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

OFFICIAL VEHICLE REGISTRATION

278032

NEW OR CURRENT TITLE NUMBER	TRANSACTION CODE	REGISTRATION ONLY NUMBER
92855434	N01	

OWNER INFORMATION (LEGAL STATUS: 1 AND 2 ONLY) ENTER NAME CODE IN BOX (NAME PROFILE NOT SUPPLIED DEPT. NAMES 2 COMPANY SOVERACTIVE ACTIVE) 5 MAIL N TAX N

LAST NAME / FIRST NAME / MIDDLE INITIAL	LAST NAME / FIRST NAME / MIDDLE INITIAL
WELLS FARGO EQUIPMENT FINANCE INC	
ADDRESS 1 (MAILING): 733 MARQUETTE AVE 700	ADDRESS 2 (PHYSICAL): 3100 WEST END AVE 530
CITY: MINNEAPOLIS, STATE: MN, ZIP CODE: 55402	CITY: NASHVILLE, STATE: TN, ZIP CODE: 37203

CITY OF RESIDENCE/PRINCIPAL BUS OR INCORP LOCATION	PURCHASE DATE	*LEASED 0 *SERVICE OPTIONS (SEE REVERSE SIDE FOR INSTRUCTIONS)	TELEPHONE #	*PLACARD/HEARING IMPAIRED CLS/YR	*INSURANCE POLICY #
DAVIDSON 019	10/08/2013		6153395218		

VEHICLE INFORMATION

VIN	MAKE	MODEL	YEAR	BODY	TITLE BRAND - translation	CODE	TYPE OF FUEL - translation	CODE
1GRAP0621ED450836	GRDN	CCC	2014	SE	NEW	N		9

SURRENDERED TITLE #	STATE	PREVIOUS STATES TITLED	VEHICLE USE	VEHICLE TYPE	CURRENT MILEAGE	ODOMETER INDICATOR (List one) ACTUAL (0) NOT ACTUAL (8) OVER 10 YRS / 10,000 LBS (1) IN EXCESS OF MECHANICAL LIMITS (9)	CODE
MSO	TN		F	S			1

COLOR CODE (enter appropriate code)* UPPER / LOWER	MOBILE HOME LGTH / WDTH	# AXLES	GROSS VEHICLE WEIGHT	*VEHICLE TRADE-IN DESCRIPTION	COMPANY VEHICLE #
9					

PLATE INFORMATION (Required for title and registration and Renewal/Not Only Transfer(2)) SEE REVERSE SIDE FOR COMPLETE INSTRUCTIONS

PLATE #(1)	CLASSCODE/ISSUEYR(1)(3)	VALIDATION #(1)	COUNTY STICKER #(1)	CITY STICKER #(1)(2)	*PLATE #(TRADE IN)(2)	CLASS CODE/ISSUE YR(2)	EXPIRATION DATE (1)(2)(3)
U502747	8020/1994						PERMANENT

TDR STICKER #(4)	TEMP OPERATOR PERMIT #(3)	# OF SEATS(5)	ZONE(COUNTY NAME)(6)	USDOT / REGISTRANT #(7)	MOTOR CARRIER #(8)

LIEN INFORMATION (If applicable)

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

NAME	NAME

ADDRESS	CITY	STATE	ZIP CODE

VEHICLE COST / TAX INFORMATION (Required for Motor & Vehicle Vehicles)

SALE PRICE	TRADE IN ALLOWANCE	TAXABLE AMOUNT	SALESTAX PAID	*TAX EXEMPTION REASON / SALES TAX #
				100661600

DEALER NAME	DEALER ADDRESS	DEALER #
	,	99999

(Required for Duplicate Title - T.C.A. 55-3-115 (Submit 48 hours of the date of the Certificate of Title)

☐ LOST ☐ STOLEN ☐ MUTILATED ☐ RTN'D DUE TO NON DELIEVERY ☐ ALTERED ☐ 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 10/11/2013 10:27:47 AM
		10/11/2013

INVOICE NUMBER	COUNTY NAME	CO NUMBER	DATE OF APPLICATION	BY AUTHORITY OF REGISTRAR OF MOTOR VEHICLES(COUNTY CLERK)
13284 @	DAVIDSON	19	10/11/2013	BRENDA WYNN MSMITH - 1

OFFICE USE ONLY EMISSION: TRAILER Received 10/08/2013 (total fees collected indicated certifies this form as a valid registration)

REGISTRATION FEE	CREDIT	LEASE FEE	TRANS FEE	CLERK FEE	ISSUANCE FEE	TITLE FEE	TOTAL TAX COLLECTED
79.75					12.00	5.50	.00

COMPUTATION OF ☐ SALES TAX ☐ USE TAX	SALES OR USE TAX	SA TAX	LOCAL TAX	ADDITIONAL TAX	COLLECTED IN STATE OF	COUNTY WHEEL TAX	CITY WHEEL TAX

*SERVICE OPT FEE	ORGAN DONOR	POSTAGE	VER	ID / RESIDENCY VERIFICATION	*TOTAL FEES COLLECTED
					97.25

SF-1357 Port: WK303/DR304/8020 Cash: 0.00 Check: 0.00 Check#: Credit: 0.00 Auth#: Change: 0.00 RDA-692