



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



City Stickers:

|                                                                                                                                                                                                                                                                                                      |                                                |                                                                                                                                           |                                                                                                                               |                                                |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------|
| NEW OR CURRENT TITLE NUMBER<br><b>93605481</b>                                                                                                                                                                                                                                                       |                                                | TRANSACTION CODE<br><b>N01</b>                                                                                                            | REGISTRATION ONLY NUMBER                                                                                                      |                                                |
| OWNER INFORMATION *LEGAL STATUS: 1 (AND) 2 (OR) 3 ENTER NAME CODE IN BOX 1 (SAME) 2 (DIFFERENT) 3 (MULTIPLE LAST NAMES) 4 (COMPANY) (OVER 25 CHARACTERS) <b>4</b> MAO <input checked="" type="checkbox"/> N <input type="checkbox"/> ILU <input type="checkbox"/>                                    |                                                |                                                                                                                                           |                                                                                                                               |                                                |
| LAST NAME<br><b>BSE TRAILER LEASING LLC</b>                                                                                                                                                                                                                                                          |                                                | FIRST NAME                                                                                                                                | MIDDLE INITIAL                                                                                                                | LAST NAME<br><b></b>                           |
| ADDRESS 1 (MAILING)<br><b>10233 GOVERNOR LN BLVD</b>                                                                                                                                                                                                                                                 |                                                | ADDRESS 2 (PHYSICAL)                                                                                                                      |                                                                                                                               |                                                |
| CITY<br><b>WILLIAMSPORT</b>                                                                                                                                                                                                                                                                          | STATE<br><b>MD</b>                             | ZIP CODE<br><b>21795</b>                                                                                                                  | CITY<br><b></b>                                                                                                               | STATE<br><b></b>                               |
| CITY OF RESIDENCE/PRINCIPAL BUS OR INDOOR LOCATION<br><b>HAMILTON 033</b>                                                                                                                                                                                                                            | PURCHASE DATE<br><b>06/03/2014</b>             | *LEASED <input checked="" type="checkbox"/> *SERVICE OPTIONS <input type="checkbox"/><br><small>SEE REVERSE SIDE FOR INSTRUCTIONS</small> | TELEPHONE #<br><b>240 772 5501</b>                                                                                            | *PLACARD/HEARING IMPAIRED CLS/YR<br><b></b>    |
| *INSURANCE POLICY #<br><b></b>                                                                                                                                                                                                                                                                       |                                                |                                                                                                                                           |                                                                                                                               |                                                |
| VEHICLE INFORMATION                                                                                                                                                                                                                                                                                  |                                                |                                                                                                                                           |                                                                                                                               |                                                |
| VIN<br><b>3H3V532C1FT154716</b>                                                                                                                                                                                                                                                                      | MAKE<br><b>HYTR</b>                            | MODEL<br><b>3H3</b>                                                                                                                       | YEAR<br><b>2015</b>                                                                                                           | BODY<br><b>SE</b>                              |
| TITLE BRAND - translation<br><b>NEW</b>                                                                                                                                                                                                                                                              |                                                | CODE<br><b>N</b>                                                                                                                          | TYPE OF FUEL - translation<br><b></b>                                                                                         |                                                |
| SURRENDERED TITLE #<br><b>MSO</b>                                                                                                                                                                                                                                                                    |                                                | STATE<br><b>TN</b>                                                                                                                        | PREVIOUS STATES TITLED<br><b></b>                                                                                             | VEHICLE USE<br><b>F</b>                        |
| VEHICLE TYPE<br><b>S</b>                                                                                                                                                                                                                                                                             |                                                | CURRENT MILEAGE<br><b></b>                                                                                                                | ODOMETER ACTUAL (0) NOT ACTUAL (0)<br>INDICATOR OVER 10 YRS / 16,000 LBS (1)<br>(List one) IN EXCESS OF MECHANICAL LIMITS (0) | CODE<br><b>1</b>                               |
| COLOR CODE (enter appropriate code)*<br>UPPER<br><b>O</b>                                                                                                                                                                                                                                            | MOBILE HOME<br>LGTH<br><b></b>                 | WIDTH<br><b></b>                                                                                                                          | # AXLES<br><b></b>                                                                                                            | GROSS VEHICLE WEIGHT<br><b></b>                |
| *VEHICLE TRADE-IN DESCRIPTION<br><b></b>                                                                                                                                                                                                                                                             |                                                | COMPANY VEHICLE #<br><b>154716</b>                                                                                                        |                                                                                                                               |                                                |
