

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

OFFICIAL VEHICLE REGISTRATION

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OR CURRENT TITLE NUMBER	R				TB	ANSACTION ODE	REGIS	TRATION ONLY	NUMBER					
0480824						O01						· · · · · · · · · · · · · · · · · · ·	TO 10	NI)
LER INFORMATION *LEGAL STATUS: 1 (AND) 2 (OR) ENTER NAME CODE IN BOX 1 (SAME) 2(DIFFERENT NAME MIDDLE INITIAL							ENT) 3(MULTIPLE LAST NAMES) 4(COMPANY) 5(OVER 28 CHARACTERS) 4 MAO N ILU							
INAME IOWMAN TRAILE				MIDDLE	INITIA	_	LAST NAME			ringi wasic		*****		_
RESS 1 (MAILING)							ADDRESS 2 (PHY	SICAL)						
0233 GOVERNO	R LN BLV	D												
STATE				ZIP CODE			CITY			ST	ATE	ZIP	CODE	
		MD	217	795		TELEPHO	NF #	I *PLACARD/H	EARING IMPAIR	ED CLS/Y	A "INSURAN	CE POLICY		
SA RESIDENCE PRINCIPAL BUS ON INCORP LOCATION IAMILTON 033		06/29/2012		SEE REVERSE	EASED O SERVICE OPTIC SEE REVERSE SIDE FOR INSTRUCTIONS		301 582 1793				uns Form,		eri erre e	
ICLE INFORMATION		MAKE	MOD		AR	BODY	TITLE BRAND -			CODE	TYPE OF	FUEL - translation	n	CODE
OD 4 400016C227460				741 2006		SE				U				9
GRAA06216G337468		STATE PREVIOUS STA				VEHICLE US	SE VEHICLE TY	E CURRENT MILEAGE		ODOMETER	R ACTUAL (0) NOT ACTUAL (8)			CODE
1487554		TN TN			F		s			INDICATOR OVER 10 YRS / 16,000 LBS (List one) IN EXCESS OF MECHANICA		rms / 16,000 LBS (1) OF MECHANICAL L	JMITS (9)	1
110.001			AXLES	GR	OSS VEHICLE						COMPANY	ÆHICLE #	•	
)	20												82	4515
TE INFORMATION *(required for	or Title and Registra	tion and Re	edistration Only	Transactions)	SEE RE	VERSE SIDE I	FOR COMPLETE IN	STRUCTIONS	DE INY(2)	CLASS CODE/	SSUE YR	2) EXPIRA	TION DATE	(1)(2)(3)
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	IP OPERATOR PER		# OF SEA	ATS(5) Z	ONE(CC	L OUNTY NAME)((6)	USDOT / REGIS	TRANT #(7)		1	MOTOR CARRIE	R #(8)	
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I INFORMATION (If lien presen		2 1						-					LIEN DA	TE .
CODE FIRST LIENHOL	TRUST BA	NIZ												 9/2012
EET	INUST DA	IIV.					CITY			STA			CODE	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
120 E BALT		Г 25 F	<u>L</u>				BALTI	MORE			MD	212	LIEN DA	TE
1 CODE SECOND LIENH	IOLDEN													-
EET							CITY			STA	TE	ZIP	CODE	
						1						•		
SSEE / REGISTRANT INFORM	ATION(OWNER OF	PLATE)	<u> </u>	LEGAL STATE	ıs L	NAME	CODE L	MAO L	itu 🔲 💮	41. <u>****</u> *	. 4	y sykl	· - · · · ·	
ΛE							NAME							
RESS						cr	ΓY	•		STA	ATE		ZIP CODE	
IICLE COST / TAX INFORMATI	ION *(required for T	itle & Renis	tration Transac	tions)										
E PRICE	TRADE IN ALL				TAXA	ABLE AMOUNT		SALESTAX	PAID		TAX E	XEMPTION REAS	SON / SALES	S TAX #
LER NAME D				DEALER AD	DRESS	3					DEALER #			
								. :						
guired for Duplicate Title - T.C./	A. 55-3-115 (submit	lllegible or	eltered Certifica	te of Title)	-									
LOST	STOLEN			ITILATED		_	N'D DUE TO NON (ERED			EGIBLE	
or penalties of perjury. I hereby assignees to determine the acc		n provided ation provid	is true and corre led by me or on	oct to the best my behalf.	of my kr	nowledge, and a	acknowledge that it i	s not the responsit	bility of the Motor	r Vehicle Division	10.	ATE		
NATURE OF CERTIFIER/OWN	IER .			POWER	OF AT	IOHNEY/AUTH	IORIZED SIGNATU	HE(IF APPLICABI	LE)		10,	ATE 08/3	0/2012	2
DICE NUMBER CO	OUNTY NAME			CONUN	BER	DATE OF AF	PLICATION	BY AUTH	ORITY OF REGI	STRAR OF MOT	OR VEHIC	CLES(COUNTY C		
2243 @	HAMILTO				33		/30/2012			NOWLE				HJC27
	EMISSION: T	railer	LEASE FEE		TŘ	ANS FEE	CLERK FEE	ISSUANCE	FEE TITLE	FEE	his form a	os a valid registra	ECTED	
79.75 MPUTATION OF S	SALES OR USE TAX		A TAX	TLOCAL TAX		ADDITIONAL TA	AX ICO	12.0		5.50 NTY WHEEL TAX	,	.00	E	
SALES TAX USE TAX	JALES ON USE IA	` *	n IAA	LOOKE IAX		NOUNAL I								
RVICE OPT FEE	ORGAN DONOR		POSTAGE		VER		ID / RESIDEN	CY VERIFICATION	N		7	TOTAL FEES COI 97.25	LLECTED	
1357 Port: WK48	/DR27/8020	Ca	sh: 0.00	Chec	ck: (0.00 (l Check#:	Credit:	0.00 A	uth#:	Cha	nge: 0.00	RDA-	692