



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



155069

City Stickers:

NEW OR CURRENT TITLE NUMBER <b>93617200</b>	TRANSACTION CODE <b>N01</b>	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 NAMES) 4 (COMPANY) (COVER 22 CHARACTERS) <input type="checkbox"/> 4						MAC <input type="checkbox"/>	ILU <input type="checkbox"/>		
LAST NAME <b>BSE TRAILER LEASING LLC</b>			FIRST NAME			MIDDLE INITIAL			
ADDRESS 1 (MAILING) <b>10233 GOVERNOR LN BLVD</b>				ADDRESS 2 (PHYSICAL)					
CITY <b>WILLIAMSPORT</b>		STATE <b>MD</b>		ZIP CODE <b>21795</b>		CITY		STATE	ZIP CODE
CITY OF RESIDENCE/PRINCIPAL BUS OR INCORP LOCATION <b>HAMILTON 033</b>		PURCHASE DATE <b>07/14/2014</b>		*LEASED <input type="checkbox"/> *SERVICE OPTIONS <input type="checkbox"/> SEE REVERSE SIDE FOR INSTRUCTIONS		TELEPHONE # <b>301 582 1793</b>		*PLACARD/HEARING IMPAIRED CLS/YR	*INSURANCE POLICY #

VEHICLE INFORMATION															
VIN <b>3H3V532CXFT155069</b>		MAKE <b>HYTR</b>		MODEL <b>3H3</b>		YEAR <b>2015</b>		BODY <b>SE</b>		TITLE BRAND - translation <b>NEW</b>		CODE <b>N</b>	TYPE OF FUEL - translation		CODE <b>9</b>
SURRENDERED TITLE # <b>MSO</b>		STATE <b>TN</b>	PREVIOUS STATES TITLED		VEHICLE USE <b>F</b>	VEHICLE TYPE <b>S</b>	CURRENT MILEAGE		ODOMETER ACTUAL (0) NOT ACTUAL (8) INDICATOR OVER 10 YRS / 16,000 LBS (1) (List one) IN EXCESS OF MECHANICAL LIMITS (9)			CODE <b>1</b>			
COLOR CODE (enter appropriate code)* UPPER <b>O</b>		MOBILE HOME LGTH WDTH		# AXLES		GROSS VEHICLE WEIGHT		*VEHICLE TRADE-IN DESCRIPTION			COMPANY VEHICLE # <b>155069</b>				

PLATE INFORMATION (Required for Title and Registration and Renewal Only. (Required) SEE REVERSE SIDE FOR COMPLETE INSTRUCTIONS)															
PLATE #(1) <b>U523924</b>		CLASS CODE/ISSUE YR(1)(3) <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) <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 any exist)											
LIEN CODE		FIRST LIENHOLDER <b>SUNTRUST BANK</b>								LIEN DATE <b>07/14/2014</b>	
STREET <b>120 E BALTIMORE ST 25 FL</b>				CITY <b>BALTIMORE</b>				STATE <b>MD</b>		ZIP CODE <b>21202</b>	
LIEN CODE		SECOND LIENHOLDER								LIEN DATE	
STREET				CITY				STATE		ZIP CODE	

*LESSEE / REGISTRANT INFORMATION (OWNER OF PLATE)										
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 Duplicates Title - C.A. 55-3-115 (submit if applicable or altered Certificate of Title)										
<input type="checkbox"/> LOST	<input type="checkbox"/> STOLEN	<input type="checkbox"/> MUTILATED	<input type="checkbox"/> RTN'D 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 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 <b>07/17/2014</b>			
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INVOICE NUMBER <b>14198 @</b>		COUNTY NAME <b>HAMILTON</b>		CO NUMBER <b>33</b>		DATE OF APPLICATION <b>07/17/2014</b>		BY AUTHORITY OF REGISTRAR OF MOTOR VEHICLES (COUNTY CLERK) <b>W.F. (BILL) KNOWLES</b>			<b>KAR46</b>	
OFFICE USE ONLY REGISTRATION FEE <b>79.75</b>											EMISSION: Trailer	
CREDIT		LEASE FEE		TRANS FEE		CLERK FEE		ISSUANCE FEE <b>12.00</b>		TITLE FEE <b>5.50</b>		TOTAL TAX COLLECTED <b>.00</b>
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		CITY STICKER FEE
*SERVICE OPT FEE		ORGAN DONOR		POSTAGE		VER		ID / RESIDENCY VERIFICATION		*TOTAL FEES COLLECTED <b>97.25</b>		