



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

OFFICIAL VEHICLE REGISTRATION

916481

REGISTRATION ONLY NUMBER		TRANSACTION CODE 001	
FIRST NAME		MIDDLE INITIAL	
LAST NAME		FIRST NAME	
MIDDLE INITIAL		MIDDLE INITIAL	
ADDRESS 2 (PHYSICAL)		STATE	
CITY		ZIP CODE	
TELEPHONE #		*PLACARD/HEARING IMPAIRED CLS/YR	
*INSURANCE POLICY #			
PURCHASE DATE 06/29/2012		*LEASED ☒ *SERVICE OPTIONS ☐	
TITLE BRAND - translation		CODE	
CURRENT MILEAGE		TYPE OF FUEL - translation	
VEHICLE TYPE		CODE	
VEHICLE USE		ODOMETER ACTUAL (0) NOT ACTUAL (8) INDICATOR OVER 10 YRS / 16,000 LBS (1) (List one) IN EXCESS OF MECHANICAL LIMITS (9)	
VEHICLE TRADE-IN DESCRIPTION		COMPANY VEHICLE #	
GROSS VEHICLE WEIGHT		916481	
# AXLES		CLASS CODE/ISSUE YR(2)	
COUNTY STICKER #(1)		EXPIRATION DATE (1)(2)(3)	
CITY STICKER #(1)(2)		PERMANENT	
USDOT / REGISTRANT #(7)		MOTOR CARRIER #(8)	
CLASS CODE/ISSUE YR(1)(3)		LIEN DATE	
8020/1994		06/29/2012	
TEMP OPERATOR PERMIT #(3)		ZIP CODE	
# OF SEATS(5)		21202	
ZONE(COUNTY NAME)(6)		LIEN DATE	
FIRST LIENHOLDER		STATE	
SUNTRUST BANK		MD	
CITY		BALTIMORE	
120 E BALTIMORE ST 25 FL		STATE	
SECOND LIENHOLDER		ZIP CODE	
LEGAL STATUS		NAME	
NAME CODE		MAO	
ILU		ZIP CODE	
LESSEE / REGISTRANT INFORMATION(OWNER OF PLATE)		CITY	
NAME		STATE	
ADDRESS		ZIP CODE	
VEHICLE COST / TAX INFORMATION (required for Title & Registration Transactions)		SALESTAX PAID	
TRADE IN ALLOWANCE		TAX EXEMPTION REASON / SALES TAX #	
SALE PRICE		DEALER #	
DEALER NAME		DEALER ADDRESS	
*Required for Duplicate Title - T.C.A. 55-3-115 (submit illegible or altered Certificate of Title)		RTN'D DUE TO NON DELIVERY	
LOST		ALTERED	
STOLEN		ILLEGIBLE	
MUTILATED		DATE	
POWER OF ATTORNEY/AUTHORIZED SIGNATURE(IF APPLICABLE)		09/05/2012	
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.		BY AUTHORITY OF REGISTRAR OF MOTOR VEHICLES(COUNTY CLERK)	
SIGNATURE OF CERTIFIER/OWNER		HJC	
CO NUMBER		DATE OF APPLICATION	
33		09/05/2012	
COUNTY NAME		W.F. (BILL) KNOWLES	
HAMILTON		total fees collected indicated certifies this form as a valid registration	
EMISSION: Trailer		ISSUANCE FEE	
LEASE FEE		12.00	
TRANS FEE		TITLE FEE	
CLERK FEE		5.50	
LOCAL TAX		COUNTY WHEEL TAX	
SALES OR USE TAX		.00	
COMPUTATION OF		CITY STICKER FEE	
SALES TAX		97.25	
USE TAX		TOTAL FEES COLLECTED	
POSTAGE		97.25	
VER		ID / RESIDENCY VERIFICATION	
CREDIT DONOR		Auth#:	
Check#:		Credit: 0.00	
Change: 0.00		RDA-692	