

Columbus

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

## City Stickers:

|                                                                                                                                                                                                                                                                                                      |  |                                                        |                                                                                                                            |                                          |                                                                                          |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------|------------------------------------------|------------------------------------------------------------------------------------------|
| NEW OR CURRENT TITLE NUMBER<br><b>93597002</b>                                                                                                                                                                                                                                                       |  | TRANSACTION CODE<br><b>N01</b>                         | REGISTRATION ONLY NUMBER                                                                                                   |                                          | STATE                                                                                    |
| OWNER INFORMATION *LEGAL STATUS (AND) 2 (OR) 1. ENTRY NAME CODE IN BOX 1 (SAME) 2 (DIFFERENT) 3 (MULTIPLE LAST NAMES) 4 (COMPANY) 5 (OVER 26 CHARACTERS) <b>4</b>                                                                                                                                    |  |                                                        |                                                                                                                            |                                          |                                                                                          |
| LAST NAME<br><b>BSE TRAILER LEASING LLC</b>                                                                                                                                                                                                                                                          |  | FIRST NAME                                             | MIDDLE INITIAL                                                                                                             | LAST NAME                                | MIDDLE INITIAL                                                                           |
| ADDRESS 1 (MAILING)<br><b>10233 GOVERNOR LN BLVD</b>                                                                                                                                                                                                                                                 |  | ADDRESS 2 (PHYSICAL)                                   |                                                                                                                            |                                          |                                                                                          |
| CITY<br><b>WILLIAMSPORT</b>                                                                                                                                                                                                                                                                          |  | STATE<br><b>MD</b>                                     | ZIP CODE<br><b>21795</b>                                                                                                   | CITY                                     | STATE ZIP CODE                                                                           |
| CITY OF RESIDENCE/PRINCIPAL BUS OR INCOMP LOCATION<br><b>HAMILTON 033</b>                                                                                                                                                                                                                            |  | PURCHASE DATE<br><b>04/30/2014</b>                     | *LEASED <input checked="" type="checkbox"/> *SERVICE OPTIONS <input type="checkbox"/><br>SEE REVERSE SIDE FOR INSTRUCTIONS | TELEPHONE #<br><b>301 582 1793</b>       | *PLACARD/HEARING IMPAIRED CLS/YR<br>*INSURANCE POLICY #                                  |
| VEHICLE INFORMATION                                                                                                                                                                                                                                                                                  |  |                                                        |                                                                                                                            |                                          |                                                                                          |
| VIN<br><b>3H3V532C8FT328166</b>                                                                                                                                                                                                                                                                      |  | MAKE<br><b>HYTR</b>                                    | MODEL<br><b>3H3</b>                                                                                                        | YEAR<br><b>2015</b>                      | BODY<br><b>SE</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>                                                                 |
| COLOR CODE (enter appropriate code)*<br>UPPER LOWER<br><b>O</b>                                                                                                                                                                                                                                      |  | MOBILE HOME LGTH<br>WOTH                               | # AXLES                                                                                                                    | GROSS VEHICLE WEIGHT                     | *VEHICLE TRADE-IN DESCRIPTION                                                            |
| PLATE INFORMATION (transfer for Title and Registration and Registration Only Transactions) SEE REVERSE SIDE FOR COMPLETE INSTRUCTIONS                                                                                                                                                                |  | COMPANY VEHICLE #<br><b>328166</b>                     |                                                                                                                            |                                          |                                                                                          |
| PLATE # (1)<br><b>U493266</b>                                                                                                                                                                                                                                                                        |  | CLASS CODE/ISSUE YR (1)(3)<br><b>8020/1994</b>         | VALIDATION # (1)                                                                                                           | COUNTY STICKER # (1)                     | CITY STICKER # (1)(2)                                                                    |
| TDR STICKER # (4)                                                                                                                                                                                                                                                                                    |  | TEMP OPERATOR PERMIT # (3)                             | # OF SEATS (5)                                                                                                             | ZONE (COUNTY NAME) (6)                   | USDOT / REGISTRANT # (7)                                                                 |
| LIEN INFORMATION (if lien present)                                                                                                                                                                                                                                                                   |  | MOTOR CARRIER # (8)                                    |                                                                                                                            |                                          |                                                                                          |
| LIEN CODE                                                                                                                                                                                                                                                                                            |  | FIRST LIENHOLDER<br><b>SUNTRUST BANK</b>               |                                                                                                                            |                                          | LIEN DATE<br><b>04/30/2014</b>                                                           |
