



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



STATE

|  |                                 |                          |
|--|---------------------------------|--------------------------|
| NEW OR CURRENT TITLE NUMBER<br><b>95238905</b> | TRANSACTION CODE*<br><b>N01</b> | 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<br><b>WELLS FARGO EQUIPMENT FIN INC</b> | FIRST NAME | MIDDLE INITIAL | LAST NAME | FIRST NAME | MIDDLE INITIAL |
|---|------------|----------------|-----------|------------|----------------|

|   |  |
|---|--|
| ADDRESS 1 (MAILING)<br><b>3668 S GEYER RD 350</b> | ADDRESS 2 (PHYSICAL)<br><b>733 MARQUETTE AVE 700</b> |
|---|--|

|                         |                    |                          |                            |                    |                          |
|-------------------------|--------------------|--------------------------|----------------------------|--------------------|--------------------------|
| CITY<br><b>ST LOUIS</b> | STATE<br><b>MO</b> | ZIP CODE<br><b>63127</b> | CITY<br><b>MINNEAPOLIS</b> | STATE<br><b>MN</b> | ZIP CODE<br><b>55402</b> |
|-------------------------|--------------------|--------------------------|----------------------------|--------------------|--------------------------|

|  |                                    |  |                                  |                                  |                     |
|--|------------------------------------|--|----------------------------------|----------------------------------|---------------------|
| TYPE OF RESIDENCE/PRINCIPAL BUS OR INCORP. LOCATION<br><b>DAVIDSON 019</b> | PURCHASE DATE<br><b>01/30/2015</b> | *LEASED <input type="checkbox"/> *SERVICE OPTIONS <input type="checkbox"/><br><small>SEE REVERSE SIDE FOR INSTRUCTIONS</small> | TELEPHONE #<br><b>3144223862</b> | *PLACARD/HEARING IMPAIRED CLS/YR | *INSURANCE POLICY # |
|--|------------------------------------|--|----------------------------------|----------------------------------|---------------------|

VEHICLE INFORMATION

|                                 |                     |                     |                     |                   |   |                  |                            |                  |
|---------------------------------|---------------------|---------------------|---------------------|-------------------|---|------------------|----------------------------|------------------|
| VIN<br><b>3H3V532C5FT671033</b> | MAKE<br><b>HYTR</b> | MODEL<br><b>VAN</b> | YEAR<br><b>2015</b> | BODY<br><b>SE</b> | TITLE BRAND - translation<br><b>NEW</b> | CODE<br><b>N</b> | TYPE OF FUEL - translation | CODE<br><b>9</b> |
|---------------------------------|---------------------|---------------------|---------------------|-------------------|---|------------------|----------------------------|------------------|

|                                   |                    |                        |                         |                          |                 |  |                  |
|-----------------------------------|--------------------|------------------------|-------------------------|--------------------------|-----------------|--|------------------|
| SURRENDERED TITLE #<br><b>MSO</b> | STATE<br><b>TN</b> | PREVIOUS STATES TITLED | VEHICLE USE<br><b>F</b> | VEHICLE TYPE<br><b>S</b> | CURRENT MILEAGE | ODOMETER ACTUAL (0) NOT ACTUAL (8)<br>INDICATOR OVER 10 YRS / 18,000 LBS (1)<br>IN EXCESS OF MECHANICAL LIMITS (9) | CODE<br><b>1</b> |
|-----------------------------------|--------------------|------------------------|-------------------------|--------------------------|-----------------|--|------------------|

|  |                     |       |         |                      |                               |                                    |
|--|---------------------|-------|---------|----------------------|-------------------------------|------------------------------------|
| COLOR CODE (enter appropriate code)<br>UPPER<br><b>O</b> | MOBILE HOME<br>LGTH | WIDTH | # AXLES | GROSS VEHICLE WEIGHT | *VEHICLE TRADE-IN DESCRIPTION | COMPANY VEHICLE #<br><b>283760</b> |
|--|---------------------|-------|---------|----------------------|-------------------------------|------------------------------------|

PLATE INFORMATION \*required for Title and Registration and Registration Only Transactions SEE REVERSE SIDE FOR COMPLETE INSTRUCTIONS

|                               |  |                  |                      |                       |                         |                         |   |
|-------------------------------|--|------------------|----------------------|-----------------------|-------------------------|-------------------------|---|
| PLATE # (1)<br><b>U566758</b> | CLASS CODE/ISSUE YR (1)(3)<br><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)<br><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): 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 | SALES TAX PAID | *TAX EXEMPTION REASON / SALES TAX #<br><b>100551600</b> |
|------------|--------------------|----------------|----------------|---|

|   |  |                      |
|---|--|----------------------|
| DEALER NAME<br><b>WELLS FARGO EQUIPMENT FINANCE</b> | DEALER ADDRESS<br><b>3100 WEST END AVE STE 530 NASHVILLE, TN 37203</b> | DEALER #<br><b>2</b> |
|---|--|----------------------|

\*Required for Duplicate Title - T.O.A. 55-3-115 (submit legible or altered Certificate of Title)

|                               |                                 |                                    |  |                                  |                                    |
|-------------------------------|---------------------------------|------------------------------------|--|----------------------------------|------------------------------------|
| <input type="checkbox"/> LOST | <input type="checkbox"/> STOLEN | <input type="checkbox"/> MUTILATED | <input type="checkbox"/> RTRND DUE TO NON DELIVERY | <input type="checkbox"/> ALTERED | <input type="checkbox"/> ILLEGIBLE |
|-------------------------------|---------------------------------|------------------------------------|--|----------------------------------|------------------------------------|

|                              |  |  |
|------------------------------|--|--|
| SIGNATURE OF CERTIFIER/OWNER | POWER OF ATTORNEY/AUTHORIZED SIGNATURE (IF APPLICABLE) | DATE<br><b>2/3/2016 12:40:49 PM</b><br><b>02/03/2015</b> |
|------------------------------|--|--|

|                                  |                                |                        |  |  |                         |
|----------------------------------|--------------------------------|------------------------|--|--|-------------------------|
| INVOICE NUMBER<br><b>15034 @</b> | COUNTY NAME<br><b>DAVIDSON</b> | CO NUMBER<br><b>19</b> | DATE OF APPLICATION<br><b>02/03/2015</b> | BY AUTHORITY OF REGISTRAR OF MOTOR VEHICLES/COUNTY CLERK<br><b>BRENDA WYNN</b> | <b>DLR - LINEWEAVER</b> |
|----------------------------------|--------------------------------|------------------------|--|--|-------------------------|

|   |        |           |           |           |                              |                          |                                   |
|---|--------|-----------|-----------|-----------|------------------------------|--------------------------|-----------------------------------|
| OFFICE USE ONLY<br>REGISTRATION FEE<br><b>79.75</b> | CREDIT | LEASE FEE | TRANS FEE | CLERK FEE | ISSUANCE FEE<br><b>12.00</b> | TITLE FEE<br><b>5.50</b> | TOTAL TAX COLLECTED<br><b>.00</b> |
|---|--------|-----------|-----------|-----------|------------------------------|--------------------------|-----------------------------------|

|   |                  |        |           |                |                       |                  |                |
|---|------------------|--------|-----------|----------------|-----------------------|------------------|----------------|
| COMPUTATION OF<br><input type="checkbox"/> SALES TAX <input type="checkbox"/> 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<br><b>97.25</b> |
|------------------|-------------|---------|-----|-----------------------------|---------------------------------------|

283760