



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



City Stickers:

NEW OR CURRENT TITLE NUMBER 95487582	TRANSACTION CODE N01	REGISTRATION ONLY NUMBER
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OWNER INFORMATION (HAND) (PRINT) (TYPE NAME(S) IN BOXES (IS MR (M) F (F) M (M) L (L) S (S) CHARACTERS)			STATE		
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 STATE
CITY OF RESIDENCE (PRINCIPAL BUS OR INCORP LOCATION) HAMILTON 033	PURCHASE DATE 02/06/2015	*LEASED <input checked="" type="checkbox"/> *SERVICE OPTIONS <input checked="" type="checkbox"/> <small>SEE REVERSE SIDE FOR INSTRUCTIONS</small>	TELEPHONE # 240 772 5501	*PLACARD HEARING IMPAIRED CLS/YR	*INSURANCE POLICY #

VIN 3H3V532C6GT003324	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 (2) NOT ACTUAL (3) INDICATOR OVER 10 YRS / 15,000 LBS (1) (List one) IN EXCESS OF MECHANICAL LIMITS (2)	CODE 1	
COLOR CODE (enter appropriate code)* UPPER O	MOBILE HOME LGTH 0	WIDTH	# AXLES	GROSS VEHICLE WEIGHT	*VEHICLE TRADE-IN DESCRIPTION	COMPANY VEHICLE # GT 003324		

PLATE #(1) U552654	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
TDR 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 02/06/2015
STREET 120 E BALTIMORE ST 25 FL	CITY BALTIMORE	STATE MD
LIEN CODE	SECOND LIENHOLDER	LIEN DATE
STREET	CITY	STATE
STREET	CITY	STATE

VEHICLE/REGISTRANT INFORMATION (OWNER OF PLATE)	LEGAL STATUS	NAME CODE	WAC	WAT
NAME	NAME	CITY	STATE	ZIP CODE
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 #		

<input type="checkbox"/> LOST	<input type="checkbox"/> STOLEN	<input type="checkbox"/> MUTILATED	<input type="checkbox"/> RTND DUE TO NON DELIVERY	<input type="checkbox"/> ALTERED	<input type="checkbox"/> ILLEGIBLE
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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 02/11/2015
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INVOICE NUMBER 15042 @	COUNTY NAME HAMILTON	CO NUMBER 33	DATE OF APPLICATION 02/11/2015	BY AUTHORITY OF REGISTRAR OF MOTOR VEHICLES/COUNTY CLERK W.F. (BILL) KNOWLES	PBK14
OFFICE USE ONLY REGISTRATION FEE 79.75	CREDIT	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 FEES COLLECTED 97.25

GT003324