



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



City Stickers:

| | | | | |
|---|------------------------------------|--|------------------------------------|--|
| NEW OR CURRENT TITLE NUMBER 93606306 | | TRANSACTION CODE N01 | REGISTRATION ONLY NUMBER | |
| 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) 4 MAO <input type="checkbox"/> N <input type="checkbox"/> ILU <input type="checkbox"/> N | | | | |
| LAST NAME BSE TRAILER LEASING LLC | | FIRST NAME | MIDDLE INITIAL | LAST NAME |
| ADDRESS 1 (MAILING) 10233 GOVERNOR LN BLVD | | ADDRESS 2 (PHYSICAL) | | |
| CITY WILLIAMSPORT | STATE MD | ZIP CODE 21795 | | CITY |
| CITY OF RESIDENCE/PRINCIPAL BUS OR INCOME LOCATION HAMILTON 033 | PURCHASE DATE 06/03/2014 | *LEASED <input type="checkbox"/> *SERVICE OPTIONS <input type="checkbox"/> <small>SEE REVERSE SIDE FOR INSTRUCTIONS</small> | TELEPHONE # 240 772 5501 | *PLACARD/HEARING IMPAIRED CLS/YR 4 *INSURANCE POLICY # |

| | | | | | | | | | |
|--|----------------------------------|------------------------|-------------------------|--------------------------|-------------------------------|---|------------------------------------|----------------------------|------------------|
| VIN 3H3V532C5FT154881 | | 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 / 15,000 LBS (1) (List one) IN EXCESS OF MECHANICAL LIMITS (9) | CODE 1 | | |
| COLOR CODE (enter appropriate code) UPPER O | MOBILE HOME LGTH 30 | WIDTH 6 | # AXLES 2 | GROSS VEHICLE WEIGHT | *VEHICLE TRADE-IN DESCRIPTION | | COMPANY VEHICLE # 154881 | | |

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|---|--|------------------|------------------------|--------------------------|-------------------------|-------------------------|---|
| *PLATE INFORMATION *Requirements for Title and Registration and Registration Only Transactions SEE REVERSE SIDE FOR COMPLETE INSTRUCTIONS | | | | | | | |
| PLATE # (1) U496291 | 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 lien present) | | | |
| LIEN CODE | FIRST LIEN HOLDER SUNTRUST BANK | LIEN DATE 06/03/2014 | |
| STREET 120 E BALTIMORE ST 25 FL | CITY BALTIMORE | STATE MD | ZIP CODE 21202 |
| LIEN CODE | SECOND LIEN HOLDER | 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 | | 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: TCA 55-3-115 (submit if stolen 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 acknowledges 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 EMISSION: Trailer (total fees collected indicated certifies this form as a valid registration) | | | | | |
| REGISTRATION FEE 79.75 | CREDIT | LEASE FEE | TRANS FEE | CLERK FEE | ISSUANCE FEE 12.00 |
| COMPUTATION OF <input type="checkbox"/> SALES TAX <input type="checkbox"/> USE TAX | SALES OR USE TAX | SA TAX | LOCAL TAX | ADDITIONAL TAX | TITLE FEE 5.50 |
| *SERVICE OPT FEE | ORGAN DONOR | POSTAGE | VER | ID / RESIDENCY VERIFICATION | TOTAL TAX COLLECTED .00 |
| | | | | | CITY STICKER FEE 97.25 |