

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

OFFICIAL VEHICLE REGISTRATION



City Stickers:										STATE	
NEW OR CURRENT TITLE NU 94507671	JMBER			TF	RANSACTION ODE*	REGIS	TRATION ONLY NUMBER	8			
OWNER INFORMATION *LEG	AL STATUS: 1 (AND) 2	(OR) ENTER N	IAME CODE IN	BOX 1 (SAM	E) 2(DIFFERE	NT) 3(MULTIPLE LA	ST NAMES) 4(COMPANY)	5(OVER 28 CHARACTER	MAO N ILU		
BSE TRAILER		THOTHAL	М	IIDDLE INITIA	L	LAST NAME		FIRST NAME	MIDDLE INITIA	L	
ADDRESS 1 (MAILING)	LLAOINO LL				i i	ADDRESS 2 (PHYS	ICAL)				
10233 GOVERI	NOR LN BLV	'D									
CITY STATE WILLIAMSPORT ME						CITY		STAT	E ZIP CODE	ZIP CODE	
CNTY OF RESIDENCE/PRINCIPAL BUS OF		MD URCHASE DATE				TELEPHO	NE# PLAC	ARD/HEARING IMPAIRED	CLS/YR *INSURANCE POLICY	#	
HAMILTON 03	3	01/05/201		D O SER	NVICE OPTIONS	301	582 1793				
VEHICLE INFORMATION VIN	· · · · · · · · · · · · · · · · · · ·	Luave	MODEL	YEAR	BODY	TITLE BRAND - tr	and all the a	CODE T	YPE OF FUEL - translation	CODE	
		WABA	BA 1JJ		SE		ansianon	U	The of Follandaron	9	
			IOUS STATES	Z011	VEHICLE US	USED VEHICLE TYPE	E CURRENT MILEA	GE ODOMETER A	CTUAL (0) NOT ACTUAL (8)	CODE	
11454996 ME		ME			F	s		(List one) IN E	VER 10 YRS / 16,000 LBS (1) EXCESS OF MECHANICAL LIMITS (9)	1	
COLOR CODE (enter appropriate code)* UPPER LOWER WDTH			#AXLES GROSS VEHICLE			WEIGHT *VEHICLE TRADE-IN		N DESCRIPTION	COMPANY VEHICLE #		
0									90	276	
PLATE INFORMATION *(requi	red for Title and Registra ASSCODE/ISSUEYR(1)(tions) SEE REDUNTY STICK		OR COMPLETE IN: Y STICKER #(1)(2)	*PLATE #(TRADE IN)(2)	CLASS CODE/ISS	UE YR(2) EXPIRATION DATE	(1)(2)(3)	
U554046	8020/1994	4							PERMA	NENT	
TDR STICKER #(4)	TEMP OPERATOR PER	RMIT #(3) # 0	OF SEATS(5)	ZONE(CO	OUNTY NAME)(6)	USDOT / REGISTRANT #	(7)	MOTOR CARRIER #(8)		
LIEN INFORMATION (If lien pr											
LIEN CODE FIRST LIEN		NIZ							LIEN DA	™ 5/2015	
STREET	INTRUST BA					CITY		STATE	ZIP CODE	12013	
	LTIMORE ST	Γ 25 FL				BALTII	MORE	N	/ID 21202	TE	
									33.777.598		
STREET			СІТҮ					STATE ZIP CODE			
*LESSEE / REGISTRANT INFO	DRMATION(OWNER OF	PLATE)	LEGAL S	STATUS	NAME	CODE	MAO ILU				
NAME						NAME					
ADDRESS			CITY					STATE ZIP CODE			
VEHICLE COST / TAX INFORM	MATION *(required for Ti	itle & Registration Tr	ansactions)								
SALE PRICE TRADE IN ALLOWANCE		TAXABLE AMOUNT			SALESTAX PAID			*TAX EXEMPTION REASON / SALES TAX #			
DEALER NAME			DEALE	R ADDRESS					DEALER#		
*Required for Duplicate Title - 1	F.C.A. 55-3-115 (submit)	lilegible or sitered C	ertificate of Title	9)							
LOST	STOLEN		MUTILATE		RTN	I'D DUE TO NON DE	LIEVERY	ALTERED	ILLEGIBLE		
Under penalties of perjury, I here or its assignees to determine the	eby certify all information	provided is true an	d correct to the	best of my kn	owledge, and a	cknowledge that it is	not the responsibility of the	Motor Vehicle Division			
SIGNATURE OF CERTIFIER/C		ation provided by me				ORIZED SIGNATUR			01/12/2015	j	
INVOICE NUMBER	COUNTY NAME		СО	NUMBER	DATE OF AP				R VEHICLES(COUNTY CLERK)	(AD46	
15012 @ OFFICE USE ONLY	HAMILTO EMISSION: T	railer		33		12/2015	(total fees collect		form as a valid registration)	AR46	
79.75	CREDIT	LEASE F	EE	TRA	ANS FEE	CLERK FEE	12.00	5.50	.00		
COMPUTATION OF SALES TAX USE TA	SALES OR USE TAX	SA TAX	LOCAL	. TAX	DDITIONAL TA	X COL	ECTED IN STATE OF	COUNTY WHEEL TAX	CITY STICKER FEE		
*SERVICE OPT FEE	ORGAN DONOR	POSTAC	BE .	VER		ID / RESIDENC	Y VERIFICATION		*TOTAL FEES COLLECTED	H	

Cash: 0.00

Check: 0.00

Credit: 0.00

Auth#:

Change: 0.00

PDA-692

Port: WK51/DR46/8020