

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

OFFICIAL VEHICLE REGISTRATION



| City Stickers: | | | | | | | | | STA |
|--|--|--|--|---|---|---|--|--|--|
| NEW OR CURRENT TITLE N | IUMBER | | | TRANSACTION CODE* | REGIST | RATION ONLY NUMBER | | | |
| 94487473 | | | | N01 | | | | | (E) |
| OWNER INFORMATION *LEG | | DR) ENTER NAM | E CODE IN BOX 1 (| SAME) 2(DIFFERE | NT) 3(MULTIPLE LAST | NAMES) 4(COMPANY) | (OVER 28 CHARACTE | | N ILU N |
| BSE TRAILER | | INOT HAME | MIDDLE IN | IITIAL | LAST WAVE | | FIRST NAME | N | MIDDLE INITIAL |
| ADDRESS 1 (MAILING) 10233 GOVER | NOR LN BLVI | D | | | ADDRESS 2 (PHYSIC | CAL) | | | |
| WILLIAMSPOR | RT | STATE MD | ZIP CODE 21795 | | CITY | | STA | ATE ZII | PCODE |
| NTY OF RESIDENCE/PRINCIPAL BUS C | OR INCORP LOCATION PU | RCHASE DATE | T | SERVICE OPTION | TELEPHONE | | RD/HEARING IMPAIRE | ED CLS/YR INSURA | ANCE POLICY# |
| HAMILTON 03 | 33 | 10/17/2014 | SEE REVERSE SIDE | E FOR INSTRUCTIONS | 240 7 | 772 5501 | | | |
| VEHICLE INFORMATION VIN | | MAKE M | ODEL YEAR | R BODY | TITLE BRAND - tran | nslation | CODE | TYPE OF FUEL - translat | ion CO |
| 13N148308415 | 519800 | FONA | 13N 200 | 04 SE | USED | | U | | 9 |
| URRENDERED TITLE # | | STATE PREVIOU | IS STATES TITLED | VEHICLE U | | CURRENT MILEAG | E ODOMETER | ACTUAL (0) NOT ACTUAL | (8) C |
| 10957537 | | ME | | F | s | | (List one) | OVER 10 YRS / 16,000 LBS N EXCESS OF MECHANICAL | L'LIMITS (9) |
| OLOR CODE (enter appropriate LOWE | MOBILE HON | ME WDTH | # AXLES | GROSS VEHICLE | WEIGHT | *VEHICLE TRADE-IN | DESCRIPTION | COMPANY | VEHICLE # 48012 |
| PLATE INFORMATION *(requ | uired for Title and Registrati | ion and Registration Or | | | | | | | |
| U545840 | LASSCODE/ISSUEYR(1)(3 8020/1994 | |) COUNTY S | TICKER #(1) CI | TY STICKER #(1)(2) | *PLATE #(TRADE IN)(2) | CLASS CODE/IS | SUE YR(2) EXPIR | PERMANE |
| DR STICKER #(4) | TEMP OPERATOR PERM | 10 | SEATS(5) ZONE | E(COUNTY NAME) | (6) U | SDOT / REGISTRANT #(7 |) | MOTOR CARRI | |
| | | | | | | | | | |
| IEN INFORMATION (If lien p IEN CODE FIRST LIER | | | | | | | | | LIEN DATE |
| SI | UNTRUST BAN | NK | | | | | | | 10/17/20 |
| TREET 120 E B | ALTIMORE ST | 25 EI | | | BALTIN | IOPE | STAT | | P CODE 202 |
| The second of the second | LIENHOLDER | 23 T L | | | DALIN | IONL | | 21 | LIEN DATE |
| | | | | | | 10/20/20/20/20/20/20/20/20/20/20/20/20/20 | | | |
| STREET | | | | | CITY | | STAT | E ZI | P CODE |
| LESSEE / REGISTRANT INF | FORMATION(OWNER OF | PLATE) | LEGAL STATUS | NAME. | CODE . | MAO ILU | 1000000 | | |
| NAME | | | | | NAME | | | | |
| ADDRESS | | | | Cl | TY | | STA | тЕ | ZIP CODE |
| | | | | | | | | | |
| VEHICLE COST / TAX INFOR | RMATION *(required for Titl | le & Registration Trans | actions) | | | | | | |
| | RMATION *(required for Title TRADE IN ALLO | | | TAXABLE AMOUNT | | SALESTAX PAID | | *TAX EXEMPTION REA | ASON / SALES TAX |
| SALE PRICE | | | | | | SALESTAX PAID | | *TAX EXEMPTION REA | |
| DEALER NAME | TRADE IN ALLO | DWANCE | DEALER ADDR | | | SALESTAX PAID | | | |
| DEALER NAME | TRADE IN ALLO | DWANCE | DEALER ADDR | eess | N'D DUE TO NON DEL | | ALTERED | DEALER# | |
| DEALER NAME Required for Duplicate Title - LOST Inder penalties of perjury, I he it is assignees to determine the | TRADE IN ALLO | legible or allered Certif | DEALER ADDR | RT ny knowledge, and a | N'D DUE TO NON DEL acknowledge that it is n | LEVERY on the responsibility of the | | DEALER # | |
| DEALER NAME Required for Duplicate Title - LOST Under penalties of perjury, I her its assignees to determine the | TRADE IN ALLO | legible or allered Certif | DEALER ADDR | RT ny knowledge, and a | N'D DUE TO NON DEL | LEVERY on the responsibility of the | | DEALER # | |
