



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



City Stickers:

|                                                                                                                                                                                                                                                                                                      |                                                |                                                                                                                                                      |                                                    |                                                                                          |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------|------------------------------------------------------------------------------------------|
| NEW OR CURRENT TITLE NUMBER<br><b>93605575</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) 5 (OVER 26 CHARACTERS) 4 MAO <input checked="" type="checkbox"/> N <input checked="" type="checkbox"/> ILU <input checked="" type="checkbox"/> N                 |                                                |                                                                                                                                                      |                                                    |                                                                                          |
| LAST NAME<br><b>BSE TRAILER LEASING LLC</b>                                                                                                                                                                                                                                                          |                                                | FIRST NAME                                                                                                                                           | MIDDLE INITIAL                                     | LAST NAME                                                                                |
| 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                                               | STATE                                                                                    |
| CITY OF RESIDENCE/PRINCIPAL BUS OR INCORP LOCATION<br><b>HAMILTON 033</b>                                                                                                                                                                                                                            | PURCHASE DATE<br><b>06/03/2014</b>             | *LEASED <input checked="" type="checkbox"/> *SERVICE OPTIONS <input checked="" type="checkbox"/><br><small>SEE REVERSE SIDE FOR INSTRUCTIONS</small> | TELEPHONE #<br><b>240 772 5501</b>                 | *PLACARD/HEARING IMPAIRED CLS/YR<br><b>1</b>                                             |
| VEHICLE INFORMATION                                                                                                                                                                                                                                                                                  |                                                |                                                                                                                                                      |                                                    |                                                                                          |
| VIN<br><b>3H3V532C6FT154761</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>9</b>             |                                                                                          |
| SURRENDERED TITLE #<br><b>MSO</b>                                                                                                                                                                                                                                                                    | STATE<br><b>TN</b>                             | PREVIOUS STATES TITLED                                                                                                                               | VEHICLE USE<br><b>F</b>                            | VEHICLE TYPE<br><b>S</b>                                                                 |
| COLOR CODE (enter appropriate code)*<br>UPPER<br><b>O</b>                                                                                                                                                                                                                                            | MOBILE HOME LGTH<br><b>154761</b>              | WIDTH                                                                                                                                                | # AXLES                                            | GROSS VEHICLE WEIGHT                                                                     |
| *VEHICLE TRADE-IN DESCRIPTION                                                                                                                                                                                                                                                                        |                                                | COMPANY VEHICLE #<br><b>154761</b>                                                                                                                   |                                                    |                                                                                          |
| PLATE INFORMATION (required for title and Registration and Registration Only Transactions) SEE REVERSE SIDE FOR COMPLETE INSTRUCTIONS                                                                                                                                                                |                                                |                                                                                                                                                      |                                                    |                                                                                          |
| PLATE # (1)<br><b>U495871</b>                                                                                                                                                                                                                                                                        | CLASS CODE/ISSUE YR (1)(3)<br><b>8020/1994</b> | VALIDATION # (1)                                                                                                                                     | COUNTY STICKER # (1)                               | CITY STICKER # (1)(2)                                                                    |
| *PLATE # (TRADE IN) (2)                                                                                                                                                                                                                                                                              |                                                | CLASS CODE/ISSUE YR (2)                                                                                                                              |                                                    | EXPIRATION DATE (1)(2)(3)<br><b>PERMANENT</b>                                            |
| TDR STICKER # (4)                                                                                                                                                                                                                                                                                    | TEMP OPERATOR PERMIT # (3)                     | # OF SEATS (5)                                                                                                                                       | ZONE (COUNTY NAME) (6)                             | USDOT / REGISTRANT # (7)                                                                 |
| MOTOR CARRIER # (8)                                                                                                                                                                                                                                                                                  |                                                |                                                                                                                                                      |                                                    |                                                                                          |
| LIEN INFORMATION (if present)                                                                                                                                                                                                                                                                        |                                                |                                                                                                                                                      |                                                    |                                                                                          |
| LIEN CODE                                                                                                                                                                                                                                                                                            | 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                                                                                                                                                                                                                                                                                            | SECOND LIENHOLDER                              |                                                                                                                                                      |                                                    | LIEN DATE                                                                                |
| STREET                                                                                                                                                                                                                                                                                               | CITY                                           |                                                                                                                                                      | STATE                                              | ZIP CODE                                                                                 |
| LESSOR/REGISTRANT INFORMATION (OWNER OF PLATE)                                                                                                                                                                                                                                                       |                                                |                                                                                                                                                      |                                                    |                                                                                          |
| NAME                                                                                                                                                                                                                                                                                                 | LEGAL STATUS                                   | NAME CODE                                                                                                                                            | MAO                                                | ILU                                                                                      |
| 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 - TGA 55-3-115 (a)(b)(1) (if duplicate or altered Certificate of Title)                                                                                                                                                                                                |                                                |                                                                                                                                                      |                                                    |                                                                                          |
| <input type="checkbox"/> LOST                                                                                                                                                                                                                                                                        | <input type="checkbox"/> STOLEN                | <input type="checkbox"/> MUTILATED                                                                                                                   | <input type="checkbox"/> RT'ND DUE TO NON DEUEVERY | <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<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>REGISTRATION FEE<br><b>79.75</b>                                                                                                                                                                                                                                                  | CREDIT                                         | LEASE FEE                                                                                                                                            | TRANS FEE                                          | CLERK FEE                                                                                |
| 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                               | SA TAX                                                                                                                                               | LOCAL TAX                                          | ADDITIONAL TAX                                                                           |
| *SERVICE OPT FEE                                                                                                                                                                                                                                                                                     | ORGAN DONOR                                    | POSTAGE                                                                                                                                              | VER                                                | ID / RESIDENCY VERIFICATION                                                              |
| *TOTAL FEES COLLECTED<br><b>97.25</b>                                                                                                                                                                                                                                                                |                                                |                                                                                                                                                      |                                                    |                                                                                          |