

Columbus



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



## City Stickers:

|                                                                                                                                                                                                                                                                                                    |                                                |                                                                                                                 |                                                    |                                                                                                 |                                         |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------|-----------------------------------------------------------------------------------------------------------------|----------------------------------------------------|-------------------------------------------------------------------------------------------------|-----------------------------------------|
| NEW OR CURRENT TITLE NUMBER<br><b>93597047</b>                                                                                                                                                                                                                                                     |                                                | TRANSACTION CODE<br><b>N01</b>                                                                                  | 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 28 CHARACTERS) 6                                                                                                                                           |                                                |                                                                                                                 |                                                    |                                                                                                 |                                         |
| LAST NAME<br><b>BSE TRAILER LEASING LLC</b>                                                                                                                                                                                                                                                        |                                                | FIRST NAME                                                                                                      | MIDDLE INITIAL                                     | MAG <input checked="" type="checkbox"/> N <input type="checkbox"/> H <input type="checkbox"/> I |                                         |
| 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 INCORP LOCATION<br><b>HAMILTON 033</b>                                                                                                                                                                                                                          | PURCHASE DATE<br><b>04/30/2014</b>             | *LEASED <input type="checkbox"/> *SERVICE OPTIONS <input type="checkbox"/><br>SEE REVERSE SIDE FOR INSTRUCTIONS | TELEPHONE #<br><b>301 582 1793</b>                 | *PLACARD/HEARING IMPAIRED CLSYR                                                                 | *INSURANCE POLICY #                     |
| VEHICLE INFORMATION                                                                                                                                                                                                                                                                                |                                                |                                                                                                                 |                                                    |                                                                                                 |                                         |
| VIN<br><b>3H3V532C6FT328196</b>                                                                                                                                                                                                                                                                    | MAKE<br><b>HYTR</b>                            | MODEL<br><b>3H3</b>                                                                                             | YEAR<br><b>2015</b>                                | BODY<br><b>SE</b>                                                                               | TITLE BRAND - translation<br><b>NEW</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                         |
| COLOR CODE (enter appropriate code)*<br>UPPER <b>O</b>                                                                                                                                                                                                                                             | MOBILE HOME<br>LGTH WIDTH                      | # AXLES                                                                                                         | GROSS VEHICLE WEIGHT                               | *VEHICLE TRADE-IN DESCRIPTION                                                                   | COMPANY VEHICLE #<br><b>328196</b>      |
| PLATE INFORMATION (required for Title & Registration Transactions) SEE REVERSE SIDE FOR COMPLETE INSTRUCTIONS                                                                                                                                                                                      |                                                |                                                                                                                 |                                                    |                                                                                                 |                                         |
| PLATE # (1)<br><b>U493296</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)                 |
| TOR STICKER # (4)                                                                                                                                                                                                                                                                                  | TEMP OPERATOR PERMIT # (3)                     | # OF SEATS (5)                                                                                                  | ZONE (COUNTY NAME) (6)                             | USDCT / REGISTRANT # (7)                                                                        | MOTOR CARRIER # (8)                     |
| Lien INFORMATION (if present)                                                                                                                                                                                                                                                                      |                                                |                                                                                                                 |                                                    |                                                                                                 |                                         |
| 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>                                 |                                                                                                 | ZIP CODE<br><b>21202</b>                |
| LIEN CODE                                                                                                                                                                                                                                                                                          | SECOND LIENHOLDER                              |                                                                                                                 |                                                    |                                                                                                 | LIEN DATE                               |
| STREET                                                                                                                                                                                                                                                                                             | CITY                                           |                                                                                                                 | STATE                                              |                                                                                                 | ZIP CODE                                |
| LESSEE / REGISTRANT INFORMATION (OWNER OF PLATE)                                                                                                                                                                                                                                                   |                                                |                                                                                                                 |                                                    |                                                                                                 |                                         |
| NAME                                                                                                                                                                                                                                                                                               | LEGAL STATUS                                   |                                                                                                                 | NAME CODE                                          | MAG                                                                                             | H/I                                     |
| 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 #                                                             |                                         |
| DEALER NAME                                                                                                                                                                                                                                                                                        | DEALER ADDRESS                                 |                                                                                                                 | DEALER #                                           |                                                                                                 |                                         |
| Required for Duplicate Title: TCA 56-3-15 (submit duplicate or 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 assigns 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>                 | GO 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>                                                                                                                                                                                                                                                | CREDIT                                         | LEASE FEE                                                                                                       | TRANS FEE                                          | CLERK FEE                                                                                       | ISSUANCE FEE<br><b>12.00</b>            |
| COMPUTATION OF<br><input type="checkbox"/> SALES TAX <input type="checkbox"/> USE TAX                                                                                                                                                                                                              | SALES OR USE TAX                               | SA TAX                                                                                                          | LOCAL TAX                                          | ADDITIONAL TAX                                                                                  | TITLE FEE<br><b>5.50</b>                |
| *SERVICE OPT FEE                                                                                                                                                                                                                                                                                   | ORGAN DONOR                                    | POSTAGE                                                                                                         | VER                                                | ID / RESIDENCY VERIFICATION                                                                     | TOTAL TAX COLLECTED<br><b>.00</b>       |
| *TOTAL FEES COLLECTED<br><b>97.25</b>                                                                                                                                                                                                                                                              |                                                |                                                                                                                 |                                                    |                                                                                                 | CITY STICKER FEE                        |