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

## OFFICIAL VEHICLE REGISTRATION

ity Stickers:									7082	11
V OR CURRENT TITLE NUMBER			TRAM	NSACTION DE	REGIST	RATION ONLY NUMBE	R			
)1477506			10 EAL-ST T 10 E	N01						<b>51</b> 1
NER INFORMATION *LEGAL STATUS: 1 (AND	) 2 (0R) ENTER NAM	ME CODE IN BOX	(1 (SAME)	2(DIFFEREN	IT) 3(MULTIPLE LAS	T NAMES) 4(COMPANY	) 5(OVER 28 CHARACT	ERS) 4	MAO N ILU	
30WMAN TRAILER LEAS	THOTIVANIC	MIDDL	E INITIAL		LAST NAME		FIRST NAME		MIDDLE INTIA	_
ORESS 1 (MAILING)	SING LLO				ADDRESS 2 (PHYS	CAL)				
	3 GOVERNOR	R LN BLV	D							
Y	STATE	ZI	IP CODE		CITY		ST	ATE	ZIP CODE	
VILLIAMSPORT	MD	21	795					SED CLEAND	I *INSURANCE POLICY	a
ANNII TONI 022   02/4/2/2012			SERVICE OPTIONS				CARD/HEARING IMPAIR	IED CLS/TH	INSURANCE POLICE	
HICLE INFORMATION	MAKE I	MODEL Y	EAR	BODY	TITLE BRAND - tra	nslation	CODE	TYPE OF FU	EL - translation	CODE
LIVVC052V0D412011				SE			U			9
I UYVS253X8P412011	STATE PREVIO	1UY 2	8008	VEHICLE US	USED VEHICLE TYP	E CURRENT MILE	AGE ODOMETER	ACTUAL (0)	NOT ACTUAL (8)	CODE
		03 STATES TITE				OOTHERT INCE	INDICATOR (List one)	OVER 10 YRS IN EXCESS OF	/ 16,000 LBS (1) MECHANICAL LIMITS (9)	1
.OR CODE (enter appropriate code)* MOBILE	OK	# AXLES	GROS	F S VEHICLE V	S WEIGHT	*VEHICLE TRADE	IN DESCRIPTION		COMPANY VEHICLE #	<u> </u>
) LOWER LOTH	WDTH					CONTROL CONTROL AND			70821	1
ATE INFORMATION *(required for Title and Reg	istration and Registration (	Only Transactions	SEE REVE	ERSE SIDE F	OR COMPLETE INS	TRUCTIONS				ikaliz ii
ATE #(1) CLASSCODE/ISSUEYF	R(1)(3) VALIDATION #		TY STICKER		Y STICKER #(1)(2)	*PLATE #(TRADE IN)(2	) CLASS CODE/	SSUE YR(2)	EXPIRATION DATE	
J435004 8020/19						IODOT / BEOLOTO ANT	1771	IMO	PERMA	AINEIN
R STICKER #(4) TEMP OPERATOR	PERMIT #(3)   # OF	SEATS(5) Z	ONE(COUN	NTY NAME)(	6)	JSDOT / REGISTRANT	(7)	MO	TOR CARRIER #(8)	
120 E BALTIMORE ST 25 FL  N CODE SECOND LIENHOLDER			BALTIMORE				MD 21202			
REET					CITY		STA	TE	ZIP CODE	
SSEE / REGISTRANT INFORMATION(OWNER	R OF PLATE)	LEGAL STATI	us 🗌	NAME C	CODE	MAO ILU				
ME					NAME					
DRESS				CIT	Υ		ST	ATE	ZIP CODE	
			Mary 2 A							Tines.
HICLE COST / TAX INFORMATION *(required II LE PRICE TRADE IN	or Title & Registration Tran ALLOWANCE	sactions)	TAXABL	E AMOUNT		SALESTAX PAID		*TAX EXEN	MPTION REASON / SALES	STAX#
ALER NAME		DEALER AL	nnpecc						DEALER #	
ALEH NAME		DEACCITAL	DUNESS							
equired for Duplicate Title - T.C.A. 55-3-115 (sub										
LOST STOL	omit Illegible or altered Cer	incate of Title)	BANKS OF ST							
	EN .	MUTILATED	BANCE CALLS		I'D DUE TO NON DE	1	ALTERED		ILLEGIBLE	
ler penalties of perjury, I hereby certify all informs assignees to determine the accuracy of the inf	EN .	MUTILATED		vledge, and a	cknowledge that it is	not the responsibility of the				
ler penalties of perjury, I hereby certify all informs assignees to determine the accuracy of the infinATURE OF CERTIFIER/OWNER	EN .	MUTILATED correct to the best or on my behalf.	R OF ATTO	vledge, and a	cknowledge that it is ORIZED SIGNATUR	not the responsibility of the	ne Motor Vehicle Division	DATE	04/02/2013	3
ler penalties of perjury, I hereby certify all informs assignees to determine the accuracy of the infinATURE OF CERTIFIER/OWNER  OICE NUMBER  COUNTY NAME	en	MUTILATED	MBER I	PRNEY/AUTH	cknowledge that it is ORIZED SIGNATUR PLICATION	not the responsibility of the E(IF APPLICABLE)	ne Motor Vehicle Division	DATE	04/02/2013 S(COUNTY CLERK)	
ler penalties of perjury, I hereby certify all informs assignees to determine the accuracy of the infinature of Certifler/OWNER  OICE NUMBER COUNTY NAME  13092 @ HAMIL*  IGE USE ONLY EMISSION	ination provided is true and ormation provided by me of the company of the compan	MUTILATED  correct to the best of on my behalf.  POWEI	MBER 0	PATE OF AP	cknowledge that it is ORIZED SIGNATUR PLICATION 702/2013	BY AUTHORITY C W.F. (BIL (total fees collect	THE MOTOR VEHICLE DIVISION OF REGISTRAR OF MOTO L) KNOWLE ted Indicated certifies	TOR VEHICLE S	04/02/2013 S(COUNTY CLERK)	
ler penalties of perjury, I hereby certify all informs assignees to determine the accuracy of the infinature of Certifier/OWNER  OICE NUMBER COUNTY NAME  13092 @ HAMIL*	ation provided is true and ormation provided by me o	MUTILATED  correct to the best of on my behalf.  POWEI	MBER 0	PRNEY/AUTH	cknowledge that it is ORIZED SIGNATUR PLICATION	not the responsibility of the E(IF APPLICABLE)  BY AUTHORITY C  W.F. (BIL	ne Motor Vehicle Division FREGISTRAR OF MO L) KNOWLE	FOR VEHICLE S this form as a	04/02/2013 S(COUNTY CLERK)	3 CAR46
ler penalties of perjury, I hereby certify all informs assignees to determine the accuracy of the information of the informatio	ination provided is true and ormation provided by me of the company of the compan	MUTILATED  correct to the best of on my behalf.  POWEI	MBER C	PATE OF AP	cknowledge that it is ORIZED SIGNATUR PLICATION 702/2013 CLERK FEE	BY AUTHORITY C  W.F. (BIL  (total fees collect ISSUANCE FEE	of REGISTRAR OF MO  L) KNOWLE ted Indicated certifies  TITLE FEE	FOR VEHICLE Shis form as a	04/02/2013 S(COUNTY CLERK) valid registration) AL TAX COLLECTED	
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