



# OFFICIAL VEHICLE REGISTRATION

NEW OR CURRENT TITLE NUMBER <b>91401220</b>		TRANSACTION CODE <b>N01</b>	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 checked="" type="checkbox"/> MAO <input checked="" type="checkbox"/> ILU <input checked="" type="checkbox"/>				
LAST NAME <b>WELLS FARGO EQUIPMENT FINANCE</b>		FIRST NAME <b>WELLS FARGO EQUIPMENT FINANCE</b>	MIDDLE INITIAL	MIDDLE INITIAL
ADDRESS 1 (MAILING) <b>3100 WEST END AVE STE 530</b>		ADDRESS 2 (PHYSICAL) <b>3668 S GEYER RD STE 350</b>		
CITY <b>NASHVILLE</b>	STATE <b>TN</b>	ZIP CODE <b>37203</b>	CITY <b>SUNSET HILLS</b>	STATE <b>MO</b>
CITY OF RESIDENCE-PRINCIPAL BUS OR INCORP LOCATION <b>DAVIDSON 019</b>		PURCHASE DATE <b>07/01/2013</b>	*LEASED <input checked="" type="checkbox"/> *SERVICE OPTIONS <input type="checkbox"/> <small>SEE REVERSE SIDE FOR INSTRUCTIONS</small>	TELEPHONE # <b>339 5218</b>
*PLACARD/HEARING IMPAIRED CLSYR		*INSURANCE POLICY #		
VEHICLE INFORMATION				
VIN <b>1JJV532D2EL807741</b>	MAKE <b>WABA</b>	MODEL <b>DVL</b>	YEAR <b>2014</b>	BODY <b>SE</b>
TITLE BRAND - translation <b>NEW</b>		CODE <b>N</b>	TYPE OF FUEL - translation <b>9</b>	
SURRENDERED TITLE # <b>MSO</b>	STATE <b>TN</b>	PREVIOUS STATES TITLED	VEHICLE USE <b>B</b>	VEHICLE TYPE <b>S</b>
CURRENT MILEAGE		ODOMETER ACTUAL (9) NOT ACTUAL (8) INDICATOR OVER 10 YRS / 15,000 LBS (1) <small>(List one) IN EXCESS OF MECHANICAL LIMITS (9)</small>		CODE <b>1</b>
COLOR CODE (enter appropriate code) UPPER <b>9</b>	MOBILE HOME LGTH <b>9</b>	# AXLES	GROSS VEHICLE WEIGHT	VEHICLE TRADE-IN DESCRIPTION
				COMPANY VEHICLE # <b>278556</b>
PLATE INFORMATION *Required for Title and Registration and Registration Only Transactions SEE REVERSE SIDE FOR COMPLETE INSTRUCTIONS				
PLATE #(1) <b>U445559</b>	CLASS CODE/ISSUE YR (1)(3) <b>8020/1994</b>	VALIDATION #(1)	COUNTY STICKER #(1)	CITY STICKER #(1)(2)
*PLATE #(TRADE IN)(2)	CLASS CODE/ISSUE YR (2)	EXPIRATION DATE (1)(2)(3) <b>PERMANENT</b>		
TDR 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 # <b>100551600</b>
DEALER NAME <b>WELLS FARGO EQUIPMENT FINANCE</b>		DEALER ADDRESS <b>3100 WEST END AVE STE 530 NASHVILLE, TN 37203</b>		DEALER # <b>2</b>
*Required for Duplicate Title - T.C.A. 55-3-115 (submit if 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
<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 <b>7/10/2013 11:38:52 AM</b> <b>07/10/2013</b>
INVOICE NUMBER <b>13191 @</b>	COUNTY NAME <b>DAVIDSON</b>	CO NUMBER <b>19</b>	DATE OF APPLICATION <b>07/10/2013</b>	BY AUTHORITY OF REGISTRAR OF MOTOR VEHICLES (COUNTY CLERK) <b>BRENDA WYNN</b>
OFFICE USE ONLY <b>Received 07/02/2013</b> (total fees collected indicated certifies this form as a valid registration)				
REGISTRATION FEE <b>79.75</b>	CREDIT	LEASE FEE	TRANS FEE	ISSUANCE FEE <b>12.00</b>
COMPUTATION OF SALES OR USE TAX		SA TAX	LOCAL TAX	TITLE FEE <b>5.50</b>
*SALES TAX <input type="checkbox"/> USE TAX		ADDITIONAL TAX	COLLECTED IN STATE OF	TOTAL TAX COLLECTED <b>.00</b>
*SERVICE OPT FEE	ORGAN DONOR	POSTAGE	VER	ID / RESIDENCY VERIFICATION
				*TOTAL FEES COLLECTED <b>97.25</b>

278556