



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

OFFICIAL VEHICLE REGISTRATION



154403

City Stickers:

NEW OR CURRENT TITLE NUMBER 93595029	TRANSACTION CODE N01	REGISTRATION ONLY NUMBER
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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 28 CHARACTERS) <input checked="" type="checkbox"/> 4			MAO <input checked="" type="checkbox"/> N ILU <input checked="" type="checkbox"/> N		
LAST NAME BSE TRAILER LEASING LLC			LAST NAME BSE TRAILER LEASING LLC		
FIRST NAME 10233 GOVERNOR LN BLVD			FIRST NAME 10233 GOVERNOR LN BLVD		
MIDDLE INITIAL WILLIAMSPORT			MIDDLE INITIAL WILLIAMSPORT		
ADDRESS 1 (MAILING) 10233 GOVERNOR LN BLVD			ADDRESS 2 (PHYSICAL) 10233 GOVERNOR LN BLVD		
CITY WILLIAMSPORT			CITY WILLIAMSPORT		
STATE MD			STATE MD		
ZIP CODE 21795			ZIP CODE 21795		
CITY OF RESIDENCE/PRINCIPAL BUS OR INCORP LOCATION HAMILTON 033			CITY OF RESIDENCE/PRINCIPAL BUS OR INCORP LOCATION HAMILTON 033		
PURCHASE DATE 04/17/2014			PURCHASE DATE 04/17/2014		
*LEASED <input checked="" type="checkbox"/> *SERVICE OPTIONS <input type="checkbox"/> SEE REVERSE SIDE FOR INSTRUCTIONS			*LEASED <input checked="" type="checkbox"/> *SERVICE OPTIONS <input type="checkbox"/> SEE REVERSE SIDE FOR INSTRUCTIONS		
TELEPHONE # 301 582 1793			TELEPHONE # 301 582 1793		
*PLACARD/HEARING IMPAIRED CLS/YR			*PLACARD/HEARING IMPAIRED CLS/YR		
*INSURANCE POLICY #			*INSURANCE POLICY #		

VIN 3H3V532C2FT154403		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 / 18,000 LBS (1) (List one) IN EXCESS OF MECHANICAL LIMITS (9)	CODE 1
COLOR CODE (enter appropriate code) UPPER O	MOBILE HOME LGTH 154403	WOTH	# AXLES	GROSS VEHICLE WEIGHT	*VEHICLE TRADE-IN DESCRIPTION			COMPANY VEHICLE # 154403	

PLATE INFORMATION *(required for Title and Registration and Registration Only Transactions) SEE REVERSE SIDE FOR COMPLETE INSTRUCTIONS							
PLATE # (1) U489227	CLASSCODE/ISSUEYR (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 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"/>	MAO <input type="checkbox"/>	ILU <input type="checkbox"/>
NAME		NAME			
ADDRESS		ADDRESS			
CITY		CITY			
STATE		STATE			
ZIP CODE		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"/> RTN'D DUE TO NON DELIVERY	<input type="checkbox"/> ALTERED	<input type="checkbox"/> 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 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 05/02/2014
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INVOICE NUMBER 14122 @	COUNTY NAME HAMILTON	CO NUMBER 33	DATE OF APPLICATION 05/02/2014	BY AUTHORITY OF REGISTRAR OF MOTOR VEHICLES (COUNTY CLERK) W.F. (BILL) KNOWLES	KAR46
OFFICE USE ONLY					
REGISTRATION FEE 79.75					
CREDIT	LEASE FEE	TRANS FEE	CLERK FEE	ISSUANCE FEE 12.00	TITLE FEE 5.50
COMPUTATION OF <input type="checkbox"/> SALES TAX <input type="checkbox"/> USE TAX			SALES OR USE TAX	SA TAX	LOCAL TAX
*SERVICE OPT FEE			ORGAN DONOR	POSTAGE	VER
ID / RESIDENCY VERIFICATION			*TOTAL FEES COLLECTED 97.25		