

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

## OFFICIAL VEHICLE REGISTRATION

NEW OR CURR	Kers:										078	100
925550		BER			TE	RANSACTION NO1	REGISTRA	ATION ONLY NUMBE	R		4 (0	
OWNER INFOR	RMATION *LEGAL	STATUS: 1 (AND) 2	(0R) ENTER	NAME CODE I	N BOX 1 (SAM	E) 2(DIFFERE	NT) 3(MULTIPLE LAST N	JAMES) 4/COMPANY	) 5/OVER 28 CHARACT	-Epe\ 5	MAO N ILU	N
BOWM	AN SALE	S AND EQI	THOTHANE	,	MIDDLE INITIAL	L	LAST NAME	AND HOUSE ALL	FIRST NAME	LNO)	MIDDLE INITIA	
ADDRESS 1 (MAILING)							ADDRESS 2 (PHYSICAL)					
10233 (	GOVERN	OR LN BLV	'D				•	-,				
CITY WILLIA	MSPORT		STATE		ZIP CODE 21795		CITY		ST	ATE	ZIP CODE	
	PRINCIPAL BUS OR IN	CORP LOCATION P	06/20/20	13 LEAS	ED O SERV	VICE OPTIONS	301 58	32 1793	ARD/HEARING IMPAIR	RED CLS/YR	*INSURANCE POLICY	(#
VEHICLE INFOR	RMATION			Lyopei	LVEAD	BODY	TITLE BRAND - transla	ation	CODE	TYPE OF F	UEL - translation	CODE
1B9SV	532XEW9	78001	BOWM	1B9	2014	SE	NEW THE BRAND - TRAISIN	auon	N	1112011		9
SURRENDERE	D TITLE #		STATE PRE	VIOUS STATES	STITLED	VEHICLE U	SE VEHICLE TYPE	CURRENT MILE	AGE ODOMETER INDICATOR (List one)	OVER 10 YR	NOT ACTUAL (8) S / 16,000 LBS (1) F MECHANICAL LIMITS (9)	CODE
MSO			TN			F	S	*VEHICLE TRADE-			COMPANY VEHICLE #	1
COLOR CODE (e UPPER O	enter appropriate con LOWER	MOBILE HO	OME WDTH	# AXLES	S GRC	OSS VEHICLE	WEIGHT	VEHICLE THADE-	IN DESCRIPTION		A CONTRACTOR OF THE CONTRACTOR	78001
PLATE INFORM PLATE #(1)	ATION *(required CLAS	for Title and Registra SCODE/ISSUEYR(1)	ation and Registrati (3) VALIDATIO	on Only Transa N #(1)	ctions) SEE RECOUNTY STICK	EVERSE SIDE (ER #(1) CI	FOR COMPLETE INSTRI TY STICKER #(1)(2) *F	UCTIONS PLATE #(TRADE IN)(2	CLASS CODE/	ISSUE YR(2)		(1)(2)(3) ANENT
U45525		8020/199		OF SEATO(E)	ZONE/CO	DUNTY NAME)	(6) USI	OOT / REGISTRANT	ŧ(7)	N	NOTOR CARRIER #(8)	
TDR STICKER #	#(4) TE	EMP OPERATOR PE	HMIT #(3)	OF SEATS(5)	ZONE(CC	JOINTY INAME)	(0)					-0.7=
	TION (If lien pres										LIEN D	ATE
LIEN CODE	FIRST LIENH		ANIZ								06/2	0/2013
STREET	501	NTRUST BA	AIVIN									
5-20							CITY		ST	ATE M/D	ZIP CODE	
		TIMORE S	T 25TH				BALTIMO	ORE	STA	MD	ZIP CODE 21202 LIEN D	ATE
	20 E BAL		T 25TH					ORE		MD	21202	ATE
			T 25TH					ORE			21202	ATE
LIEN CODE STREET	SECOND LIE			LEGAL	. STATUS	NAME	CITY MA	ORE		MD	21202	ATE
LIEN CODE STREET	SECOND LIE	NHOLDER		LEGAL	. STATUS	NAME	CITY			MD	21202 LIEN D ZIP CODE	
STREET *LESSEE / REG	SECOND LIE	NHOLDER		LEGAL	_STATUS		CITY MA		ST	MD	21202	
STREET  "LESSEE / REG NAME  ADDRESS	SECOND LIE	NHOLDER  RMATION(OWNER C	OF PLATE) Title & Registration			C	CODE MA	AO ILU	ST	MD	ZIP CODE	ÞΕ
STREET  "LESSEE / REG NAME  ADDRESS	SECOND LIE	NHOLDER	OF PLATE) Title & Registration				CODE MA		ST	MD	ZIP CODE  ZIP CODE  ZIP CODE	ÞΕ
STREET  "LESSEE / REG NAME  ADDRESS  VEHICLE COS"	SECOND LIE	NHOLDER  RMATION(OWNER C	OF PLATE) Title & Registration	Transactions)		C ABLE AMOUN	CODE MA	AO ILU	ST	MD	ZIP CODE	ÞΕ
