



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

269613

NEW OR CURRENT TITLE NUMBER 75964061			TRANSACTION N1ode*	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) <input type="checkbox"/>			<input type="checkbox"/> MAO <input type="checkbox"/> ILU <input type="checkbox"/> V				
LAST NAME WELLS FARGO EQUIP FINANCE			MIDDLE INITIAL	LAST NAME	FIRST NAME	MIDDLE INITIAL				
ADDRESS 1 (MAILING) 2824 S RUTHERFORD BLVD			ADDRESS 2 (PHYSICAL)			CITY	STATE	ZIP CODE		
CITY MURFREESBORO			STATE TN	ZIP CODE 37130	ADDITIONAL OWNER					
CNTY OF INCORPORATION OR INCORP LOCATION RUTHERFORD		TYPE OF VEHICLE 75	PURCHASED 07/2007	*LEASED <input type="checkbox"/> *SERVICE OPTIONS SEE REVERSE SIDE FOR INSTRUCTIONS <input type="checkbox"/>	TELEPHONE 6158042699	*PLACARD / HEARING IMPAIRED CLS/YR	*INSURANCE POLICY #			
VEHICLE INFORMATION										
VIN 3H3V532C18T031002		MAKE HYTR	MODEL V12	YEAR 2008	BODY SE	TITLE BRAND -list the appropriate code (N) NEW (1) RECONSTRUCTED VEHICLE (U) USED (2) FLOOD DAMAGE (D) DEMO (3) SPECIALLY CONSTRUCTED (8) PARTS ONLY		CODE N	TYPE OF FUEL -list the appropriate code GAS (1) ELECTRIC/HYBRID (3) DIESEL (2) PROPANE (4)	CODE 9
SURRENDERED TITLE # MSO		STATE TN	PREVIOUS STATES TITLED		VEHICLE USE F	VEHICLE TYPE S	CURRENT MILEAGE	ODOMETER INDICATOR (List one) ACTUAL (5) NOT ACTUAL (4) OVER 10 YRS / 16,000 LBS (1) IN EXCESS OF MECHANICAL LIMITS (6)	CODE 1	
COLOR CODE (enter appropriate code)* UPPER M LOWER M		MOBILE HOME LNGTH	WDTH	# AXLES	GROSS VEHICLE WEIGHT		*VEHICLE TRADE-IN DESCRIPTION		COMPANY VEHICLE #	
PLATE INFORMATION * (required for Title and Registration and Registration Only Transactions) SEE REVERSE SIDE FOR COMPLETE INSTRUCTIONS										
PLATE #(1) UO36682	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) PERM		
TDS 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 LIENHOLDER							LIEN DATE		
STREET			CITY			STATE	ZIP CODE			
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"/> 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		SALESTAX PAID	*TAX EXEMPTION REASON / SALES TAX #			
DEALER NAME GREAT DANE			DEALER ADDRESS				DEALER # 9999			
* Required for Duplicate Title - T.C.A. 55-3-115 (submit illegible 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				
			WELLS FARGO EQUIP FINANCE BY:			11/2/2007 13:52				
INVOICE NUMBER 304 20071102		COUNTY NAME DAVIDSON	CO NUMBER 19	DATE OF APPLICATION 11/2/2007	BY AUTHORITY OF REGISTRAR OF MOTOR VEHICLES (COUNTY CLERK) JOHN ARRIOLA #304 GRAVESI XX					
(total fees collected indicated certifies this form as a valid registration)										
REGISTRATION FEE 79.75	CREDIT	LEASE FEE	TRANSACTION FEE	ISSUANCE FEE 12.00	TITLE FEE 5.00	TOTAL TAX COLLECTED				
COMPUTATION OF <input type="checkbox"/> SALES TAX <input type="checkbox"/> USE TAX		SALES OR USE TAX	LOCAL RATE	ADDITIONAL TAX	COLLECTED IN STATE OF	COUNTY WHEEL TAX EXEMPT	CITY WHEEL TAX			
*SERVICE OPT FEE		ORGAN DONOR	POSTAGE	VER	ID/PRESIGNATURE (3) Received: 11/02/2007	*TOTAL FEES COLLECTED CK 140				