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

## **OFFICIAL VEHICLE REGISTRATION**

City Stie	ckers:														_	775	599
NEW OR CURRENT TITLE NUMBER 90490624							75	TRANSACTION REGISTRATION ONLY NUMBER  NO1									
OWNER INFOR	RMATION *LEG	AL STATI	JS: 1 (AND) 2 (	0R)	ENTER NA	ME CODE II	N BOX 1 (SAM	E) 2(DIFFERE	NT) 3/MU	LTIPLE LAST	T NAMES) 4(	COMPANY) 5	OVER 28 CHARAC	TERS) 4		MAO N	III N
LAST NAME	AN TO			IRST NA	ME		MIDDLE INITIA		LAST NA				FIRST NAME			MIDDLE II	NITIAL
ADDRESS 1 (M		ULEK	LEASIN	IG LL	.C			ADDRESS 2 (PHYSICAL)									
		NOR I	LN BLVI	D					AUDRES	5 2 (PH15)	CAL)						
CITY					STATE		ZIP CODE		CITY				S	TATE		ZIP CODE	
						21795											
MAMILLANI 022   08/90/9019 } =					LEAS SEE R	ED O SER	IVICE OPTION	301 582 1793				RED CLS/	YR *INS	SURANCE PO	LICY#		
VEHICLE INFO	RMATION	1	- 1 T	MAKE		4ODEL	YEAR	BODY	TITLES	SDAND troe	nototian		CODE	ITVPE OF	5 E1 (E1 - tros	relation	CODE
<u> </u>				-		1 <b>J</b> J	2005	SE	TITLE BRAND - transla				U	1	TYPE OF FUEL - translation		9
1JJV532WX5L922945 WABA 1J						1 = 000	VEHICLE U	USED SE VEHICLE TYPE CURRE			ENT MILEAGE			ACTUAL (0) NOT ACTUAL (8)			
				WI				F		S			I INDICATOR O		OVER 10 YRS / 16,000 LBS (1) N EXCESS OF MECHANICAL LIMIT		
COLOR CODE (enter appropriate code)* MOBILE HOM					- 1			OSS VEHICLE	 WEIGHT			LE TRADE-IN I	RADE-IN DESCRIPTION		COMPANY VEHICLE #		
UPPER O	LOWER	3	LGIH	WDIH													775599
PLATE INFORM												- 94					
PLATE #(1) U39846			/ISSUEYR(1)(3 <b>20/1994</b>	′   ···-	IDATION #(	"   "	OUNTY STICK	ER #(1)   CI	ry sticke	ER #(1)(2)	*PLATE #(TF	RADE IN)(2)	CLASS CODE	ISSUE YR	(2) E)	(PIRATION D	ATE (1)(2)(3) MANEN
TOR STICKER			ERATOR PER		# OF	SEATS(5)	ZONE(CC	OUNTY NAME)	(6)	Tu	SDOT / REGI	ISTRANT #(7)			MOTOR CA		IAIMIALIA
								•									
STREET			JST BAI ORE ST			_			CITY	ALTIM	IODE		ST/	TE MD		ZIP CODE 21202	/29/201
LIEN CODE	SECOND L			23 F	<u> </u>					PAL I IIV	IONE	<del></del>		IVID			N DATE
												_					
STREET									CITY				STA	NTE		ZIP CODE	
"LESSEE / REG		D14470	VOINTED 05							1 .	AAO 🔲	ш 🗆					
NAME	SISTEMATI INFO	JAMATION	GOWNEH OF	PLATE)	<u>-</u>	LEGAL	STATUS L	J NAME	NAME	<u> </u>	MAU LLI	ILU L					
ADDRESS								cr	l Y				ST	ATE		ZIP C	ODE
				<del></del>								To The Result			**** * * * * * * * * * * * * * * * * *		
VEHICLE COST SALE PRICE	T/TAX INFOR		required for Titl		tration Trans	actions)	TAXA	BLE AMOUNT			SALESTAX	K PAID		TAXE	XEMPTION	REASON / S/	ALES TAX #
	_													_	T		
DEALER NAME			•			DEAL	ER ADDRESS								DEALE	ER#	
"Required for Da	uplicate Title -	.C.A. 55-3	-115 (submit II)	egible or (	altered Certi	ficate of Titl	le)										
LOST			STOLEN			MUTILATE	o	RTI	N'D DUE T	O NON DEL	JEVERY		ALTERED			ILLEGIBLE	
Under penalties	of perjury, I her	eby certify	all information	provided i	s true and c	orrect to the	best of my kn	owledge, and a	cknowledg	ge that it is n	of the respons	sibility of the M	lotor Vehicle Division	n	<u> </u>		
or its assignees to SIGNATURE OF			or the informat	on provid	ed by me or			FORNEY/AUTI-							ATE		
															_	0/01/20	)12
NVOICE NUMB 12275	_	COUNTY	MILTO	N			33	DATE OF AP	PLICATIO /01/20				KNOWLE		CLES(COUN	ITY CLERK)	HJC27
OFFICE USE OF REGISTRATION	NLY		ISSION: Tr	aller	LEASE FEE			ANS FEE		RK FEE		ees collected	Indicated certifies	this form	s a valid re	gistration)	. 10 02
79.75											12.	.00	5.50		.00		
COMPUTATION	N OF IX USE TA		OR USE TAX	S/	TAX	LOCA	L TAX	DDITIONAL TA	x -	COLLE	CTED IN ST	ATE OF C	OUNTY WHEEL TA	×	CITY STICKE	R FEE	
*SERVICE OPT			DONOR		POSTAGE		VER		ID/F	RESIDENCY	VERIFICATION	ON I		<del>-  </del> .	101AL FEE	S COLLECTE	D
SF-1357 P	ort: WK	48/DR2	27/8020	Cas	sh: 0.0	0 0	heck: 0	0.00 C	heck#	l:	Credit:	0.00	Auth#:	Cha	nge: 0.	.00 F	RDA-692