



# OFFICIAL VEHICLE REGISTRATION

NEW OR CURRENT TITLE NUMBER <b>92840096</b>		TRANSACTION CODE <b>N01</b>		REGISTRATION ONLY NUMBER	
OWNER INFORMATION *LEGAL STATUS: 1 (AID) 2 (OR) <input type="checkbox"/> ENTER NAME CODE IN BOX 1 (SAME) 2 (DIFFERENT) 3 (MULTIPLE LAST NAMES) 4 (COMPANY) 5 (OVER 28 CHARACTERS) <input checked="" type="checkbox"/> 5 MAC <input checked="" type="checkbox"/> ILU <input checked="" type="checkbox"/>					
LAST NAME <b>WELLS FARGO EQUIPMENT FINANCE INC</b>			FIRST NAME <b>WELLS FARGO EQUIPMENT FINANCE INC</b>		
ADDRESS 1 (MAILING) <b>733 MARQUETTE AVE 700</b>			ADDRESS 2 (PHYSICAL) <b>3100 WEST END AVE STE 530</b>		
CITY <b>MINNEAPOLIS</b>		STATE <b>MN</b>		ZIP CODE <b>55402</b>	
CITY <b>NASHVILLE</b>		STATE <b>TN</b>		ZIP CODE <b>37203</b>	
CITY OF RESIDENCE/PRINCIPAL BUS OR INCORP LOCATION <b>DAVIDSON 019</b>		PURCHASE DATE <b>06/19/2013</b>		TELEPHONE # <b>3395218</b>	
*LEASED <input checked="" type="checkbox"/> *SERVICE OPTIONS <input type="checkbox"/>		*PLACARD HEARING IMPAIRED CLS/YR		*INSURANCE POLICY #	
VEHICLE INFORMATION					
VIN <b>1JJV532WX6L993208</b>		MAKE <b>WANC</b>		MODEL <b>1JJ</b>	
YEAR <b>2006</b>		BODY <b>SE</b>		TITLE BRAND - translation <b>NEW</b>	
CODE <b>N</b>		TYPE OF FUEL - translation		CODE <b>9</b>	
SURRENDERED TITLE # <b>09517944</b>		STATE <b>ME</b>		PREVIOUS STATES TITLED	
VEHICLE USE <b>F</b>		VEHICLE TYPE <b>S</b>		CURRENT MILEAGE	
ODOMETER ACTUAL (3) NOT ACTUAL (8) INDICATOR OVER 10 YRS / 16,000 LBS (1) (Lst or 4) BY EXCESS OF MECHANICAL LIMITS (8)		CODE <b>1</b>		CODE	
COLOR CODE (enter appropriate code) UPPER <b>9</b>		MOBILE HOME LGTH <b>WOTH</b>		# AXLES	
GROSS VEHICLE WEIGHT		VEHICLE TRADE-IN DESCRIPTION		COMPANY VEHICLE # <b>600154</b>	
PLATE INFORMATION *(required for Title and Registration and Registration Only Transactions) SEE REVERSE SIDE FOR COMPLETE INSTRUCTIONS					
PLATE #(1) <b>U446506</b>		CLASS CODE/ISSUE YR(1)(3) <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) <b>PERMANENT</b>			
TDR 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 <input type="checkbox"/>		NAME CODE <input type="checkbox"/>		MAC <input type="checkbox"/> ILU <input type="checkbox"/>	
NAME		NAME			
ADDRESS		CITY		STATE	
ZIP CODE					
VEHICLE COST / TAX INFORMATION *(required for Title & Registration Transactions)					
SALE PRICE		TRADE IN ALLOWANCE		TAXABLE AMOUNT	
SALE TAX PAID		*TAX EXEMPTION REASON / SALES TAX # <b>100551600</b>			
DEALER NAME		DEALER ADDRESS		DEALER # <b>99999</b>	
*Required for Duplicate Title - T.C.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"/> RTN/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 <b>9/11/2013 9:27:51 AM</b> <b>09/11/2013</b>	
INVOICE NUMBER <b>13254 @</b>		COUNTY NAME <b>DAVIDSON</b>		GO NUMBER <b>19</b>	
DATE OF APPLICATION <b>09/11/2013</b>		BY AUTHORITY OF REGISTRAR OF MOTOR VEHICLES (COUNTY CLERK) <b>BRENDA WYNN</b>		<b>MSMITH - 1</b>	
OFFICE USE ONLY					
REGISTRATION FEE <b>79.75</b>		LEASE FEE		TRANS FEE	
CREDIT		CLERK FEE		ISSUANCE FEE <b>12.00</b>	
SALES OR USE TAX		LOCAL TAX		TITLE FEE <b>5.50</b>	
SA TAX		ADDITIONAL TAX		TOTAL TAX COLLECTED <b>.00</b>	
LOCAL TAX		COLLECTED IN STATE OF		COUNTY WHEEL TAX	
ADDITIONAL TAX		CITY WHEEL TAX			
COMPUTATION OF <input type="checkbox"/> SALES TAX <input type="checkbox"/> USE TAX		ORGAN DONOR		POSTAGE	
*SERVICE OPT FEE		VER		ID / RESIDENCY VERIFICATION	
*TOTAL FEES COLLECTED <b>97.25</b>					

600154