| PLATE INFORMATION *Required for Title and Registration and Registration Only Transactions SEE REVERSE SIDE FOR COMPLETE INSTRUCTIONS                                                                                                                                                                 |                                                |                                                                                                                                           |                                                                                                                               |                                                |
| PLATE # (1)<br><b>U495826</b>                                                                                                                                                                                                                                                                        | CLASS CODE/ISSUE YR (1)(3)<br><b>8020/1994</b> | VALIDATION # (1)<br><b></b>                                                                                                               | COUNTY STICKER # (1)<br><b></b>                                                                                               | CITY STICKER # (1)(2)<br><b></b>               |
| *PLATE # (TRADE IN) (2)<br><b></b>                                                                                                                                                                                                                                                                   | CLASS CODE/ISSUE YR (2)<br><b></b>             | EXPIRATION DATE (1)(2)(3)<br><b>PERMANENT</b>                                                                                             |                                                                                                                               |                                                |
| TDR STICKER # (4)<br><b></b>                                                                                                                                                                                                                                                                         | TEMP OPERATOR PERMIT # (3)<br><b></b>          | # OF SEATS (5)<br><b></b>                                                                                                                 | ZONE (COUNTY NAME) (6)<br><b></b>                                                                                             | USDOT / REGISTRANT # (7)<br><b></b>            |
| MOTOR CARRIER # (8)<br><b></b>                                                                                                                                                                                                                                                                       |                                                |                                                                                                                                           |                                                                                                                               |                                                |
| LIEN INFORMATION (if lien present)                                                                                                                                                                                                                                                                   |                                                |                                                                                                                                           |                                                                                                                               |                                                |
| LIEN CODE<br><b></b>                                                                                                                                                                                                                                                                                 | FIRST LIENHOLDER<br><b>SUNTRUST BANK</b>       |                                                                                                                                           |                                                                                                                               | LIEN DATE<br><b>06/03/2014</b>                 |
| STREET<br><b>120 E BALTIMORE ST 25 FL</b>                                                                                                                                                                                                                                                            | CITY<br><b>BALTIMORE</b>                       |                                                                                                                                           | STATE<br><b>MD</b>                                                                                                            | ZIP CODE<br><b>21202</b>                       |
| LIEN CODE<br><b></b>                                                                                                                                                                                                                                                                                 | SECOND LIENHOLDER<br><b></b>                   |                                                                                                                                           |                                                                                                                               | LIEN DATE<br><b></b>                           |
| STREET<br><b></b>                                                                                                                                                                                                                                                                                    | CITY<br><b></b>                                |                                                                                                                                           | STATE<br><b></b>                                                                                                              | ZIP CODE<br><b></b>                            |
| LESSEE/REGISTRANT INFORMATION (OWNER OF PLATE)                                                                                                                                                                                                                                                       |                                                |                                                                                                                                           |                                                                                                                               |                                                |
| LEGAL STATUS <input type="checkbox"/> NAME CODE <input type="checkbox"/> MAO <input type="checkbox"/> ALU <input type="checkbox"/>                                                                                                                                                                   |                                                |                                                                                                                                           |                                                                                                                               |                                                |
| NAME<br><b></b>                                                                                                                                                                                                                                                                                      |                                                | NAME<br><b></b>                                                                                                                           |                                                                                                                               |                                                |
| ADDRESS<br><b></b>                                                                                                                                                                                                                                                                                   |                                                | CITY<br><b></b>                                                                                                                           |                                                                                                                               |                                                |
|                                                                                                                                                                                                                                                                                                      |                                                | STATE<br><b></b>                                                                                                                          |                                                                                                                               |                                                |
|                                                                                                                                                                                                                                                                                                      |                                                | ZIP CODE<br><b></b>                                                                                                                       |                                                                                                                               |                                                |
