRAILER LEASING LLC		

ADDRESS 1 (MAILING)	ADDRESS 2 (PHYSICAL)
10233 GOVERNOR LN BLVD	

CITY	STATE	ZIP CODE	CITY	STATE	ZIP CODE
WILLIAMSPORT	MD	21795			

CITY OF RESIDENCE/PRINCIPAL BUS OR INCOMP LOCATION	PURCHASE DATE	*LEASED ☒ *SERVICE OPTIONS ☐	TELEPHONE #	*PLACARD/HEARING IMPAIRED CLS/YR	*INSURANCE POLICY #
HAMILTON 033	08/11/2014	REF. REVERSE SIDE FOR INSTRUCTIONS	240 772 5501		

VEHICLE INFORMATION	MAKE	MODEL	YEAR	BODY	TITLE BRAND - translation	CODE	TYPE OF FUEL - translation	CODE
VIN	HYTR	3H3	2015	SE	NEW	N		9

SURRENDERED TITLE #	STATE	PREVIOUS STATES TITLED	VEHICLE USE	VEHICLE TYPE	CURRENT MILEAGE	ODOMETER ACTUAL (0) NOT ACTUAL (8) INDICATOR OVER 10 YRS / 16,000 LBS (1) (List one) IN EXCESS OF MECHANICAL LIMITS (6)	CODE
MSO	CA		F	S			1

COLOR CODE (enter appropriate code) UPPER LOWER	MOBILE HOME LGTH WIDTH	# AXLES	GROSS VEHICLE WEIGHT	*VEHICLE TRADE-IN DESCRIPTION	COMPANY VEHICLE #
O					328416

PLATE INFORMATION (requires title and registration and registration only transactions SEE REVERSE SIDE FOR COMPLETE INSTRUCTIONS)	CLASS CODE/ISSUE YR(1)(2)	VALIDATION # (1)	COUNTY STICKER # (1)	CITY STICKER # (1)(2)	*PLATE # (TRADE IN) (2)	CLASS CODE/ISSUE YR(2)	EXPIRATION DATE (1)(2)(3)
U526466	8020/1994						PERMANENT

TDR 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	LIEN DATE
		SUNTRUST BANK	08/11/2014

STREET	CITY	STATE	ZIP CODE
120 E BALTIMORE ST 25 FL	BALTIMORE	MD	21202

LIEN CODE	SECOND LIENHOLDER	LIEN DATE

STREET	CITY	STATE	ZIP CODE

*LESSEE / REGISTRANT INFORMATION (OWNER OF PLATE)	LEGAL STATUS	NAME CODE	MAO	LD
NAME				

ADDRESS	CITY	STATE	ZIP CODE

VEHICLE COST / TAX INFORMATION (required for Title & Registration Transactions)	SALE PRICE	TRADE IN ALLOWANCE	TAXABLE AMOUNT	SALESTAX PAID	*TAX EXEMPTION REASON / SALES TAX #

DEALER NAME	DEALER ADDRESS	DEALER #

*Required for Duplicate Title - TCA 55-3-115 (submit title of altered Certificate of Title)	☐ LOST	☐ STOLEN	☐ MUTILATED	☐ RTND DUE TO NON DELIVERY	☐ ALTERED	☐ ILLEGIBLE
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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 associates to determine the accuracy of the information provided by me or on my behalf.		DATE
SIGNATURE OF CERTIFIER/OWNER		08/19/2014

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 indicated certifies this form as a valid registration)		
REGISTRATION FEE	CREDIT	LEASE FEE	TRANS FEE	CLERK FEE
79.75				

COMPUTATION OF	SALES OR USE TAX	SA TAX	LOCAL TAX	ADDITIONAL TAX	COLLECTED IN STATE OF	COUNTY WHEEL TAX	CITY STICKER FEE
☐ SALES TAX ☐ USE TAX							

*SERVICE OPT FEE	ORGAN DONOR	POSTAGE	VER	ID / RESIDENCY VERIFICATION	*TOTAL FEES COLLECTED
					97.25

Port: wk46/DR27/0020	Cash: 0.00	Check: 0.00	Check#:	Credit: 0.00	Auth#:	Change: 0.00	RCA-092
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