



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

OFFICIAL VEHICLE REGISTRATION



STATE  
GT003780

City Stickers:

NEW OR CURRENT TITLE NUMBER <b>95509985</b>			TRANSACTION CODE <b>N01</b>	REGISTRATION ONLY NUMBER						
OWNER INFORMATION: LEGAL STATUS (1 AND 2 GR) <input type="checkbox"/> ENTER NAME CODE IN BOX 1 (SAME) 2 (DIFFERENT) 3 (MULTIPLE LAST NAMES) 4 (COMPANY) 5 (OVER 26 CHARACTERS) <b>4</b>			NAME CODE <b>MAQ N TU N</b>							
LAST NAME <b>BSE TRAILER LEASING LLC</b>	FIRST NAME	MIDDLE INITIAL	LAST NAME	FIRST NAME	MIDDLE INITIAL					
ADDRESS 1 (MAILING) <b>10233 GOVERNOR LN BLVD</b>			ADDRESS 2 (PHYSICAL)							
CITY <b>WILLIAMSPORT</b>	STATE <b>MD</b>	ZIP CODE <b>21795</b>	CITY	STATE	ZIP CODE					
CDNTY OF RESIDENCE/PRINCIPAL BUS OR INCORP LOCATION <b>HAMILTON 033</b>	PURCHASE DATE <b>04/13/2015</b>	*LEASED <input checked="" type="checkbox"/> *SERVICE OPTIONS <input type="checkbox"/> SEE REVERSE SIDE FOR INSTRUCTIONS	TELEPHONE # <b>301 582 1793</b>		*PLACARD/HEARING IMPAIRED CLS/YR			*INSURANCE POLICY #		
VEHICLE INFORMATION		MAKE <b>HYTR</b>	MODEL <b>3H3</b>	YEAR <b>2016</b>	BODY <b>SE</b>	TITLE BRAND - translation <b>NEW</b>		CODE <b>N</b>	TYPE OF FUEL - translation	CODE <b>9</b>
SURRENDERED TITLE # <b>MSO</b>		STATE <b>CA</b>	PREVIOUS STATES TITLED		VEHICLE USE <b>F</b>	VEHICLE TYPE <b>S</b>	CURRENT MILEAGE	ODOMETER ACTUAL (1) NOT ACTUAL (2) INDICATOR OVER 10 YRS / 15,000 LBS (1) (List one) IN EXCESS OF MECHANICAL LIMITS (2)		CODE <b>1</b>
COLOR CODE (enter appropriate code)* UPPER <b>O</b>	MOBILE HOME LGTH WDTH	# AXLES	GROSS VEHICLE WEIGHT			*VEHICLE TRADE-IN DESCRIPTION			COMPANY VEHICLE # <b>GT 003780</b>	

PLATE INFORMATION (Required for title and Registration Only from below. SEE REVERSE SIDE FOR COMPLETE INSTRUCTIONS)									
PLATE #(1) <b>U575886</b>	CLASS CODE/ISSUE YR(1)(2) <b>8020/1994</b>	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 INFORMATION (if any present)									
LIEN CODE	FIRST LIENHOLDER <b>SUNTRUST BANK</b>								LIEN DATE <b>04/13/2015</b>
STREET <b>120 E BALTIMORE ST 25 FL</b>	CITY		STATE		ZIP CODE <b>21202</b>				
LIEN CODE	SECOND LIENHOLDER								LIEN DATE
STREET	CITY		STATE		ZIP CODE				

LESSEE/REGISTRANT INFORMATION (OWNER OF PLATE)		LEGAL STATUS <input type="checkbox"/>	NAME CODE <input type="checkbox"/>	MAQ <input type="checkbox"/>	TU <input type="checkbox"/>				
NAME		NAME							
ADDRESS		CITY		STATE		ZIP CODE			
VEHICLE COST / TAX INFORMATION (Required for title and Registration Only from below)									
SALE PRICE	TRADE IN ALLOWANCE	TAXABLE AMOUNT		SALESTAX PAID		*TAX EXEMPTION REASON / SALES TAX #			
DEALER NAME		DEALER ADDRESS							

*Required to Duplicate Title (TCA 56-3-119) (Submit legible or altered Certificate of Title)									
<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				

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.			POWER OF ATTORNEY/AUTHORIZED SIGNATURE(IF APPLICABLE)			DATE <b>04/15/2015</b>	
SIGNATURE OF CERTIFIER/OWNER							

INVOICE NUMBER <b>15105 @</b>	COUNTY NAME <b>HAMILTON</b>	CO NUMBER <b>33</b>	DATE OF APPLICATION <b>04/15/2015</b>	BY AUTHORITY OF REGISTRAR OF MOTOR VEHICLES(COUNTY CLERK) <b>W.F. (BILL) KNOWLES</b>			HCM27
(Total fees collected indicated certifies this form as a valid registration)							
REGISTRATION FEE <b>79.75</b>	CREDIT	LEASE FEE	TRANS FEE	CLERK FEE	ISSUANCE FEE <b>12.00</b>	TITLE FEE <b>5.50</b>	TOTAL TAX COLLECTED <b>.00</b>
COMPUTATION OF <input type="checkbox"/> SALES TAX <input type="checkbox"/> USE TAX		SA TAX	LOCAL TAX	ADDITIONAL TAX	COLLECTED IN STATE OF	COUNTY WHEEL TAX	CITY STICKER FEE
*SERVICE OPT FEE		ORGAN DONOR	POSTAGE	VER	ID / RESIDENCY VERIFICATION		*TOTAL FEES COLLECTED <b>97.25</b>