

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

OFFICIAL VEHICLE REGISTRATION



City Stickers:											S	TATE
NEW OR CURRENT TITLE NUMBER 84198866			TRANSACTION CODE:			REGISTRATION ONLY NUMBER 3325203						
OWNER INFORMATION *LEG	GAL STATUS: 1 (AND) 2	(OR) ENTER	NAME CODE I	N BOX 1 (SAM	E) 2(DIFFEREN	IT) 3(MULTIPLE LAS	T NAMES) 4(COME	PANY) 5(O	VER 28 CHARACT	ERS) 5	MAO N ILU	N
LAST NAME BOWMAN SAL	ES AND EO			MIDDLE INITIAI	-	LAST NAME			FIRST NAME		MIDDLE INITIA	L
ADDRESS 1 (MAILING)	LO AND LO	OII WILITI	1110			ADDRESS 2 (PHYSI	CAL)					
10233 GOVER	NOR LN BL	/D										
WILLIAMSPORT M					CITY			STATE ARD/HEARING IMPAIRED CLS/YR		ZIP CODE *INSURANCE POLICY#		
HAMILTON 033 PURCHASE DATE 06/30/20		11 *LEASED 0 *SERVICE OPTION SEE REVERSE SIDE FOR INSTRUCTIONS						HEARING IMPAIR	RED CLS/YR	INSURANCE POLICY	"	
VEHICLE INFORMATION VIN		MAKE	MODEL	YEAR	BODY	TITLE BRAND - tra	inslation		CODE	TYPE OF FU	EL - translation	CODE
		STOU	ZGP 20		SE	USED				U		9
			VIOUS STATES		VEHICLE US		E CURRENT I	MILEAGE	ODOMETER	ACTUAL (0)	NOT ACTUAL (8)	CODE
TN TN		F			s			INDICATOR OVER 10 YRS / 16,000 LBS (1) (List one) IN EXCESS OF MECHANICAL LII		MECHANICAL LIMITS (9)	1	
COLOR CODE (enter appropriate UPPER LOWE		OME WDTH	# AXLES	S GRO	SS VEHICLE V	VEIGHT	*VEHICLE TR	ADE-IN DI	ESCRIPTION		COMPANY VEHICLE #	0405
0											91	9135
PLATE INFORMATION *(required) PLATE #(1) CL	ired for Title and Registr ASSCODE/ISSUEYR(1)			Ctions) SEE RE COUNTY STICK		OR COMPLETE INS Y STICKER #(1)(2)	*PLATE #(TRADE	IN)(2)	CLASS CODE/I	SSUE YR(2)	EXPIRATION DATE	(1)(2)(3)
U555530	8020/199	4					U3348	03	8020	1994	PERMA	NENT
TDR STICKER #(4)	TEMP OPERATOR PE	RMIT #(3)	FOF SEATS(5)	ZONE(CO	UNTY NAME)(6	5)	JSDOT / REGISTRA	ANT #(7)	•	MO	TOR CARRIER #(8)	
LIEN INFORMATION (If lien p	resent)											
LIEN CODE FIRST LIEN											LIEN DA	TE
STREET						CITY		_	STA	TE	ZIP CODE	
STREET					,	JII1			31A	15	eran eranen	
LIEN CODE SECOND L	IENHOLDER										LIEN DA	TE
STREET			CITY						STATE ZIP CODE			
*LESSEE / REGISTRANT INF NAME	ORMATION(OWNER O	F PLATE)	LEGAL	STATUS	NAME C	NAME	MAO LILU	Ш				
ADDRESS			CITY						STA	ATE	ZIP CODE	
VEHICLE COST / TAX INFOR SALE PRICE	MATION *(required for 1 TRADE IN AL		Transactions)	TAXA	BLE AMOUNT		SALESTAX PAIL	D		*TAX EXEN	IPTION REASON / SALES	TAX#
DEALER NAME			DEAL	ER ADDRESS					DEALER#			
*Required for Duplicate Title -	T.C.A. 55-3-115 (submit	Illegible or altered	Certificate of Tit	lle)								
LOST	STOLEN		MUTILATE	:D [RTN	D DUE TO NON DE	LIEVERY] AL	TERED		ILLEGIBLE	
Under penalties of perjury, I he or its assignees to determine th	reby certify all information	n provided is true	and correct to the	e best of my kno	owledge, and ac	knowledge that it is r	not the responsibility	of the Mo	tor Vehicle Division			
SIGNATURE OF CERTIFIER		alion provided by i				ORIZED SIGNATURI				DATE	12/09/2014	ı
NVOICE NUMBER	COUNTY NAME		C	O NUMBER	DATE OF API	PLICATION	BY AUTHORI	TY OF RE	GISTRAR OF MOT	OR VEHICLE	S(COUNTY CLERK)	
14343 @ OFFICE USE ONLY	HAMILTO	ON OT APPLICA	RIF	33	12/	09/2014			KNOWLES		valid registration)	ICM27
REGISTRATION FEE	CREDIT	LEASE		TRA	11.75	CLERK FEE	ISSUANCE FE		LE FEE	TOTA	AL TAX COLLECTED	
COMPUTATION OF	SALES OR USE TAX	X SA TAX	LOCA	AL TAX A	DDITIONAL TA	X COLL	ECTED IN STATE O	OF CO	UNTY WHEEL TAX		STICKER FEE	
SALES TAX USE TA	ORGAN DONOR	POSTA	AGE	VER		ID / RESIDENCY	VERIFICATION				AL FEES COLLECTED	
spiles/ Port: wks	48/DR27/8020	Cash: (0.09 C	heck: 0.	00 CI	neck#t	Crodit: 0.0	0 1	Rustra":	Change		362