



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



City Stickers:

NEW OR CURRENT TITLE NUMBER 93596404	TRANSACTION CODE N01	REGISTRATION ONLY NUMBER
--	--------------------------------	--------------------------

OWNER INFORMATION: LEGAL STATUS: 1 (AND) 2 (OR) <input type="checkbox"/> ENTER NAME CODE IN BOX 1 (SAME) 2 (DIFFERENT) 3 (MULTIPLE LAST NAMES) 4 (COMPANY) 5 (OVER 25 CHARACTERS) <input checked="" type="checkbox"/> 4			MAC <input checked="" type="checkbox"/> N <input type="checkbox"/> (U) <input checked="" type="checkbox"/> N		
LAST NAME BSE TRAILER LEASING LLC		FIRST NAME		MIDDLE INITIAL	
ADDRESS 1 (MAILING) 10233 GOVERNOR LN BLVD			ADDRESS 2 (PHYSICAL)		
CITY WILLIAMSPORT		STATE MD		ZIP CODE 21795	
CITY OF RESIDENCE/PRINCIPAL BUS OR INCORP LOCATION HAMILTON 033		PURCHASE DATE 04/17/2014		TELEPHONE # 301 582 1793	
<input type="checkbox"/> *LEASED <input checked="" type="checkbox"/> *SERVICE OPTIONS		SEE REVERSE SIDE FOR INSTRUCTIONS		<input type="checkbox"/> *PLACARD/HEARING IMPAIRED CLS/YR	
				<input type="checkbox"/> *INSURANCE POLICY #	

153136

VEHICLE INFORMATION										
VIN 3H3V532C0FT153136	MAKE HYTR	MODEL 3H3	YEAR 2015	BODY SE	TITLE BRAND - translation NEW	CODE N	TYPE OF FUEL - translation	CODE 9		
SURRENDERED TITLE # MSO	STATE TN	PREVIOUS STATES TITLED	VEHICLE USE F	VEHICLE TYPE S	CURRENT MILEAGE	ODOMETER ACTUAL (0) NOT ACTUAL (8) INDICATOR OVER 10 YRS / 16,000 LBS (1) (List one) IN EXCESS OF MECHANICAL LIMITS (8)	CODE 1			
COLOR CODE (enter appropriate code)* UPPER O	MOBILE HOME LGTH	WIDTH	# AXLES	GROSS VEHICLE WEIGHT	*VEHICLE TRADE-IN DESCRIPTION	COMPANY VEHICLE # 153136				

PLATE INFORMATION (required for Title and Registration and Registration Only Transactions) SEE REVERSE SIDE FOR COMPLETE INSTRUCTIONS							
PLATE #(1) U489844	CLASS CODE/ISSUE YR(1)(3) 8020/1994	VALIDATION #(1)	COUNTY STICKER #(1)	CITY STICKER #(1)(2)	*PLATE #(TRADE IN)(2)	CLASS CODE/ISSUE YR(2)	EXPIRATION DATE (1)(2)(3) PERMANENT
TDR STICKER #(4)	TEMP OPERATOR PERMIT #(3)	# OF SEATS(5)	ZONE(COUNTY NAME)(8)	USDOT / REGISTRANT #(7)	MOTOR CARRIER #(8)		

LIEN INFORMATION (if lien present)			
LIEN CODE	FIRST LIENHOLDER SUNTRUST BANK	LIEN DATE 04/17/2014	
STREET 120 E BALTIMORE ST 25 FL	CITY BALTIMORE	STATE MD	ZIP CODE 21202
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"/>	MAC <input type="checkbox"/>	(U) <input type="checkbox"/>
NAME	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 #

<input type="checkbox"/> LOST	<input type="checkbox"/> STOLEN	<input type="checkbox"/> MUTILATED	<input type="checkbox"/> RT'ND 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 05/06/2014
------------------------------	--	---------------------------

INVOICE NUMBER 14126 @	COUNTY NAME HAMILTON	CO NUMBER 33	DATE OF APPLICATION 05/06/2014	BY AUTHORITY OF REGISTRAR OF MOTOR VEHICLES (COUNTY CLERK) W.F. (BILL) KNOWLES	HCM27
OFFICE USE ONLY REGISTRATION FEE 79.75	CREDIT	LEASE FEE	TRANS FEE	CLERK FEE	ISSUANCE FEE 12.00
COMPUTATION OF <input type="checkbox"/> SALES TAX <input type="checkbox"/> USE TAX	SALES OR USE TAX	SA TAX	LOCAL TAX	ADDITIONAL TAX	TITLE FEE 5.50
*SERVICE OPT FEE	ORGAN DONOR	POSTAGE	VER	ID / RESIDENCY VERIFICATION	TOTAL TAX COLLECTED .00
					TOTAL FEES COLLECTED 97.25