

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

## OFFICIAL VEHICLE REGISTRATION



	:									5	TATE
NEW OR CURRENT TITL	E NUMBER		Ţ	RANSACTION CODE*	REGIS	TRATION ONLY NUM	BER				
93601633				N01							
OWNER INFORMATION	*LEGAL STATUS: 1 (AND) 2	(OR) ENTER NAME	E CODE IN BOX 1 (SAM	IE) 2(DIFFEREI	VT) 3(MULTIPLE LAS	ST NAMES) 4(COMPA	NY) 5(OV	ER 28 CHARACT	ER5) 4	MAO N ILU	N
LAST NAME			MIDDLE INITIA	L	LAST NAME			FIRST NAME		MIDDLE INITIAL	
BSE TRAILER LEASING LLC											
ADDRESS 1 (MAILING)	DNOD I N DI V				ADDRESS 2 (PHYS	SICAL)					
CITY	RNOR LN BLV		ZIP CODE		CITY			e1	ATE	ZIP CODE	
		STATE	MD 21795		Citt			52		211 0002	
CNTY OF RESIDENCE/PRINCIPAL B	37/2007	JRCHASE DATE	21795		TELEPHON	NE# P	ACARD/I	EARING IMPAIR	ED CLS/YR	*INSURANCE POLICY	#
HAMILTON	033	05/23/2014	*LEASED 0 *SEF	VICE OPTIONS	301	582 1793					
		30,20,20	SEE REVERSE SIDE FOR	INSTRUCTIONS							
VEHICLE INFORMATION VIN		MAKE MO	DDEL YEAR	BODY	TITLE BRAND - tr	anslation		CODE	TYPE OF FU	EL - translation	CODE
1GRDM9623	FH725336	GDAN 1	GR 2015	SE	NEW			N			9
SURRENDERED TITLE #	20, 1 (0.011) (0.00)	STATE PREVIOUS	S STATES TITLED	VEHICLE US		CURRENT MI	LEAGE	ODOMETER	ACTUAL (0)	NOT ACTUAL (8)	CODE
MSO	-	TN		F	s			(List one)	IN EXCESS OF	/ 16,000 LBS (1) MECHANICAL LIMITS (9)	1
COLOR CODE (enter approp	priste code)* MOBILE HO		#AXLES GR	OSS VEHICLE		*VEHICLE TRAI	DE-IN DES	CRIPTION		COMPANY VEHICLE #	,
O LO	DWER	WDIA								725 33	36
PLATE INFORMATION "(I	required for Title and Registra	tion and Registration On	ly Transactions) SEE RI	VERSE SIDE I	OR COMPLETE INS	TRUCTIONS				LEVERNATION DATE (	1)(2)(2)
PLATE #(1)	CLASSCODE/ISSUEYR(1)(		COUNTY STICE	ŒR #(1) CIT	Y STICKER #(1)(2)	*PLATE #(TRADE IN	1)(2)	CLASS CODE/I	SSUE YR(2)	PERMA	(400) (400)
U490239	8020/1994					LINES ( DEGISTRAL	T.#(7)		luo:	TOR CARRIER #(8)	IVEIVI
TDR STICKER #(4)	TEMP OPERATOR PER	MIT #(3) # OF S	EATS(5) ZONE(CO	OUNTY NAME)(	5)	USDOT / REGISTRAN	1 #(7)		MO	TOR CARRIER IN(0)	
LIEN INFORMATION (If III	en present) LIENHOLDER			_		_				LIEN DAT	E
	SUNTRUST BA	NK								05/23	/2014
STREET					CITY			STA		ZIP CODE 21202	
	BALTIMORE ST	25 FL			BALTII	WORE			MD	LIEN DAT	E
LIEN CODE SECON	AD EIENHOLDER										
STREET					CITY		-	STA	TE	ZIP CODE	
*I EDDEE / DECISTRANT	INFORMATION(OWNER OF	PLATE)	LEGAL STATUS	NAME	CODE C	MAO ILU					
NAME					NAME						
1000500				CIT	Y			STA	ATE	ZIP CODE	
ADDRESS									_		
	FORMATION "(required for Ti		ctions)			SALESTAX PAID			TAX EXEM	IPTION REASON / SALES	TAX#
SALE PRICE	TRADE IN ALL	OWANCE	l law	ABLE AMOUNT		SALESTANTAID					
			DEALER ADDRESS	i						DEALER#	
DEALER NAME											
- 1000 Marie V. (1000										The second second	
- 1000 Marie V. (1000	Hie - T.C.A. 55-3-115 (submit)	llegible or allered Certifi	cate of Title)						Tr	7	
- 1000 Marie V. (1000	title - T.C.A. 55-3-115 (submit)		cate of Title)	RTI	NON DIE TO NON DI	ELIEVERY	ALT	ERED		ILLEGIBLE	
*Required for Duplicate Ti	STOLEN	_ N	MUTILATED	nowledge, and a	cknowledge that it is	not the responsibility of					
*Required for Duplicate Ti	STOLEN  I hereby certify all information the accuracy of the information.	_ N	MUTILATED	nowledge, and a		not the responsibility of			DATE		
*Required for Duplicate Tr	STOLEN  I hereby certify all information the accuracy of the information IER/OWNER	_ N	mect to the best of my kind my behalf.  POWER OF AT	nowledge, and a	cknowledge that it is	not the responsibility of	of the Moto	r Vehicle Division		05/27/2014	
