



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



City Stickers:

NEW OR CURRENT TITLE NUMBER 93596199			TRANSACTION CODE N01	REGISTRATION ONLY NUMBER			
OWNER INFORMATION - LEGAL STATUS (1 AND 2 OF 3) <input type="checkbox"/> ENTER NAME CODE IN BOX 1 (NAME) 2 (DIFFERENT) 3 (MIDDLE NAME) 4 (COMPANY) 5 (OVER 26 CHARACTERS) 4 <input type="checkbox"/> MAO N <input type="checkbox"/> LU N			LAST NAME <input type="checkbox"/> FIRST NAME <input type="checkbox"/> MIDDLE INITIAL				
LAST NAME BSE TRAILER LEASING LLC			LAST NAME <input type="checkbox"/> FIRST NAME <input type="checkbox"/> MIDDLE INITIAL				
ADDRESS 1 (MAILING) 10233 GOVERNOR LN BLVD			ADDRESS 2 (PHYSICAL)				
CITY WILLIAMSPORT		STATE MD	ZIP CODE 21795	CITY		STATE	ZIP CODE
CITY OF RESIDENCE/PRINCIPAL BUS OR INCORP LOCATION HAMILTON 033		PURCHASE DATE 04/17/2014	*LEASED <input type="checkbox"/> *SERVICE OPTIONS <input type="checkbox"/> SEE REVERSE SIDE FOR INSTRUCTIONS		TELEPHONE # 301 582 1793	*PLACARD/HEARING IMPAIRED CLS/YR	*INSURANCE POLICY #

VEHICLE INFORMATION		VIN 3H3V532C0FT154237 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 / 15,000 LBS (1) (List one) IN EXCESS OF MECHANICAL LIMITS (9)	CODE 1
COLOR CODE (enter appropriate code)* UPPER O LOWER 0		MOBILE HOME LGHTH WDTH	# AXLES	GROSS VEHICLE WEIGHT		*VEHICLE TRADE-IN DESCRIPTION		COMPANY VEHICLE # 154237	

PLATE INFORMATION (GENERAL INFORMATION FOR PLATE NUMBER, EXPIRATION DATE, ETC. SEE REVERSE SIDE FOR COMPLETE INSTRUCTIONS)									
PLATE #(1) U489937	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)(6)		USDOT / REGISTRANT #(7)		MOTOR CARRIER #(8)		

LIEN INFORMATION (IF APPLICABLE)		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							
STREET		CITY		STATE	ZIP CODE		

*LESSEE/REGISTRANT INFORMATION (OWNER OF PLATE)		LEGAL STATUS <input type="checkbox"/>	NAME CODE <input type="checkbox"/>	MAO <input type="checkbox"/>	LU <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 #					

*Required for Duplicate Title - TCA 55-3-115 (submit license or altered Certificate of Title)							
<input type="checkbox"/> LOST	<input type="checkbox"/> STOLEN	<input type="checkbox"/> MUTILATED	<input type="checkbox"/> RTN'D 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
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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			
(total fees collected indicated certifies this form as a valid registration)							
REGISTRATION FEE 79.75	CREDIT	LEASE FEE	TRANS FEE	CLERK FEE	ISSUANCE FEE 12.00	TITLE FEE 5.50	TOTAL TAX COLLECTED .00
COMPUTATION OF <input type="checkbox"/> SALES TAX <input type="checkbox"/> USE TAX	SALES OR USE TAX	SA TAX	LOCAL TAX	ADDITIONAL TAX	COLLECTED IN STATE OF	COUNTY WHEEL TAX	CITY STICKER FEE
*SERVICE OPT FEE	ORGAN DONOR	POSTAGE	VER	ID / RESIDENCY VERIFICATION			*TOTAL FEES COLLECTED 97.25