

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

OFFICIAL VEHICLE REGISTRATION



Change: 0.00

RDA-592

Auth#:

City Stickers:														STATE
NEW OR CURRENT TITLE NU	MBER			TE	ANSACTION ODE*		REGISTI	RATION ONLY N	NUMBER					1
94488787					N01							[7]	(N)	[KT]
OWNER INFORMATION *LEG	AL STATUS: 1 (AND) 2	(OR) ENTER NA	ME CODE IN E	ODLE INITIA	E) 2(DIFFERE	NT) 3(MULT	TIPLE LAST	NAMES) 4(CO	MPANY) 5	(OVER	28 CHARACTI	ERS)	MAO N IL	UN
BSE TRAILER	LEASING LL		WILL	DEE INITIA	-	LAST WAR					I IIIOT II/IIIE			(
ADDRESS 1 (MAILING)						ADDRESS	S 2 (PHYSIC	CAL)						· · · · · · · · · · · · · · · · · · ·
10233 GOVERI	NOR LN BLV	D I												
CITY		STATE				CITY					ST	ATE	ZIP CODE	
WILLIAMSPORT ENTY OF RESIDENCE/PRINCIPAL BUS OR INCORP LOCATION F		MD PURCHASE DATE		21795			_ TELEPHONE# PLA			CARD/HEARING IMPAIRED CLS/YF			YR *INSURANCE POLICY #	
HAMILTON 033		10/04/2014 LEAS		SED • SERVICE OPTION REVERSE SIDE FOR INSTRUCTIONS		240-772-5501								
VEHICLE INFORMATION														
		MAKE	AKE MODEL		EAR BODY		TITLE BRAND - translation				CODE	TYPE OF F	UEL - translation	CODE
1DW1A5328PS793312		STOU	1DW	1993	SE	USED				U			(0) NOT ACTUAL (8)	
SURRENDERED TITLE #				VEHICLE U	SE VEH	VEHICLE TYPE CURRENT MIL		IT MILEAG	EAGE ODOMETER ACTU INDICATOR OVER (List one) IN EXC		OVER 10 YR N EXCESS O	UAL (0) NOT ACTUAL (8) R 10 YRS / 16,000 LBS (1) CESS OF MECHANICAL LIMITS (9)		
558206083020/ COLOR CODE (enter appropriate		OK #AXLES			S .E WEIGHT *VEHICLE TRA			TRADE IN	DESCE			COMPANY VEHICLE	1 1	
COLOR CODE (enter appropriate code)* UPPER LOWER LOWER LGTH WDTH			W POLLEG	SOO VEINGEE	VEHICLE INDE			TOODE III	BLOOK	11011			353394	
PLATE INFORMATION *(requi	red for Title and Registra	ation and Registration	Only Transaction	ons) SEE RE	VERSE SIDE	FOR COMP	PLETE INST	RUCTIONS						
PLATE #(1) CL/	ASSCODE/ISSUEYR(1)	(3) VALIDATION #		INTY STICK		TY STICKE		*PLATE #(TRAD	DE IN)(2)	С	LASS CODE/IS	SSUE YR(2)		
U546114 TDR STICKER #(4)	8020/1994 TEMP OPERATOR PER		SEATS(5)	ZONE/CO	UNTY NAME)	(6)		SDOT / REGIST	DANT #/7	\perp		Тм	OTOR CARRIER #(8)	NANENT
I DICOMOREN #(4)	TEMP OF ENATOR PE	(11111111111111111111111111111111111111	SEATS(S)	20112(00	ONT I NAME	(0)	"	3DOT / KEGIST	KAN W(I	,		"	OTOR GARRIER #(0)	
LIEN INFORMATION (If lien pr	esent)			1				739 A.					***************************************	
LIEN CODE FIRST LIEN	HOLDER												LIEN	DATE
	INTRUST BA	NK				O.T./						-	ZIP CODE	01/2014
120 E BA	BALTIMORE							STATE ZIP CODE MD 21202						
LIEN CODE SECOND LI	ENHOLDER												LIEN	DATE
STREET						CITY					STAT	F	ZIP CODE	
577.22	OH!										-"			
*LESSEE / REGISTRANT INFO	ORMATION(OWNER O	F PLATE)	LEGAL ST	ATUS 🗌	NAME	CODE] ,	AAO 🗌 IL	Lu 🔲					
NAME						NAME								
ADDRESS	CITY								STA	TE	ZIP CO	DE		
							51							
SALE PRICE	TRADE IN ALI		nsactions)	TAXA	BLE AMOUNT			SALESTAX PA	AID			*TAX EXE	EMPTION REASON / SAI	LES TAX#
DEALER NAME			DEALER ADDRESS								DEALER #			
*Required for Duplicate Title - 1	C.A. 55-3-115 (submit	Illegible or altered Cer	tificate of Title)	т.	_			Tr	\dashv			T		
LOST	STOLEN		MUTILATED	1			NON DEL			ALTERI			ILLEGIBLE	
Under penalties of perjury, I here or its assignees to determine the	eby certify all information accuracy of the inform	n provided is true and ation provided by me o	correct to the bor on my behalf.	est of my kn	owledge, and a	cknowledge	e that it is no	ot the responsibi	ility of the I	Motor Ve	ehicle Division	1		
SIGNATURE OF CERTIFIER/C	OWNER		POV	VER OF ATT	ORNEY/AUTH	IORIZED SI	IGNATURE	(IF APPLICABLE	E)			DAT	11/04/20	14
INVOICE NUMBER	COUNTY NAME		CON	IUMBER	DATE OF AP	PLICATION	N	BY AUTHO	RITY OF I	REGIST	RAR OF MOT	OR VEHICL	ES(COUNTY CLERK)	
14308 @	HAMILTO			33	11.	04/20	14				OWLES			HCM27
OFFICE USE ONLY REGISTRATION FEE	EMISSION: T	railer LEASE FE	E	TRA	ANS FEE	CLER	K FEE	ISSUANCE	FEE T	ITLE F	EE	то	a valid registration) TAL TAX COLLECTED	
79.75 COMPUTATION OF	SALES OR USE TAX	(SA TAX	LOCAL 1	FAX A	DDITIONAL TA	×	COLLE	12.00			.50 Y WHEEL TAX		Y STICKER FEE	
☐ SALES TAX ☐ USE TA	x												TAL EFFO 00: : 507	
*SERVICE OPT FEE	ORGAN DONOR	POSTAGE		VER		ID/RE	ESIDENCY	VERIFICATION				7 7%	OTAL FEES COLLECTED 17.25	'

Cash: 0.00