



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

OFFICIAL VEHICLE REGISTRATION



City Stickers:

NEW OR CURRENT TITLE NUMBER 93606203	TRANSACTION CODE N01	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 28 CHARACTERS) 4		MAO ☒ ☐ ☐	LIU ☒ ☐ ☐
--	--	---	---

LAST NAME BSE TRAILER LEASING LLC	FIRST NAME 	MIDDLE INITIAL 	LAST NAME 	FIRST NAME 	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 06/03/2014	*LEASED ☒ *SERVICE OPTIONS ☐ SEE REVERSE SIDE FOR INSTRUCTIONS	TELEPHONE # 240 772 5501	*PLACARD/HEARING IMPAIRED CLS/YR 	*INSURANCE POLICY #
---	------------------------------------	---	------------------------------------	---	--------------------------------

VIN 3H3V532C7FT154834	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 (0) INDICATOR OVER 10 YRS / 16,000 LBS (1) (List one) IN EXCESS OF MECHANICAL LIMITS (0)	CODE 1
-----------------------------------	--------------------	-----------------------------------	-------------------------	--------------------------	----------------------------	---	------------------

COLOR CODE (enter appropriate code)* UPPER O	MOBILE HOME LGTH 	WOTH 	# AXLES 	GROSS VEHICLE WEIGHT 	*VEHICLE TRADE-IN DESCRIPTION 	COMPANY VEHICLE # 154834
---	--------------------------------	-----------------	--------------------	---------------------------------	--	------------------------------------

PLATE INFORMATION (Required for Title and Registration and Registration Only Transactions) SEE REVERSE SIDE FOR COMPLETE INSTRUCTIONS

PLATE #(1) U496244	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 Not Applicable)

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 ☐ NAME CODE ☐ MAO ☐ LIU ☐

NAME NAME

ADDRESS CITY STATE ZIP CODE

VEHICLE COST / TAX INFORMATION (Required for Title & Registration Transactions)

SALE PRICE 	TRADE IN ALLOWANCE 	TAXABLE AMOUNT 	SALE TAX PAID 	TAX EXEMPTION REASON / SALES TAX #
-----------------------	-------------------------------	---------------------------	--------------------------	---

DEALER NAME 	DEALER ADDRESS 	DEALER #
------------------------	---------------------------	---------------------

*Required for Duplicate Title: (C.A. 55-5-15 (a)(4)(i) (b) or altered Certificate of Title)

☐ LOST	☐ STOLEN	☐ MUTILATED	☐ RTN'D DUE TO NON DELIVERY	☐ ALTERED	☐ 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 06/06/2014
---	---	---------------------------

INVOICE NUMBER 14157 @	COUNTY NAME HAMILTON	CO NUMBER 33	DATE OF APPLICATION 06/06/2014	BY AUTHORITY OF REGISTRAR OF MOTOR VEHICLES (COUNTY CLERK) W.F. (BILL) KNOWLES	HCM27
----------------------------------	--------------------------------	------------------------	--	--	--------------

OFFICE USE ONLY 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 ☐ SALES TAX ☐ 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		