STREET  "LESSEE / REG NAME  ADDRESS  VEHICLE COS' SALE PRICE  DEALER NAME	SECOND LIE	NHOLDER  RMATION(OWNER C	DF PLATE)  Title & Registration	Transactions)	TAX/	C ABLE AMOUN	CODE MA	AO ILU	ST	MD	ZIP CODE  ZIP CODE  ZIP CODE	ÞΕ
STREET  *LESSEE / REG NAME  ADDRESS  VEHICLE COS' SALE PRICE  DEALER NAME  *Required for D	SECOND LIE	ATION *(required for TRADE IN AI	Title & Registration	DEA	TAX/	ABLE AMOUN	CITY  CODE MA  NAME  ITY  Third due to non deli	AO ILU SALESTAX PAID	ST.  ST.	MD  ATE  TAXE	ZIP CODE  ZIP CODE  ZIP CODE	ÞΕ
TLESSEE / REG NAME ADDRESS VEHICLE COS' SALE PRICE DEALER NAME 'Required for D' LOST Under penalties or its assignees	SECOND LIE	ATION *(required for TRADE IN AI  C.A. 55-3-115 (subm. STOLEN)  by certify all informat accuracy of the informat accuracy	Title & Registration	DEA  DEA  DEA  DEA  DEA  DEA  DEA  DEA	TAX,  LER ADDRESS  (Itle)  TED  the best of my kehalf.	ABLE AMOUN S R Knowledge, and	CITY  CODE MA	SALESTAX PAID  SEVERY  Of the responsibility of (IF APPLICABLE)	ST.  ST.  ALTERED  the Motor Vehicle Division	MD  ATE  TAX E)	ZIP CODE  ZIP CODE  ZIP CODE  ZIP CODE  XEMPTION REASON / SALE  DEALER #  ILLEGIBLE  ATE  07/18/20	ES TAX #
LIEN CODE  STREET  *LESSEE / REC NAME  ADDRESS  VEHICLE COS' SALE PRICE  DEALER NAME  *Required for D  LOST  Under penalties or its assignees SIGNATURE C	SECOND LIE  SISTRANT INFOI  T / TAX INFORM  E  Duplicate Title - T.  s of perjury, I here to determine the OF CERTIFIER/O	ATION *(required for TRADE IN AI STOLEN STOLEN WNER COUNTY NAME	Title & Registration LLOWANCE  it Illegible or aftered ion provided is true mation provided by	DEA  DEA  DEA  DEA  DEA  DEA  DEA  DEA	TAXA  ALER ADDRESS  TITLE  TED  The best of my kehall.  POWER OF AT	ABLE AMOUN S R Knowledge, and TTORNEY/AUT DATE OF A	CITY  CODE MA  NAME  ITY  TO DUE TO NON DELI  Acknowledge that it is not thorized signature (  APPLICATION	SALESTAX PAID  SALESTAX PAID  IEVERY  of the responsibility of the	ALTERED the Motor Vehicle Division	TAX EXTOR VEHIC	ZIP CODE  ZIP CODE  ZIP CODE  ZIP CODE  ZIP CODE  XEMPTION REASON / SAL  DEALER #	ES TAX #
STREET  *LESSEE / REC NAME  ADDRESS  VEHICLE COS' SALE PRICE  DEALER NAME  *Required for D  LOST  Under penalties or its assignees SIGNATURE C	SECOND LIE  SISTRANT INFOI  T / TAX INFORM  E  Duplicate Title - T,  s of perjury, I here to determine the OF CERTIFIER/O	ATION *(required for TRADE IN All STOLEN STOLEN WNER	Title & Registration LLOWANCE  it Illegible or alteres it on provided is true mation provided by  ON Trailer	DEA  d Certificate of T  MUTILAT  and correct to t  me or on my be	TAXA  ALER ADDRESS  Title)  TED  the best of my kehalf.  POWER OF AT	ABLE AMOUN S R Inowledge, and ITORNEY/AUT DATE OF A	BALTIMO  CITY  CODE MA  NAME  ITY  T  TN'D DUE TO NON DELI  Cacknowledge that it is not thorized signature (  APPLICATION  7/18/2013	SALESTAX PAID  SALESTAX PAID  SEVERY  Of the responsibility of (IF APPLICABLE)  BY AUTHORITY  W.F. (BII (total fees coile	ALTERED the Motor Vehicle Division OF REGISTRAR OF MO LL) KNOWLE cted Indicated certifier	TAX E)  TAX E)  OTOR VEHIC  S s this form a	ZIP CODE  ZIP CO	ES TAX #
