



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

OFFICIAL VEHICLE REGISTRATION

278024

NEW OR CURRENT TITLE NUMBER 92855416		TRANSACTION CODE N01	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) 5 LAST NAME: WELLS FARGO EQUIPMENT FINANCE INC FIRST NAME: _____ MIDDLE INITIAL: _____ ADDRESS 1 (MAILING): 733 MARQUETTE AVE 700 ADDRESS 2 (PHYSICAL): 3100 WEST END AVE 530 CITY: MINNEAPOLIS MN 55402 CITY: NASHVILLE TN 37203 STATE: TN ZIP CODE: 37203 COUNTY OF RESIDENCE/PRINCIPAL BUS OR INCORP LOCATION: DAVIDSON 019 PURCHASE DATE: 10/08/2013 *LEASED <input type="checkbox"/> *SERVICE OPTIONS <input type="checkbox"/> TELEPHONE #: 6153395218 *PLACARD HEARING IMPAIRED CLSWR: _____ *INSURANCE POLICY #: _____				
VEHICLE INFORMATION		VIN: 1GRAP0622ED450828		
MAKE: GRDN	MODEL: CCC	YEAR: 2014	BODY: SE	TITLE BRAND - translation: NEW
SURRENDERED TITLE #: MSO		STATE: TN	PREVIOUS STATES TITLED: F S	VEHICLE USE: F S
COLOR CODE (enter appropriate code) UPPER: 9 LOWER: _____	MOBILE HOME LGTH: _____ WTH: _____	# 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): U502739	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
TEMP OPERATOR PERMIT #(3): _____	# OF SEATS(5): _____	ZONE(COUNTY NAME)(6): _____	USDOT / REGISTRANT #(7): _____	MOTOR CARRIER #(8): _____
LIEN INFORMATION (if lien exists)				
LIEN CODE: _____	FIRST LIENHOLDER: _____	CITY: _____	STATE: _____	ZIP CODE: _____ LIEN DATE: _____
LIEN CODE: _____	SECOND LIENHOLDER: _____	CITY: _____	STATE: _____	ZIP CODE: _____ LIEN DATE: _____
REGISTRANT INFORMATION (OWNER OF PLATE)				
REGISTRANT NAME: _____	LEGAL STATUS: _____	NAME CODE: _____	MAO: _____	ILU: _____
ADDRESS: _____	CITY: _____	STATE: _____	ZIP CODE: _____	
VEHICLE COST / TAX INFORMATION *(required for Title & Registration Transactions)		TAXABLE AMOUNT: _____	SALES TAX PAID: _____	*TAX EXEMPTION REASON / SALES TAX #: 100661600
SALE PRICE: _____	TRADE IN ALLOWANCE: _____	DEALER NAME: _____	DEALER ADDRESS: _____	DEALER #: 99999
*Required for Duplicate Title - T.C.A. 55-3-115 (a)(b)(4) (eligible 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
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.				DATE: 10/11/2013 10:22:05 AM
SIGNATURE OF CERTIFIER/OWNER: _____				POWER OF ATTORNEY/AUTHORIZED SIGNATURE (IF APPLICABLE): _____
INVOICE NUMBER: 13284 @	COUNTY NAME: DAVIDSON	CO NUMBER: 19	DATE OF APPLICATION: 10/11/2013	BY AUTHORITY OF REGISTRAR OF MOTOR VEHICLES (COUNTY CLERK): BRENDA WYNN
OFFICE USE ONLY REGISTRATION FEE: 79.75	CREDIT: _____	LEASE FEE: _____	TRANS FEE: _____	CLERK FEE: _____
COMPUTATION OF <input type="checkbox"/> SALES TAX <input type="checkbox"/> USE TAX	SALES OR USE TAX: _____	SA TAX: _____	LOCAL TAX: _____	ADDITIONAL TAX: _____
TOTAL TAX COLLECTED: .00		TOTAL FEES COLLECTED: 97.25		Change: 0.00 RDA-692