



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

270822

| | | |
|---|------------------------|--------------------------|
| NEW OR CURRENT TITLE NUMBER 77440901 | TRANSACTION N CODE* | REGISTRATION ONLY NUMBER |
|---|------------------------|--------------------------|

OWNER INFORMATION *LEGAL STATUS: 1 (AND) 2 (OR) ENTER NAME CODE IN BOX 1 (SAME) 2 (DIFFERENT) 3 (MULTIPLE LAST NAMES) 4 (COMPANY) 5 (OVER 28 CHARACTERS) MAO ILU

| | | | | | |
|--------------------|---------------------|-------------------------|-----------|------------|----------------|
| LAST NAME WELLS | FIRST NAME FARGO | MIDDLE INITIAL EQUIP | LAST NAME | FIRST NAME | MIDDLE INITIAL |
|--------------------|---------------------|-------------------------|-----------|------------|----------------|

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|---|----------------------|------|-------|----------|
| ADDRESS 1 (MAILING) 2824 S RUTHERFORD BLVD | ADDRESS 2 (PHYSICAL) | CITY | STATE | ZIP CODE |
|---|----------------------|------|-------|----------|

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|----------------------|-------------|-------------------|------------------|
| CITY MURFREESBORO | STATE TN | ZIP CODE 37130 | ADDITIONAL OWNER |
|----------------------|-------------|-------------------|------------------|

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|--|----------------------------|---|---------------------------|------------------------------------|---------------------|
| CITY OF RESIDENCE (PRINCIPAL RES OR INCOMP LOCATION) RUTHERFORD | PURCHASE DATE 1/15/2008 | *LEASED <input type="checkbox"/> *SERVICE OPTIONS <input type="checkbox"/> SEE REVERSE SIDE FOR INSTRUCTIONS | TELEPHONE 615-884-2699 | *PLAGARD / HEARING IMPAIRED CLS/YR | *INSURANCE POLICY # |
|--|----------------------------|---|---------------------------|------------------------------------|---------------------|

VEHICLE INFORMATION

| | | | | | | | | |
|--------------------------|--------------|--------------|--------------|------------|---|-----------|---|-----------|
| VIN 1S12E95369E523034 | MAKE STRI | MODEL S75 | YEAR 2009 | 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 | 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 (3) NOT ACTUAL (3) OVER 10 YRS / 16,000 LBS (1) IN EXCESS OF MECHANICAL LIMITS (3) | CODE 1 |
|----------------------------|-------------|------------------------|------------------|-------------------|-----------------|--|-----------|

| | | | | | | |
|---|------------------|-------|---------|----------------------|-------------------------------|-------------------|
| COLOR CODE (enter appropriate code)* UPPER M LOWER M | MOBILE HOME LGTH | WIDTH | # 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) U039195 | 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 NAME CODE MAO ILU

| | |
|------|------|
| 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 # |
|------------|--------------------|----------------|---------------|-------------------------------------|

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|-----------------------------------|----------------|------------------|
| DEALER NAME STRICK CORPORATION | DEALER ADDRESS | DEALER # 9999 |
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* 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) WELLS FARGO EQUIP FINANCE BY: | DATE 3/5/2008 10:19 |
|------------------------------|---|------------------------|

| | | | | |
|--------------------------------|-------------------------|-----------------|---------------------------------|--|
| INVOICE NUMBER 304 20080305 | COUNTY NAME DAVIDSON | GO NUMBER 19 | DATE OF APPLICATION 3/5/2008 | BY AUTHORITY OF REGISTRAR OF MOTOR VEHICLES (COUNTY CLERK) JOHN ARRIOLA #304 GRAVES1 XX |
|--------------------------------|-------------------------|-----------------|---------------------------------|--|

OFFICE USE ONLY (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 | 10/REGISTRY DATES (3) Received: 03/05/2008 | *TOTAL FEES COLLECTED 96.75 CK | 144 |