

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

OFFICIAL VEHICLE REGISTRATION



Change: 0.00

Credit: 0.00

Auth#:

City Stickers:												STATE
94494889	IMBER			TR	CANSACTION ODE:	REGIST	RATION ONLY N	UMBER				
OWNER INFORMATION *LEG	AL STATUS: 1 (AND) 2	(OR) ENTER	NAME CODE	IN BOX 1 (SAMI		ENT) 3(MULTIPLE LAS	T NAMES) 4(CO	MPANY) 5(0	OVER 28 CHARACTE	RS) 4	MAO N	ILU N
LAST NAME FIRST NAME BSE TRAILER LEASING LLC			MIDDLE INITIAL			LAST NAME			FIRST NAME		MIDDL	E INITIAL
ADDRESS 1 (MAILING)		. 1				ADDRESS 2 (PHYSI	CAL)					
10233 GOVERI	NOR LN BLV	D		ZIP CODE		CITY		_	STA	TE	ZIP COI	DE
WILLIAMSPORT MI		D 21795						D/HEARING IMPAIRE		R		
HAMILTON 03		10/01/20	14 LEAS	SED O -SER	VICE OPTION	Ne 🗍	772 5501					
VEHICLE INFORMATION VIN		MAKE	MODEL	YEAR	BODY	TITLE BRAND - tra	nslation		CODE	TYPE OF F	UEL - translation	CODE
1GRAA9623VS033106		GDAN	734	1997	SE	USED	- 1		U			9
SURRENDERED TITLE # STATE PR 558207331056 OK		VIOUS STATE	S TITLED	VEHICLE (USE VEHICLE TYP	E CURREN	MILEAGE	ODOMETER INDICATOR ((List one) IN	ACTUAL (0) OVER 10 YR: I EXCESS O	NOT ACTUAL (8) S / 16,000 LBS (1) F MECHANICAL LIMIT	CODE 1	
OLOR CODE (enter appropriate code)* MOBILE HOME LGTH WDTH		# AXLES GROSS VEHICLE			WEIGHT VEHICLE TRADE			DESCRIPTION		COMPANY VEHICLE #		
PLATE INFORMATION *(requi			017		WEDGE NIGE	ron ocument un						√ 874106
PLATE #(1) CLA U555061	ASSCODE/ISSUEYR(1)(8020/1994 TEMP OPERATOR PER	3) VALIDATIO		COUNTY STICK		ITY STICKER #(1)(2)	*PLATE #(TRAD		CLASS CODE/IS			N DATE (1)(2)(3) RMANEN [*] 8)
LIEN INFORMATION (If lien pr			1.00									
LIEN CODE FIRST LIEN										LIEN DATE 10/01/2014		
STREET 120 E BA	BALTIMORE						STATE ZIP CODE MD 21202			DE		
LIEN CODE SECOND LI												LIEN DATE
STREET			CITY						STATE ZIP CODE			DE
*LESSEE / REGISTRANT INFO	DRMATION(OWNER OF	PLATE)	LEGAL	STATUS	NAME		MAO IL	u				
ADDRESS						NAME ITY			STAT	E	ZII	PCODE
VEHICLE COST / TAX INFORM SALE PRICE	MATION *(required for Ti TRADE IN ALL		(ransactions)	TAXA	BLE AMOUN	т	SALESTAX PA	ND		*TAX EXE	MPTION REASON	/ SALES TAX #
DEALER NAME			DEAL	LER ADDRESS							DEALER#	
*Required for Duplicate Title - T	C.A. 55-3-115 (submit)	llegible or altered	Certificate of Ti	itie)		1811				Τ,		7
LOST	STOLEN		MUTILATE	. '		IN'D DUE TO NON DE		_	LTERED	l	ILLEGIE	BLE
Jnder penalties of perjury, I here or its assignees to determine the SIGNATURE OF CERTIFIER/O		provided is true a tion provided by n	nd correct to the e or on my bel	ne best of my kno half. POWER OF ATT	owledge, and	acknowledge that it is r	ot the responsibil	ity of the M	otor Vehicle Division	DATI	11/24/	2014
NVOICE NUMBER	COUNTY NAME		C	O NUMBER		PPLICATION			GISTRAR OF MOTO		ES(COUNTY CLER	
14328 @ DEFICE USE ONLY REGISTRATION FEE	EMISSION: TI		FEE	33 TRA	11 ANS FEE	/24/2014 CLERK FEE		collected I	KNOWLES indicated certifies thin TLE FEE	s form as a	a valid registration	
79.75 COMPUTATION OF	SALES OR USE TAX	SA TAX	LOCA	AL TAX A	DDITIONAL T	TAX COLL	12.00		5.50 DUNTY WHEEL TAX		OO Y STICKER FEE	
SALES TAX USE TAX *SERVICE OPT FEE	ORGAN DONOR	POSTA	GE	VER		ID / RESIDENCY	VERIFICATION			W15500	TAL FEES COLLEC	CTED