*Required for Duplicate TE LOST Under penalties of perjury or its assignees to determit SIGNATURE OF CERTIFI INVOICE NUMBER	STOLEN  I hereby certify all information the accuracy of the information IER/OWNER  COUNTY NAME	n provided is true and coation provided by me or o	rect to the best of my kind my behalf.  POWER OF AT	TORNEY/AUTH	cknowledge that it is ORIZED SIGNATUR PLICATION	not the responsibility of RE(IF APPLICABLE)  BY AUTHORIT	of the Moto	r Vehicle Division	OR VEHICLE	05/27/2014 S(COUNTY CLERK)	
*Required for Duplicate Tr	STOLEN  I hereby certify all information the accuracy of the information IER/OWNER	n provided is true and continuous provided by me or design provided by	rect to the best of my keen be	TORNEY/AUTH	cknowledge that it is in IORIZED SIGNATURE SIGNATURE SPECIATION 127/2014	not the responsibility of RE(IF APPLICABLE)  BY AUTHORIT  W.F. (B  (total fees co	OF REG	ISTRAR OF MOT	OR VEHICLE	05/27/2014 S(COUNTY CLERK) H valid registration)	CM27
Required for Duplicate TE LOST Under penalties of perjury, or its assignees to determin SIGNATURE OF CERTIFI INVOICE NUMBER 14147 OFFICE USE ONLY REGISTRATION FEE	STOLEN  I hereby certify all information the accuracy of the information IER/OWNER  COUNTY NAME  HAMILTO	n provided is true and coation provided by me or o	rect to the best of my keen be	TORNEY/AUTH	cknowledge that it is ORIZED SIGNATUR PLICATION	not the responsibility of RE(IF APPLICABLE)  BY AUTHORIT  W.F. (B	OF REG	ISTRAR OF MOT	OR VEHICLE  S his form as a	05/27/2014 S(COUNTY CLERK)	
*Required for Duplicate Tr  LOST  Under penalties of perjury, or its assignees to determine SIGNATURE OF CERTIFIC INVOICE NUMBER  14147 @  OFFICE USE ONLY	STOLEN  I hereby certify all information the accuracy of the information IER/OWNER  COUNTY NAME  HAMILTO  EMISSION: T	n provided is true and continuous provided by me or of the continuous provided by the continu	rect to the best of my keen be	TORNEY/AUTH	cknowledge that it is in IORIZED SIGNATURE PLICATION 127/2014	not the responsibility of RE(IF APPLICABLE)  BY AUTHORIT  W.F. (B  (total fees co	Y OF REG	ISTRAR OF MOT  NOWLE:  Illicated certifies to	TOR VEHICLE S his form as a TOTA	05/27/2014 S(COUNTY CLERK)  Walld registration) AL TAX COLLECTED	
COMPUTATION OF  SALES TAX USE	STOLEN  I hereby certify all information the accuracy of the information the information the information that is a constant to the information to the information that is a constant to the information to the i	n provided is true and continuous provided by me or of the continuous provided by the continuous provi	rect to the best of my keen best of my keen my behalf.  POWER OF AT  CO NUMBER  33	DATE OF AF	cknowledge that it is IORIZED SIGNATUF IPLICATION IZ7/2014  CLERK FEE IX COL	BY AUTHORIT  W.F. (B  (total fees co  ISSUANCE FEE  12.00  LECTED IN STATE O	Y OF REG	ISTRAR OF MOT  KNOWLES  Illicated certifies to FEE  5.50	S TOTAL	05/27/2014 S(COUNTY CLERK)  Walld registration) AL TAX COLLECTED	
COMPUTATION OF	STOLEN  I hereby certify all information the accuracy of the information the accuracy of the information that is a country name  COUNTY NAME  HAMILTO  EMISSION: T  CREDIT	n provided is true and continuous provided by me or of the continuous provided by the continu	rect to the best of my keen be	DATE OF AF	cknowledge that it is IORIZED SIGNATUF IPLICATION IZ7/2014  CLERK FEE IX COL	BY AUTHORIT  W.F. (B  (total fees co	Y OF REG	ISTRAR OF MOT  KNOWLES  Illicated certifies to FEE  5.50	S his form as a TOTA	05/27/2014 S(COUNTY CLERK) H Valid registration) AL TAX COLLECTED 00 STICKER FEE FAL FEES COLLECTED 7.25	