



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

NEW OR CURRENT TITLE NUMBER 75964071			TRANSACTION NAME CODE N ^o F ^o D ^o E ^o E ^o	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"/>			MAO <input type="checkbox"/> ILU <input type="checkbox"/>				
LAST NAME FIRST NAME MIDDLE INITIAL WELLS FARGO EQUIP FINANCE			LAST NAME FIRST NAME MIDDLE INITIAL				
ADDRESS 1 (MAILING) 2824 S RUTHERFORD BLVD			ADDRESS 2 (PHYSICAL) CITY STATE ZIP CODE				
CITY STATE ZIP CODE MURFREESBORO TN 37130			ADDITIONAL OWNER				
CITY OF RESIDENCE/PRINCIPAL BUS OR INCORP LOCATION RUTHERFORD 75		PURCHASE DATE 10/26/2007	*LEASED <input type="checkbox"/> *SERVICE OPTIONS <input type="checkbox"/> SEE REVERSE SIDE FOR INSTRUCTIONS	TELEPHONE # 6156642699		*PLACARD / HEARING IMPAIRED CLS/YR	*INSURANCE POLICY #

VEHICLE INFORMATION							
VIN 3H3V532C98T031006		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 (S) PARTS ONLY	
SURRENDERED TITLE # MSO		STATE TN	PREVIOUS STATES TITLED		VEHICLE USE F	VEHICLE TYPE S	CURRENT MILEAGE
COLOR CODE (enter appropriate code) UPPER M LOWER M		MOBILE HOME LGH ^h	WDTH	# AXLES	GROSS VEHICLE WEIGHT		ODOMETER INDICATOR (List one) ACTUAL (9) NOT ACTUAL (8) OVER 10 YRS / 16,000 LBS (1) IN EXCESS OF MECHANICAL LIMITS (2)
*VEHICLE TRADE-IN DESCRIPTION COMPANY VEHICLE # 269617							

PLATE INFORMATION * (required for Title and Registration and Registration Only Transactions) SEE REVERSE SIDE FOR COMPLETE INSTRUCTIONS							
PLATE # (1) U036686	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 assigns 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 14: 9

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 GRAVES1 XX		
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(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
*SERVICE OFFICE	ORGAN DONOR	POSTAGE	VER	ID/FREQUENCY VERIFICATION (3) Received: 11/02/2007	*TOTAL FEES COLLECTED 96.75 CK 140	