



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



City Stickers:

NEW OR CURRENT TITLE NUMBER 95480895	TRANSACTION CODE N01	REGISTRATION ONLY NUMBER
--	--------------------------------	--------------------------

OWNER INFORMATION (LEGAL STATUS: (1) AND) (OR) (2) OR (3) ENTER NAME CODE IN BOX 1 (SAME) (2) (DIFFERENT) (3) (MULTIPLE LAST NAMES) (4) (COMPANY) (5) (OVER 25 CHARACTERS) 4 N N					
LAST NAME BSE TRAILER LEASING LLC		FIRST NAME 		MIDDLE INITIAL 	
ADDRESS 1 (MAILING) 10233 GOVERNOR LN BLVD			ADDRESS 2 (PHYSICAL) 		
CITY WILLIAMSPORT		STATE MD		ZIP CODE 21795	
CITY OF RESIDENCE/PRINCIPAL BUS OR INCORP LOCATION HAMILTON 033		PURCHASE DATE 01/21/2015		TELEPHONE # 240-772-5474	
*LEASED <input type="checkbox"/> *SERVICE OPTIONS <input type="checkbox"/>		*PLACARD/HEARING IMPAIRED CLS/YR		*INSURANCE POLICY #	

VIN 3H3V532C3GT003183	MAKE HYTR	MODEL 3H3	YEAR 2016	BODY SE	TITLE BRAND - translation NEW	CODE N	TYPE OF FUEL - translation 	CODE 9
SURRENDERED TITLE # MSO	STATE CA	PREVIOUS STATES TITLED	VEHICLE USE F	VEHICLE TYPE S	CURRENT MILEAGE	ODOMETER ACTUAL (0) NOT ACTUAL (2) INDICATOR OVER 10 YRS / 16,000 LBS (1) (List one) IN EXCESS OF MECHANICAL LIMITS (0)		CODE 1
COLOR CODE (or last appropriate code) UPPER O	MOBILE HOME LGTH WIDTH	# AXLES	GROSS VEHICLE WEIGHT		*VEHICLE TRADE-IN DESCRIPTION		COMPANY VEHICLE # GT 003183	

PLATE INFORMATION (required for Title and Registration and Registration Only Transactions) SEE REVERSE SIDE FOR COMPLETE INSTRUCTIONS							
PLATE #(1) U554862	CLASS CODE/ISSUE YR(1)(3) 8020/1994	VALIDATION #(1)	COUNTY STICKER #(1)	CITY STICKER #(1)(2)	*PLATE #(TRADE IN)(2)	CLASS CODE/ISSUE YR(2)	EXPIRATION DATE (1)(2)(3) PERMANENT
TOR STICKER #(4)	TEMP OPERATOR PERMIT #(3)	# OF SEATS(5)	ZONE(COUNTY NAME)(6)		USDOT / REGISTRANT #(7)	MOTOR CARRIER #(8)	

LIEN CODE	FIRST LIENHOLDER SUNTRUST BANK	LIEN DATE 01/21/2015
STREET 120 E BALTIMORE ST 25 FL	CITY BALTIMORE	STATE MD
ZIP CODE 21202	SECOND LIENHOLDER	
STREET	CITY	STATE
ZIP CODE		

LESSEE / REGISTRANT INFORMATION (OWNER OF PLATE)		LEGAL STATUS	NAME CODE	PLAC	LD
NAME		NAME			
ADDRESS		CITY		STATE	ZIP CODE

SALE PRICE	TRADE IN ALLOWANCE	TAXABLE AMOUNT	SALES TAX PAID	TAX EXEMPTION REASON / SALES TAX #
DEALER NAME		DEALER ADDRESS		DEALER #

*Required for Duplicate Title - T.C.A. 55-5-115 (submit file if eligible or altered Certificate of Title)

<input type="checkbox"/> LOST	<input type="checkbox"/> STOLEN	<input type="checkbox"/> MUTILATED	<input type="checkbox"/> RT'ND DUE TO NON DELIVERY	<input type="checkbox"/> ALTERED	<input type="checkbox"/> ILLEGIBLE
-------------------------------	---------------------------------	------------------------------------	--	----------------------------------	------------------------------------

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.

SIGNATURE OF CERTIFIER/OWNER	POWER OF ATTORNEY/AUTHORIZED SIGNATURE (IF APPLICABLE)	DATE 01/22/2015
------------------------------	--	---------------------------

INVOICE NUMBER 15022 @	COUNTY NAME HAMILTON	CD NUMBER 33	DATE OF APPLICATION 01/22/2015	BY AUTHORITY OF REGISTRAR OF MOTOR VEHICLES (COUNTY CLERK) W.F. (BILL) KNOWLES	HCM27
OFFICE USE ONLY REGISTRATION FEE 79.75	EMISSION: Trailer	LEASE FEE	TRANS FEE	CLERK FEE	ISSUANCE FEE 12.00
COMPUTATION OF <input type="checkbox"/> SALES TAX <input type="checkbox"/> USE TAX	SALES OR USE TAX	SA TAX	LOCAL TAX	ADDITIONAL TAX	COLLECTED IN STATE OF
*SERVICE OPT FEE	ORGAN DONOR	POSTAGE	VER	ID / RESIDENCY VERIFICATION	TOTAL TAX COLLECTED .00
					TOTAL FEES COLLECTED 97.25

GT003183