LIEN CODE  STREET  *LESSEE / REG  NAME  ADDRESS  VEHICLE COS' SALE PRICE  DEALER NAME  TREQuired for D  LOST  Under penalties or its assignees SIGNATURE CO  INVOICE NUMI  13199  OFFICE USE C  REGISTRATIC  79.75	SECOND LIE  SISTRANT INFORM  T/TAX INFORM  E  Outplicate Title - T,  to determine the  F CERTIFIER/O  BER  ON FEE	ATION *(required for TRADE IN AI STOLEN STOLEN WNER COUNTY NAME HAMILT EMISSION:	Title & Registration LLOWANCE  it Illegible or alterex it illegible or or alterex it illegible or	DEA  d Certificate of T  MUTILAT  and correct to the me or on my brown	TAXA  LER ADDRESS  Title)  TED  the best of my k shall.  POWER OF AT  CO NUMBER  33	ABLE AMOUN S Ranowledge, and TTORNEY/AUT  DATE OF A  OT  RANS FEE	BALTIMO  CITY  CODE MA  NAME  ITY  Third Due to non delification of the control o	SALESTAX PAID  SALESTAX PAID  Of the responsibility of (IF APPLICABLE)  BY AUTHORITY  W.F. (BII (total fees colle ISSUANCE FEE 12.00	ALTERED  the Motor Vehicle Division  OF REGISTRAR OF MA  LL) KNOWLE  cted Indicated certified  TITLE FEE  5.50	TAX EXPONENTIAL EX	ZIP CODE  ZIP CODE  ZIP CODE  ZIP CODE  ZIP CODE  ZIP CODE  XEMPTION REASON / SAL  DEALER #  DEALER #  O7/18/20	ES TAX #
LIEN CODE  STREET  *LESSEE / REG  NAME  ADDRESS  VEHICLE COS' SALE PRICE  DEALER NAME  *Required for D  Under penalties or its assignees SIGNATURE C  INVOICE NUM!  13199  OFFICE USE C  REGISTRATIC  79.75  COMPUTATIO	SECOND LIE  SISTRANT INFORM  T/TAX INFORM  E  Outplicate Title - T,  to determine the  F CERTIFIER/O  BER  ON FEE	ATION *(required for TRADE IN AI STOLEN  STOLEN  CA. 55-3-115 (subm STOLEN  STOLEN  WNER  COUNTY NAME  HAMILT  EMISSION:  CREDIT  SALES OR USE T.	Title & Registration LLOWANCE  it Illegible or alterex it illegible or or alterex it illegible or	DEA  d Certificate of T  MUTILAT  and correct to the me or on my brown	TAXA  ALER ADDRESS  FITTED  The best of my k shall.  POWER OF AT  CO NUMBER  33	ABLE AMOUN S Ranowledge, and TTORNEY/AUT  DATE OF A  RANS FEE  ADDITIONAL	BALTIMO  CITY  CODE M.  NAME  ITY  TN'D DUE TO NON DELLI  Jacknowledge that it is not incorrect to signature ( APPLICATION  7/18/2013  CLERK FEE  TAX  COLLE	SALESTAX PAID  SALESTAX PAID  Of the responsibility of (IF APPLICABLE)  BY AUTHORITY  W.F. (BII)  (total fees colled in STATE OF	ALTERED  the Motor Vehicle Division  OF REGISTRAR OF MOLE  L) KNOWLE  Cotted Indicated certifies  TITLE FEE	TAX E)  TAX E)  TAX E)  OTOR VEHIC  S S this form a	ZIP CODE  ZIP CO	ES TAX #
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