| DEALER NAME Prequired for Duplicate Title - LOST Under penalties of perjury, I her its assignees to determine the Signature of Certifier/ | TRADE IN ALLO T.C.A. 55-3-115 (submit ill STOLEN Breby certify all information he accuracy of the information with the information of the information of the information he accuracy of the information with the information he accuracy of the information with the information of the information with the | legible or allered Certification in the provided is true and colon provided by me or | DEALER ADDR Icate of Title) MUTILATED Orrect to the best of m on my behalf. POWER OF | RESS RT. ny knowledge, and a F ATTORNEY/AUTH R DATE OF AF | N'D DUE TO NON DEL acknowledge that it is n HORIZED SIGNATURE PPLICATION | LIEVERY of the (I) of | Motor Vehicle Division | DEALER # | 30/2014 CLERK) |
| Under penalties of perjury, I he rits assignees to determine the signature of certifier/ | TRADE IN ALLO T.C.A. 55-3-115 (submit lill STOLEN Breby certify all information the accuracy of the information with the information of the inf | iegible or altered Certification in the provided is true and colon provided by me or the provided by the provided by me or the provided by me or the provided by the | DEALER ADDR Icate of Title) MUTILATED orrect to the best of m on my behalf. POWER OF | RESS RT. ny knowledge, and a F ATTORNEY/AUTH R DATE OF AF | N'D DUE TO NON DEL acknowledge that it is n HORIZED SIGNATURE PPLICATION /30/2014 | ot the responsibility of the (IF APPLICABLE) BY AUTHORITY OF W.F. (BILL (total fees collecte: | Motor Vehicle Division REGISTRAR OF MOTO KNOWLES I Indicated certifies th | DEALER # DATE 10/ DR VEHICLES(COUNTY) is form as a valid regist | LEGIBLE 30/2014 CLERK) HCN ration) |
| PREGISTRATION FEE | TRADE IN ALLO T.C.A. 55-3-115 (submit ill STOLEN Breby certify all information he accuracy of the information with the information of the information of the information he accuracy of the information with the information he accuracy of the information with the information of the information with the | iegible or altered Certification in the provided is true and colon provided by me or the provided by the provided by me or the provided by me or the provided by the | DEALER ADDR Icate of Title) MUTILATED POWER OF CO NUMBE | RESS RT. ny knowledge, and a F ATTORNEY/AUTH R DATE OF AF | N'D DUE TO NON DEL acknowledge that it is n HORIZED SIGNATURE PPLICATION | ilevery of the responsibility of the (IF APPLICABLE) BY AUTHORITY OF W.F. (BILL (total fees collecter ISSUANCE FEE | Motor Vehicle Division REGISTRAR OF MOTO KNOWLES Indicated certifies th | DEALER # | LEGIBLE 30/2014 CLERK) HCN ration) |
| PROBLEM NAME Prequired for Duplicate Title - LOST LOST Under penalties of perjury. I he is assignees to determine the sign of the sign | TRADE IN ALLO T.C.A. 55-3-115 (submit III STOLEN ereby certify all information the accuracy of the informat //OWNER COUNTY NAME HAMILTOI EMISSION: Tra | provided is true and corting provided by me or all provided by all provided by all provided by me or all provided by all provide | DEALER ADDR Icate of Title) MUTILATED POWER OF CO NUMBE | RESS RT RT RT RT RT RT RT RT RT | N'D DUE TO NON DEL acknowledge that it is n HORIZED SIGNATURE PPLICATION /30/2014 | BY AUTHORITY OF W.F. (BILL (total fees collecte: 12.00 | Motor Vehicle Division REGISTRAR OF MOTO KNOWLES I Indicated certifies th | DATE DATE 10/ DR VEHICLES(COUNTY) is form as a valid regist TOTAL TAX COL | CLERK) HCN ration) |
| DEALER NAME Prequired for Duplicate Title - LOST Under penalties of perjury, I her its assignees to determine the signature of Certifier/ NVOICE NUMBER 14303 @ DEFICE USE ONLY REGISTRATION FEE 79.75 | TRADE IN ALLO TO A 55-3-115 (submit III STOLEN Breby certify all information he accuracy of the informat //OWNER COUNTY NAME HAMILTOI EMISSION: Tra CREDIT SALES OR USE TAX | provided is true and corting provided by me or aller | DEALER ADDR Icate of Title) MUTILATED POWER OF CO NUMBE 33 | RESS RT RT RY knowledge, and a F ATTORNEY/AUTH R DATE OF AF 10 TRANS FEE | N'D DUE TO NON DEL acknowledge that it is n HORIZED SIGNATURE PPLICATION /30/2014 | BY AUTHORITY OF W.F. (BILL (total fees collecte ISSUANCE FEE 12.00 ECTED IN STATE OF | REGISTRAR OF MOTO NOWLES Indicated certifies the little FEE 5.50 | DATE DATE 10/ DR VEHICLES(COUNTY) is form as a valid regist TOTAL TAX COL .00 | CLERK) HCN ration) LECTED |