



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



City Stickers:

NEW OR CURRENT TITLE NUMBER 95487740	TRANSACTION CODE N01	REGISTRATION ONLY NUMBER	STATE
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OWNER INFORMATION - LEGAL STATUS: (1) AND (2) (3) (4) (5) (6) (7) (8) (9) (10) (11) (12) (13) (14) (15) (16) (17) (18) (19) (20) (21) (22) (23) (24) (25) (26) (27) (28) (29) (30) (31) (32) (33) (34) (35) (36) (37) (38) (39) (40) (41) (42) (43) (44) (45) (46) (47) (48) (49) (50) (51) (52) (53) (54) (55) (56) (57) (58) (59) (60) (61) (62) (63) (64) (65) (66) (67) (68) (69) (70) (71) (72) (73) (74) (75) (76) (77) (78) (79) (80) (81) (82) (83) (84) (85) (86) (87) (88) (89) (90) (91) (92) (93) (94) (95) (96) (97) (98) (99) (100)			BUYER NAME (COMBINE BOX 1 & 2) (3) (4) (5) (6) (7) (8) (9) (10) (11) (12) (13) (14) (15) (16) (17) (18) (19) (20) (21) (22) (23) (24) (25) (26) (27) (28) (29) (30) (31) (32) (33) (34) (35) (36) (37) (38) (39) (40) (41) (42) (43) (44) (45) (46) (47) (48) (49) (50) (51) (52) (53) (54) (55) (56) (57) (58) (59) (60) (61) (62) (63) (64) (65) (66) (67) (68) (69) (70) (71) (72) (73) (74) (75) (76) (77) (78) (79) (80) (81) (82) (83) (84) (85) (86) (87) (88) (89) (90) (91) (92) (93) (94) (95) (96) (97) (98) (99) (100)						
LAST NAME BSE TRAILER LEASING LLC		FIRST NAME	MIDDLE INITIAL	LAST NAME		FIRST NAME	MIDDLE INITIAL		
ADDRESS 1 (MAILING) 10233 GOVERNOR LN BLVD				ADDRESS 2 (PHYSICAL)					
CITY WILLIAMSPORT		STATE MD	ZIP CODE 21795		CITY		STATE	ZIP CODE	
CITY OF RESIDENCE/PRINCIPAL BUS OR INCORP LOCATION HAMILTON 033		PURCHASE DATE 02/06/2015		*LEASED <input type="checkbox"/> *SERVICE OPTIONS <input type="checkbox"/> <small>SEE REVERSE SIDE FOR INSTRUCTIONS</small>		TELEPHONE # 240 772 6501		*PLACARD/HEARING IMPAIRED CLS/YR	*INSURANCE POLICY #

VEHICLE INFORMATION									
VIN 3H3V532C9GT003396	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 (S) NOT ACTUAL (S) INDICATOR OVER 10 YRS / 15,000 LBS (1) IN EXCESS OF MECHANICAL LIMITS (S)		CODE 1	
COLOR CODE (enter appropriate code)* UPPER LOWER O	MOBILE HOME LGTH WIDTH	# AXLES	GROSS VEHICLE WEIGHT		VEHICLE TRADE-IN DESCRIPTION			COMPANY VEHICLE # GT 003396	

PLATE INFORMATION (See back for title and registration and other information only. The following are reverse side information for county instructions)									
PLATE #(1) U552726	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 INFORMATION (If not applicable)									
LIEN CODE	FIRST LIENHOLDER SUNTRUST BANK							LIEN DATE 02/06/2015	
STREET 120 E BALTIMORE ST 25 FL			CITY BALTIMORE			STATE MD	ZIP CODE 21202		
LIEN CODE	SECOND LIENHOLDER							LIEN DATE	
STREET			CITY			STATE	ZIP CODE		

LESSOR/REGISTRANT INFORMATION (NUMBER OF PLATES) (COUNTY NAME) (NAME) (CITY) (STATE) (ZIP CODE)									
NAME					NAME				
ADDRESS					ADDRESS				
CITY					CITY				
STATE					STATE				
ZIP CODE					ZIP CODE				

VEHICLE CONDITION INFORMATION (required for title & registration)									
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"/> RT'ND 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
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OFFICE USE ONLY									
REGISTRATION FEE 79.75									
CREDIT	LEASE FEE	TRANS FEE	CLERK FEE	ISSUANCE FEE 12.00	TITLE FEE 5.50	TOTAL TAX COLLECTED .00			
COMPUTATION OF SALES OR USE TAX		SA TAX	LOCAL TAX	ADDITIONAL TAX	COLLECTED IN STATE OF	COUNTY WHEEL TAX	CITY STICKER FEE		
<input type="checkbox"/> SALES TAX <input type="checkbox"/> USE TAX		POSTAGE		VER	ID / RESIDENCY VERIFICATION	*TOTAL FEES COLLECTED 97.25			
*SERVICE OPT FEE		ORGAN DONOR							

GT003396