| VEHICLE COST / TAX INFORMATION (Required for Title & Registration Transactions)                                                                                                                                                                                                                      |                                                |                                                                                                                                           |                                                                                                                               |                                                |
| SALE PRICE<br><b></b>                                                                                                                                                                                                                                                                                | TRADE IN ALLOWANCE<br><b></b>                  | TAXABLE AMOUNT<br><b></b>                                                                                                                 | SALES TAX PAID<br><b></b>                                                                                                     | *TAX EXEMPTION REASON / SALES TAX #<br><b></b> |
| DEALER NAME<br><b></b>                                                                                                                                                                                                                                                                               |                                                | DEALER ADDRESS<br><b></b>                                                                                                                 |                                                                                                                               | DEALER #<br><b></b>                            |
| *Required for Duplicate Title: T.C.A. 55-5-119 (submit legible or altered Certificate of Title)                                                                                                                                                                                                      |                                                |                                                                                                                                           |                                                                                                                               |                                                |
| <input type="checkbox"/> LOST                                                                                                                                                                                                                                                                        | <input type="checkbox"/> STOLEN                | <input type="checkbox"/> MUTILATED                                                                                                        | <input type="checkbox"/> RTND 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 employees to determine the accuracy of the information provided by me or on my behalf. |                                                |                                                                                                                                           |                                                                                                                               |                                                |
| SIGNATURE OF CERTIFIER/OWNER<br><b></b>                                                                                                                                                                                                                                                              |                                                | POWER OF ATTORNEY/AUTHORIZED SIGNATURE (IF APPLICABLE)<br><b></b>                                                                         |                                                                                                                               | DATE<br><b>06/05/2014</b>                      |
| INVOICE NUMBER<br><b>14156 @</b>                                                                                                                                                                                                                                                                     |                                                |                                                                                                                                           |                                                                                                                               |                                                |
| COUNTY NAME<br><b>HAMILTON</b>                                                                                                                                                                                                                                                                       | CO NUMBER<br><b>33</b>                         | DATE OF APPLICATION<br><b>06/05/2014</b>                                                                                                  | BY AUTHORITY OF REGISTRAR OF MOTOR VEHICLES (COUNTY CLERK)<br><b>W.F. (BILL) KNOWLES</b>                                      |                                                |
| OFFICE USE ONLY<br><b>EMISSION: Trailer</b>                                                                                                                                                                                                                                                          |                                                |                                                                                                                                           |                                                                                                                               |                                                |
| REGISTRATION FEE<br><b>79.75</b>                                                                                                                                                                                                                                                                     | CREDIT<br><b></b>                              | LEASE FEE<br><b></b>                                                                                                                      | TRANS FEE<br><b></b>                                                                                                          | CLERK FEE<br><b></b>                           |
| ISSUANCE FEE<br><b>12.00</b>                                                                                                                                                                                                                                                                         | TITLE FEE<br><b>5.50</b>                       | TOTAL TAX COLLECTED<br><b>.00</b>                                                                                                         |                                                                                                                               |                                                |
| COMPUTATION OF<br><input type="checkbox"/> SALES TAX <input type="checkbox"/> USE TAX                                                                                                                                                                                                                | SALES OR USE TAX<br><b></b>                    | SA TAX<br><b></b>                                                                                                                         | LOCAL TAX<br><b></b>                                                                                                          | ADDITIONAL TAX<br><b></b>                      |
| COLLECTED IN STATE OF<br><b></b>                                                                                                                                                                                                                                                                     | COUNTY WHEEL TAX<br><b></b>                    | CITY STICKER FEE<br><b></b>                                                                                                               |                                                                                                                               |                                                |
| *SERVICE OPT FEE<br><b></b>                                                                                                                                                                                                                                                                          | ORGAN DONOR<br><b></b>                         | POSTAGE<br><b></b>                                                                                                                        | VER<br><b></b>                                                                                                                | ID / RESIDENCY VERIFICATION<br><b></b>         |
| *TOTAL FEES COLLECTED<br><b>97.25</b>                                                                                                                                                                                                                                                                |                                                |                                                                                                                                           |                                                                                                                               |                                                |