



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



City Stickers:

NEW OR CURRENT TITLE NUMBER 93596827		TRANSACTION CODE N01	REGISTRATION ONLY NUMBER		STATE
OWNER INFORMATION *LEGAL STATUS: (1) (AND) 2 (OR) 3 ENTER NAME CODE IN BOX 1 (SAME 2 DIFFERENT 3 MULTIPLE LAST NAMES 4 (COMPANY) 5 OVER 20 CHARACTERS) 4 MAO ☒ N ☐ LL ☐ N					
LAST NAME BSE TRAILER LEASING LLC		FIRST NAME	MIDDLE INITIAL	LAST NAME	FIRST NAME MIDDLE INITIAL
ADDRESS 1 (MAILING) 10233 GOVERNOR LN BLVD		ADDRESS 2 (PHYSICAL)			
CITY WILLIAMSPORT		STATE MD	ZIP CODE 21795	CITY	STATE ZIP CODE
CITY OF RESIDENCE/PRINCIPAL BUS OR INCOME LOCATION HAMILTON 033		PURCHASE DATE 04/30/2014	*LEASED ☒ *SERVICE OPTIONS ☐ SEE REVERSE SIDE FOR INSTRUCTIONS	TELEPHONE # 301 582 1793	*PLACARD/HEARING IMPAIRED CLS/YR *INSURANCE POLICY #
VEHICLE INFORMATION					
VIN 3H3V532C8FT328104		MAKE HYTR	MODEL 3H3	YEAR 2015	BODY SE
SURRENDERED TITLE # MSO		STATE TN	PREVIOUS STATES TITLED	VEHICLE USE F	VEHICLE TYPE S
COLOR CODE (enter appropriate code)* UPPER O		MOBILE HOME LGTH	WIDTH	# AXLES	GROSS VEHICLE WEIGHT
*VEHICLE TRADE-IN DESCRIPTION		COMPANY VEHICLE # 328104		CODE 9	
PLATE INFORMATION (required for Title and Registration and Registration Only Transactions) SEE REVERSE SIDE FOR COMPLETE INSTRUCTIONS					
PLATE # (1) U493204		CLASS CODE/ISSUE YR (1)(2) 8020/1994	VALIDATION # (1)	COUNTY STICKER # (1)	CITY STICKER # (1)(2)
TDR STICKER # (4)		TEMP OPERATOR PERMIT # (3)	# OF SEATS (5)	ZONE (COUNTY NAME) (5)	USDOT / REGISTRANT # (7)
MOTOR CARRIER # (8)		PERMANENT			
LIEN INFORMATION (if any present)					
LIEN CODE		FIRST LIENHOLDER SUNTRUST BANK			LIEN DATE 04/30/2014
STREET 120 E BALTIMORE ST 25 FL		CITY BALTIMORE		STATE MD	ZIP CODE 21202
LIEN CODE		SECOND LIENHOLDER			LIEN DATE
STREET		CITY		STATE	ZIP CODE
*LESSEE / REGISTRANT INFORMATION (OWNER OF PLATE)					
NAME		LEGAL STATUS		NAME CODE	MAO ☐ LL ☐ LU ☐
ADDRESS		CITY		STATE	ZIP CODE
VEHICLE COST / TAX INFORMATION (required for Title & Registration Transactions)					
SALE PRICE		TRADE IN ALLOWANCE		TAXABLE AMOUNT	SALESTAX PAID
DEALER NAME		DEALER ADDRESS		DEALER #	
*Required for Duplicate Title (TCA 55-3-115) (submit Non-Physical Certified Certificate of Title)					
☐ LOST		☐ STOLEN		☐ VULNERATED	
☐ RTND DUE TO NON DELIVERY		☐ 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 05/07/2014
INVOICE NUMBER 14127 @		COUNTY NAME HAMILTON	CO NUMBER 33	DATE OF APPLICATION 05/07/2014	BY AUTHORITY OF REGISTRAR OF MOTOR VEHICLES (COUNTY CLERK) W.F. (BILL) KNOWLES
OFFICE USE ONLY REGISTRATION FEE 79.75		EMISSION: Trailer			
COMPUTATION OF ☐ SALES TAX ☒ USE TAX		TOTAL FEES COLLECTED 97.25			
*SERVICE OPT FEE		ORGAN DONOR	POSTAGE	VER	ID / RESIDENCY VERIFICATION
*TOTAL FEES COLLECTED 97.25					