



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



City Stickers:

NEW OR CURRENT TITLE NUMBER 93605545	TRANSACTION CODE* N01	REGISTRATION ONLY NUMBER	STATE
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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 NAME) 4 (COMPANY) 5 (OVER 25 CHARACTERS) 4		MAO <input checked="" type="checkbox"/> N	EU <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 INCOME LOCATION HAMILTON 033	PURCHASE DATE 06/03/2014	*LEASED <input checked="" type="checkbox"/> *SERVICE OPTIONS <input checked="" type="checkbox"/> <small>SEE REVERSE SIDE FOR INSTRUCTIONS</small>	TELEPHONE # 240 772 5501
		*PLACARD/HEARING IMPAIRED CLS/YR	*INSURANCE POLICY #

VIN 3H3V532C6FT154744	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 (2) NOT ACTUAL (8) INDICATOR OVER 10 YRS / 10,000 LBS (1) <small>(List one) IN EXCESS OF MECHANICAL LIMITS (9)</small>		CODE 1
COLOR CODE (enter appropriate code)* UPPER O	MOBILE HOME LGTH WOTH	# AXLES	GROSS VEHICLE WEIGHT	*VEHICLE TRADE-IN DESCRIPTION		COMPANY VEHICLE # 154744		

PLATE # (1) U495854	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
TOR STICKER # (4)	TEMP OPERATOR PERMIT # (3)	# OF SEATS (5)	ZONE (COUNTY NAME) (6)	USDOT / REGISTRANT # (7)	MOTOR CARRIER # (8)		

LIEN CODE	FIRST LIENHOLDER SUNTRUST BANK	LIEN DATE 06/03/2014
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"/>	EU <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	SALES TAX PAID	*TAX EXEMPTION REASON / SALES TAX #
DEALER NAME	DEALER ADDRESS			DEALER #	

*Required for Duplicate Title - T.C.A. 56-3-119 (submit title 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
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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 06/05/2014
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INVOICE NUMBER 14156 @	COUNTY NAME HAMILTON	CO NUMBER 33	DATE OF APPLICATION 06/05/2014	BY AUTHORITY OF REGISTRAR OF MOTOR VEHICLES (COUNTY CLERK) W.F. (BILL) KNOWLES	HCM27
OFFICE USE ONLY REGISTRATION FEE 79.75	EMISSION: Trailer		(total fees collected indicated certifies this form as a valid registration)		
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
*SERVICE OPT FEE	ORGAN DONOR	POSTAGE	VER	ID / RESIDENCY VERIFICATION	*TOTAL FEES COLLECTED 97.25