



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

OFFICIAL VEHICLE REGISTRATION



City Stickers:

NEW OR CURRENT TITLE NUMBER 94491015	TRANSACTION CODE* N01	REGISTRATION ONLY NUMBER	STATE
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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) 4				MAO <input checked="" type="checkbox"/> N	ILU <input checked="" type="checkbox"/> N		
LAST NAME BSE TRAILER LEASING LLC		FIRST NAME	MIDDLE INITIAL	LAST NAME BSE TRAILER LEASING LLC		FIRST NAME	MIDDLE INITIAL
ADDRESS 1 (MAILING) 10233 GOVERNOR LN BLVD				ADDRESS 2 (PHYSICAL)			
CITY WILLIAMSPORT		STATE MD	ZIP CODE 21795	CITY		STATE	ZIP CODE
CITY OF RESIDENCE/PRINCIPAL BUS OR INCORP LOCATION HAMILTON 033		PURCHASE DATE 11/03/2014	*LEASED <input checked="" type="checkbox"/> *SERVICE OPTIONS <input type="checkbox"/> <small>SEE REVERSE SIDE FOR INSTRUCTIONS</small>	TELEPHONE # 240 772 5501	*PLACARD/HEARING IMPAIRED CLS/YR	*INSURANCE POLICY #	

VEHICLE INFORMATION									
VIN 1GRDM9624FH726415	MAKE GDAN	MODEL 1GR	YEAR 2015	BODY SE	TITLE BRAND - translation NEW	CODE N	TYPE OF FUEL - translation	CODE 9	
SURRENDERED TITLE # MSO		STATE PA	PREVIOUS STATES TITLED	VEHICLE USE F	VEHICLE TYPE S	CURRENT MILEAGE	ODOMETER ACTUAL (0) NOT ACTUAL (8) INDICATOR OVER 10 YRS / 16,000 LBS (1) (List one) IN EXCESS OF MECHANICAL LIMITS (9)	CODE 1	
COLOR CODE (enter appropriate code)* UPPER O	MOBILE HOME LGTH W	WIDTH D	# AXLES	GROSS VEHICLE WEIGHT	*VEHICLE TRADE-IN DESCRIPTION			COMPANY VEHICLE # 726415	

PLATE INFORMATION *(required for Title and Registration and Registration Only Transactions) SEE REVERSE SIDE FOR COMPLETE INSTRUCTIONS									
PLATE # (1) U546998	CLASSCODE/ISSUEYR(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		
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 SUNTRUST BANK						LIEN DATE 11/03/2014		
STREET 120 E BALTIMORE ST 25 FL				CITY BALTIMORE	STATE MD	ZIP CODE 21202			
LIEN CODE	SECOND LIENHOLDER						LIEN DATE		
STREET				CITY	STATE	ZIP CODE			

*LESSEE / REGISTRANT INFORMATION (OWNER OF PLATE)									
NAME		LEGAL STATUS <input type="checkbox"/>	NAME CODE <input type="checkbox"/>	MAO <input type="checkbox"/>	ILU <input type="checkbox"/>				
ADDRESS		CITY	STATE	ZIP CODE					

VEHICLE COST / TAX INFORMATION *(required for Title & Registration Transactions)									
SALE PRICE	TRADE IN ALLOWANCE	TAXABLE AMOUNT	SALESTAX PAID	*TAX EXEMPTION REASON / SALES TAX #					
DEALER NAME		DEALER ADDRESS				DEALER #			

*Required for Duplicate Title - T.C.A. 55-3-115 (submit illegible or altered Certificate of Title)									
<input type="checkbox"/> LOST	<input type="checkbox"/> STOLEN	<input type="checkbox"/> MUTILATED	<input type="checkbox"/> RTN'D 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 11/11/2014		

INVOICE NUMBER 14315 @	COUNTY NAME HAMILTON	CO NUMBER 33	DATE OF APPLICATION 11/11/2014	BY AUTHORITY OF REGISTRAR OF MOTOR VEHICLES/COUNTY CLERK W.F. (BILL) KNOWLES				HCM27	
OFFICE USE ONLY									
REGISTRATION FEE 79.75	CREDIT	LEASE FEE	TRANS FEE	CLERK FEE	ISSUANCE FEE 12.00	TITLE FEE 5.50	TOTAL TAX COLLECTED .00		
COMPUTATION OF <input type="checkbox"/> SALES TAX <input type="checkbox"/> USE TAX	SALES OR USE TAX	SA TAX	LOCAL TAX	ADDITIONAL TAX	COLLECTED IN STATE OF	COUNTY WHEEL TAX	CITY STICKER FEE		
*SERVICE OPT FEE	ORGAN DONOR	POSTAGE	VER	ID / RESIDENCY VERIFICATION	*TOTAL FEES COLLECTED 97.25				