



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



STATE

NEW OR CURRENT TITLE NUMBER 94127597		TRANSACTION CODE N01	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) 5 MAO ☒ ILU ☒				
LAST NAME WELLS FARGO EQUIPMENT FIN INC		FIRST NAME	MIDDLE INITIAL	
ADDRESS 1 (MAILING) 3668 S GEYER RD 350		ADDRESS 2 (PHYSICAL) 733 MARQUETTE AVE 700		
CITY ST LOUIS	STATE MO	ZIP CODE 63127	CITY MINNEAPOLIS	STATE MN
CITY OF RESIDENCE, PRINCIPAL BUS OR VEHICLE LOCATION DAVIDSON 019		PURCHASE DATE 11/19/2014	*LEASED ☒ *SERVICE OPTIONS ☐ SEE REVERSE SIDE FOR INSTRUCTIONS	TELEPHONE # 3144223862
		*PLACARD HEARING IMPAIRED CLS/YR	*INSURANCE POLICY #	

VEHICLE INFORMATION		VIN 1GRAP0622FB709797		MAKE GDAN	MODEL VAN	YEAR 2015	BODY SE	TITLE BRAND - translation NEW	CODE N	TYPE OF FUEL - translation	CODE 9
SURRENDERED TITLE # MSO		STATE TN	PREVIOUS STATES TITLED	VEHICLE USE F	VEHICLE TYPE S	CURRENT MILEAGE	ODOMETER ACTUAL (0) NOT ACTUAL (8) INDICATOR OVER 10 YRS / 15,000 LBS (1) (Unit one) IN EXCESS OF MECHANICAL LBS/TS (9)		CODE 1		
COLOR CODE (enter appropriate code) UPPER O	MOBILE HOME LGTH	WIDTH	# AXLES	GROSS VEHICLE WEIGHT		*VEHICLE TRADE-IN DESCRIPTION		COMPANY VEHICLE # 531330			

PLATE INFORMATION * (Required for Title and Registration and Registration Only Transactions) SEE REVERSE SIDE FOR COMPLETE INSTRUCTIONS							
PLATE # (1) U559466	CLASS CODE/ISSUE YR (1)(3) 8020/1994	VALIDATION # (1)	COUNTY STICKER # (1)	CITY STICKER # (1)(2)	*PLATE # (TRADE IN) (2)	CLASS CODE/ISSUE YR (2)	EXPIRATION DATE (1)(2)(3) PERMANENT
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 DATE	
LIEN CODE	FIRST LIENHOLDER				
STREET			CITY	STATE	ZIP CODE
LIEN CODE	SECOND LIENHOLDER				
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)		TAXABLE AMOUNT		SALES TAX PAID	*TAX EXEMPTION REASON / SALES TAX # 100551600
SALE PRICE	TRADE IN ALLOWANCE				
DEALER NAME WELLS FARGO EQUIPMENT FINANCE		DEALER ADDRESS 3100 WEST END AVE STE 530 NASHVILLE, TN 37203		DEALER # 2	

*Required for Duplicate Title - T.C.A. 55-3-115 (submit illegible or altered Certificate of Title)					
☐ LOST	☐ STOLEN	☐ MUTILATED	☐ 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 11/26/2014 9:58:58 AM 11/26/2014
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INVOICE NUMBER 14330 @	COUNTY NAME DAVIDSON	CO NUMBER 19	DATE OF APPLICATION 11/26/2014	BY AUTHORITY OF REGISTRAR OF MOTOR VEHICLES (COUNTY CLERK) BRENDA WYNN DLR - LINEWEAVER	
Received 11/24/2014 (total fees collected indicated certifies this form as a valid registration)					
OFFICE USE ONLY REGISTRATION FEE 79.75	CREDIT	LEASE FEE	TRANS FEE	CLERK FEE 12.00	TITLE FEE 5.50
COMPUTATION OF ☐ SALES TAX ☐ USE TAX	SALES OR USE TAX	SA TAX	LOCAL TAX	ADDITIONAL TAX	TOTAL TAX COLLECTED .00
*SERVICE OPT FEE	ORGAN DONOR	POSTAGE	VER	ID / RESIDENCY VERIFICATION	*TOTAL FEES COLLECTED 97.25