



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



City Stickers:

NEW OR CURRENT TITLE NUMBER 94503272		TRANSACTION CODE N01	REGISTRATION ONLY NUMBER						
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 CORP LOCATION HAMILTON 033		PURCHASE DATE 12/18/2014	*LEASED <input checked="" type="checkbox"/> *SERVICE OPTIONS <input checked="" type="checkbox"/> <small>SEE REVERSE SIDE FOR INSTRUCTIONS</small>		TELEPHONE # 301-582-1793	*PLACARD/HEARING IMPAIRED CLS/YR	*INSURANCE POLICY #		
VIN 3H3V532C2GT006009	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 (B) NOT ACTUAL (B) INDICATOR OVER 10 YRS / 15,000 LBS (1) (Unit one) IN EXCESS OF MECHANICAL LIMITS (B)	CODE 1		
COLOR CODE (enter appropriate code)* UPPER O	MOBILE HOME LGTH WIDTH	# AXLES	GROSS VEHICLE WEIGHT	*VEHICLE TRADE-IN DESCRIPTION		COMPANY VEHICLE # 006009			
PLATE #(1) U556384	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 12/18/2014			
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				
NAME				NAME					
ADDRESS				CITY		STATE	ZIP CODE		
SALE PRICE	TRADE IN ALLOWANCE	TAXABLE AMOUNT		SALESTAX 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				
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 12/29/2014	
INVOICE NUMBER 14363 @	COUNTY NAME HAMILTON	CO NUMBER 33	DATE OF APPLICATION 12/29/2014	BY AUTHORITY OF REGISTRAR OF MOTOR VEHICLES(COUNTY CLERK) W.F. (BILL) KNOWLES			HCM27		
OFFICE USE ONLY REGISTRATION FEE 79.75	EMISSION: Trailer		(total fees collected indicated certifies this form as a valid registration)						
COMPUTATION OF <input type="checkbox"/> SALES TAX <input type="checkbox"/> USE TAX	LEASE FEE	TRANS FEE	CLERK FEE	ISSUANCE FEE 12.00	TITLE FEE 5.50	TOTAL TAX COLLECTED .00			
*SERVICE OPT FEE	SALES OR USE TAX	SA TAX	LOCAL TAX	ADDITIONAL TAX	COLLECTED IN STATE OF	COUNTY WHEEL TAX	CITY STICKER FEE		
ORGAN DONOR	POSTAGE	VER	ID / RESIDENCY VERIFICATION		*TOTAL FEES COLLECTED 97.25				

H 006009