



# OFFICIAL VEHICLE REGISTRATION

NEW OR CURRENT TITLE NUMBER <b>92840056</b>		TRANSACTION CODE <b>N01</b>	REGISTRATION ONLY NUMBER	
OWNER INFORMATION - LEGAL STATUS: 1 (AND) 2 (OR) <input type="checkbox"/> ENTER NAME CODE IN BOX 1 (SAME) 2 (DIFFERENT) 3 (MULTIPLE LAST NAMES) 4 (COMPANY) 5 (OVER 28 CHARACTERS) <b>5</b> MAO <input checked="" type="checkbox"/> N <input type="checkbox"/> ILU <input checked="" type="checkbox"/> N				
LAST NAME <b>WELLS FARGO EQUIPMENT FINANCE INC</b>		FIRST NAME <b>WELLS FARGO EQUIPMENT FINANCE INC</b>	MIDDLE INITIAL	LAST 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>
CITY OF RESIDENCE, PRINCIPAL BUS OR EMPLOY LOCATION <b>DAVIDSON 019</b>		PURCHASE DATE <b>06/19/2013</b>	*LEASED <input checked="" type="checkbox"/> *SERVICE OPTIONS <input type="checkbox"/> <small>SEE REVERSE SIDE FOR INSTRUCTIONS</small>	TELEPHONE # <b>3395218</b>
*PLACARD/HEARING IMPAIRED CLS/YR		*INSURANCE POLICY #		
VEHICLE INFORMATION				
VIN <b>1JJV532W76L993263</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 <b>9</b>	
SURRENDERED TITLE # <b>09517999</b>	STATE <b>ME</b>	PREVIOUS STATES TITLED	VEHICLE USE <b>F</b>	VEHICLE TYPE <b>S</b>
CURRENT MILEAGE		ODOMETER ACTUAL (0) NOT ACTUAL (6) INDICATOR OVER 10 YRS / 16,000 LBS (11) (List one) IN EXCESS OF MECHANICAL LIMITS (6)		CODE <b>1</b>
COLOR CODE (enter appropriate code) UPPER <b>9</b>	MOBILE HOME LGTH <b>9</b>	WIDTH <b>9</b>	# AXLES	GROSS VEHICLE WEIGHT
*VEHICLE TRADE-IN DESCRIPTION			COMPANY VEHICLE # <b>6001209</b>	
PLATE INFORMATION (required for Title and Registration and Registration Only Transactions) SEE REVERSE SIDE FOR COMPLETE INSTRUCTIONS				
PLATE #(1) <b>U446484</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(S)	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"/> MAO: <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	SALES 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"/> RTWD 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 employees 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 9:12:37 AM</b>
				<b>09/11/2013</b>
INVOICE NUMBER <b>13254 @</b>	COUNTY NAME <b>DAVIDSON</b>	CO 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>	CREDIT	LEASE FEE	TRANS FEE	CLERK FEE
COMPUTATION OF		ISSUANCE FEE <b>12.00</b>	TITLE FEE <b>5.50</b>	TOTAL TAX COLLECTED <b>.00</b>
<input type="checkbox"/> SALES TAX <input type="checkbox"/> USE TAX	SALES OR USE TAX	SA TAX	LOCAL TAX	ADDITIONAL TAX
*SERVICE OPT FEE		ORGAN DONOR	POSTAGE	VER
		ID / RESIDENCY VERIFICATION		*TOTAL FEES COLLECTED <b>97.25</b>

6001209