



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



STATE

NEW OR CURRENT TITLE NUMBER <b>93150429</b>	TRANSACTION CODE <b>N01</b>	REGISTRATION ONLY NUMBER
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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"/> 4 MAO <input checked="" type="checkbox"/> ILU <input checked="" type="checkbox"/>					
LAST NAME <b>WELLS FARGO EQUIP FIN INC</b>			FIRST NAME <b>WELLS FARGO EQUIP FIN INC</b>		
ADDRESS 1 (MAILING) <b>733 MARQUETTE AVE 700</b>			ADDRESS 2 (PHYSICAL) <b>3100 WEST END AVE 530</b>		
CITY <b>MINNEAPOLIS</b>		STATE <b>MN</b>	ZIP CODE <b>55402</b>	CITY <b>NASHVILLE</b>	
STATE <b>MN</b>		ZIP CODE <b>55402</b>		STATE <b>TN</b>	
ZIP CODE <b>55402</b>		CITY <b>NASHVILLE</b>		ZIP CODE <b>37203</b>	
CITY OF RESIDENCE/PRINCIPAL BUS OR INCORP LOCATION <b>DAVIDSON 019</b>	PURCHASE DATE <b>03/03/2014</b>	*LEASED <input checked="" type="checkbox"/> *SERVICE OPTIONS <input type="checkbox"/> <small>SEE REVERSE SIDE FOR INSTRUCTIONS</small>	TELEPHONE # <b>9999999</b>	*PLACARD/HEARING IMPAIRED CLS/YR	*INSURANCE POLICY #

279038

VEHICLE INFORMATION										
VIN <b>1GRAP0627FT596777</b>	MAKE <b>GDAN</b>	MODEL <b>VAN</b>	YEAR <b>2015</b>	BODY <b>SE</b>	TITLE BRAND - translation <b>NEW</b>	CODE <b>N</b>	TYPE OF FUEL - translation	CODE <b>9</b>		
SURRENDERED TITLE # <b>M50</b>	STATE <b>TN</b>	PREVIOUS STATES TITLED	VEHICLE USE <b>F</b>	VEHICLE TYPE <b>S</b>	CURRENT MILEAGE	ODOMETER ACTUAL (0) NOT ACTUAL (0) INDICATOR OVER 10 YRS / 16,000 LBS (1) (LH one) IN EXCESS OF MECHANICAL LIMITS (0)		CODE <b>1</b>		
COLOR CODE (enter appropriate code) UPPER <b>O</b>	MOBILE HOME LOT#	WIDTH	# AXLES	GROSS VEHICLE WEIGHT	*VEHICLE TRADE-IN DESCRIPTION		COMPANY VEHICLE # <b>279038</b>			

PLATE INFORMATION *(required for Title and Registration and Registration Only Transactions) SEE REVERSE SIDE FOR COMPLETE INSTRUCTIONS									
PLATE # (1) <b>U508278</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>		
TOR 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)									
NAME					NAME				
ADDRESS					ADDRESS				
CITY					CITY				
STATE					STATE				
ZIP CODE					ZIP CODE				

VEHICLE COST / TAX INFORMATION *(required for Title & Registration Transactions)									
SALE PRICE	TRADE IN ALLOWANCE			TAXABLE AMOUNT	SALES TAX 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 Titles - T.C.A. 55-3-115 (submit Intentional or altered Certificate of Title)									
<input type="checkbox"/> LOST	<input type="checkbox"/> STOLEN	<input type="checkbox"/> MUTILATED	<input type="checkbox"/> RINTD DUE TO NON DELIEVERY	<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 employees 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>3/11/2014 8:23:36 AM</b>	
						<b>03/11/2014</b>	

INVOICE NUMBER <b>14070 @</b>	COUNTY NAME <b>DAVIDSON</b>	CO NUMBER <b>19</b>	DATE OF APPLICATION <b>03/11/2014</b>	BY AUTHORITY OF REGISTRAR OF MOTOR VEHICLES (COUNTY CLERK) <b>BRENDA WYNN</b>		<b>LINEWEAVER - 1</b>
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OFFICE USE ONLY									
REGISTRATION FEE <b>79.75</b>	CREDIT	LEASE FEE	TRANS FEE	CLERK FEE	ISSUANCE FEE <b>12.00</b>	TITLE FEE <b>5.50</b>	TOTAL TAX COLLECTED <b>.00</b>		
COMPUTATION OF	SALES OR USE TAX	SA TAX	LOCAL TAX	ADDITIONAL TAX	COLLECTED IN STATE OF	COUNTY WHEEL TAX	CITY WHEEL TAX		
<input type="checkbox"/> SALES TAX <input type="checkbox"/> USE TAX	*SERVICE OPT FEE		ORGAN DONOR	POSTAGE	VER	ID / RESIDENCY VERIFICATION	*TOTAL FEES COLLECTED <b>97.25</b>		