



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

OFFICIAL VEHICLE REGISTRATION



City Stickers:

NEW OR CURRENT TITLE NUMBER 93622134			TRANSACTION CODE N01	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(COVER 28 CHARACTERS) 4 <input type="checkbox"/> MAO <input type="checkbox"/> ILL <input type="checkbox"/> N						
LAST NAME BSE TRAILER LEASING LLC	FIRST NAME	MIDDLE INITIAL	LAST NAME	FIRST NAME	MIDDLE INITIAL	STATE 07L608
ADDRESS 1 (MAILING) 10233 GOVERNOR LN BLVD			ADDRESS 2 (PHYSICAL)			
CITY WILLIAMSPORT	STATE MD	ZIP CODE 21795	CITY	STATE	ZIP CODE	
CNTY OF RESIDENCE/PRINCIPAL BUS OR INCORP LOCATION HAMILTON 033	PURCHASE DATE 07/01/2014	*LEASED <input type="checkbox"/> 0 *SERVICE OPTIONS <input type="checkbox"/> SEE REVERSE SIDE FOR INSTRUCTIONS	TELEPHONE # 240 772 5501	*PLACARD/HEARING IMPAIRED CLS/YR		*INSURANCE POLICY #

VEHICLE INFORMATION		MAKE UTIL	MODEL 1UY	YEAR 2009	BODY SE	TITLE BRAND - translation USED		CODE U	TYPE OF FUEL - translation	CODE 9
SURRENDERED TITLE # 557308199026		STATE OK	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 WDTH	\$ AXLES	GROSS VEHICLE WEIGHT			*VEHICLE TRADE-IN DESCRIPTION			COMPANY VEHICLE # 809740	

PLATE INFORMATION * (required for Title and Registration and Renewal/Transfer/Change Transaction) SEE REVERSE SIDE FOR COMPLETE INSTRUCTIONS										
PLATE #(1)	CLASSCODE/ISSUEYR(1)(3)	VALIDATION #(1)	COUNTY STICKER #(1)	CITY STICKER #(1)(2)	*PLATE #(TRADE IN)(2)	CLASS CODE/ISSUE YR(2)	EXPIRATION DATE (1)(2)(3)	PERMANENT		
U524798		8020/1994								
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 07/01/2014	
STREET 120 E BALTIMORE ST 25 FL	CITY		STATE MD		ZIP CODE 21202						
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"/>	ILL <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		SALESTAX PAID		*TAX EXEMPTION REASON / SALES TAX #					
DEALER NAME		DEALER ADDRESS						DEALER #				

*Required for Duplicate Title - T.C.A. 55-3-115 (submit titleable 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 07/31/2014		
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INVOICE NUMBER 14212 @	COUNTY NAME HAMILTON	CO NUMBER 33	DATE OF APPLICATION 07/31/2014		BY AUTHORITY OF REGISTRAR OF MOTOR VEHICLES(COUNTY CLERK) W.F. (BILL) KNOWLES HCM27					
(total fees collected indicated certifies this form as a valid registration)										
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			