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
93595166	N01	

OWNER INFORMATION *LEGAL STATUS: 1 (AND) 2 (OR) ENTER NAME CODE IN BOX 1 (SAME) 2 (DIFFERENT) 3 (MULTIPLE LAST NAMES) 4 (COMPANY) 5 (OVER 29 CHARACTERS) 4 MAO N ILU N

LAST NAME	FIRST NAME	MIDDLE INITIAL	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 INCORP LOCATION	PURCHASE DATE	*LEASED 0 *SERVICE OPTIONS (SEE REVERSE SIDE FOR INSTRUCTIONS)	TELEPHONE #	*PLACARD/HEARING IMPAIRED CLS/YR	*INSURANCE POLICY #
HAMILTON 033	04/30/2014		304 582 1793		

VEHICLE INFORMATION

VIN	MAKE	MODEL	YEAR	BODY	TITLE BRAND - translation	CODE	TYPE OF FUEL - translation	CODE
3H3V532C3FT153163	HYTR	3H3	2015	SE	NEW	N		9

SURRENDERED TITLE #	STATE	PREVIOUS STATE TITLED	VEHICLE USE	VEHICLE TYPE	CURRENT MILEAGE	ODOMETER INDICATOR (List other)	CODE
MSO	TN		F	S		ACTUAL (0) NOT ACTUAL (8) OVER 10 YRS / 16,000 LBS (1) IN EXCESS OF MECHANICAL LIMITS (3)	1

COLOR CODE (enter appropriate code)* UPPER	LOWER	MOBILE HOME LGTH	WIDTH	# AXLES	GROSS VEHICLE WEIGHT	*VEHICLE TRADE-IN DESCRIPTION	COMPANY VEHICLE #
O							153163

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

PLATE #(1)	CLASSCODE/ISSUEYR(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)
U489311	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 applicable)

LIEN CODE	FIRST LIENHOLDER	LIEN DATE
	SUNTRUST BANK	04/30/2014

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 ILU

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 #

*Required for Duplicate Title - T.C.A. 55-3-115 (submit with the affidavit and Certificate of Title)

☐ LOST ☐ STOLEN ☐ MUTILATED ☐ RTN'D DUE TO NON DELIEVERY ☐ ALTERED ☐ 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 personnel to determine the accuracy of the information provided by me or on my behalf.

SIGNATURE OF CERTIFIER/OWNER	POWER OF ATTORNEY/AUTHORIZED SIGNATURE OF APPLICANT	DATE
		05/02/2014

INVOICE NUMBER	COUNTY NAME	COUNTY NUMBER	DATE OF APPLICATION	BY AUTHORITY OF REGISTRAR OF MOTOR VEHICLES (COUNTY CLERK)	
14122 @	HAMILTON	33	05/02/2014	W.F. (BILL) KNOWLES	HCM27

153163