| STREET<br><b>120 E BALTIMORE ST 25 FL</b>                                                                                                                                                                                                                                                            |  | CITY<br><b>BALTIMORE</b>                               |                                                                                                                            |                                          | STATE<br><b>MD</b>                                                                       |
| LIEN CODE                                                                                                                                                                                                                                                                                            |  | SECOND LIENHOLDER                                      |                                                                                                                            |                                          | ZIP CODE<br><b>21202</b>                                                                 |
| STREET                                                                                                                                                                                                                                                                                               |  | CITY                                                   |                                                                                                                            |                                          | STATE ZIP CODE                                                                           |
| *LESSOR / REGISTRANT INFORMATION (OWNER OF PLATE)                                                                                                                                                                                                                                                    |  |                                                        |                                                                                                                            |                                          |                                                                                          |
| NAME                                                                                                                                                                                                                                                                                                 |  | LEGAL STATUS                                           |                                                                                                                            | NAME CODE                                | MAO <input type="checkbox"/> ILU <input type="checkbox"/>                                |
| 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, 11-13-A, 55-3-116 (submittal) (altered Certificate of Title)                                                                                                                                                                                                          |  |                                                        |                                                                                                                            |                                          |                                                                                          |
| <input type="checkbox"/> LOST                                                                                                                                                                                                                                                                        |  | <input type="checkbox"/> STOLEN                        |                                                                                                                            | <input type="checkbox"/> MUTILATED       |                                                                                          |
| <input type="checkbox"/> RTN'D 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<br><b>05/07/2014</b>                                                                |
| INVOICE NUMBER<br><b>14127 @</b>                                                                                                                                                                                                                                                                     |  | COUNTY NAME<br><b>HAMILTON</b>                         | CO NUMBER<br><b>33</b>                                                                                                     | DATE OF APPLICATION<br><b>05/07/2014</b> | BY AUTHORITY OF REGISTRAR OF MOTOR VEHICLES (COUNTY CLERK)<br><b>W.F. (BILL) KNOWLES</b> |
| OFFICE USE ONLY<br>REGISTRATION FEE<br><b>79.75</b>                                                                                                                                                                                                                                                  |  | EMISSION: Trailer                                      |                                                                                                                            | HCM27                                    |                                                                                          |
| COMPUTATION OF<br><input type="checkbox"/> SALES TAX <input type="checkbox"/> USE TAX                                                                                                                                                                                                                |  | LEASE FEE                                              |                                                                                                                            | TRANS FEE                                |                                                                                          |
| *SERVICE OPT FEE                                                                                                                                                                                                                                                                                     |  | ORGAN DONOR                                            |                                                                                                                            | POSTAGE                                  |                                                                                          |
| SALES OR USE TAX                                                                                                                                                                                                                                                                                     |  | SA TAX                                                 |                                                                                                                            | LOCAL TAX                                |                                                                                          |
| ADDITIONAL TAX                                                                                                                                                                                                                                                                                       |  | COLLECTED IN STATE OF                                  |                                                                                                                            | COUNTY WHEEL TAX                         |                                                                                          |
| CITY STICKER FEE                                                                                                                                                                                                                                                                                     |  | TOTAL TAX COLLECTED<br><b>12.00</b>                    |                                                                                                                            | TITLE FEE<br><b>5.50</b>                 |                                                                                          |
| TOTAL TAX COLLECTED<br><b>97.25</b>                                                                                                                                                                                                                                                                  |  | TOTAL TAX COLLECTED<br><b>.00</b>                      |                                                                                                                            | TOTAL TAX COLLECTED<br><b>.00</b>        |                                                                                          |
| ID / RESIDENCY VERIFICATION                                                                                                                                                                                                                                                                          |  | VER                                                    |                                                                                                                            | *TOTAL FEES COLLECTED<br><b>97.25</b>    |                                                                                          |