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

## **OFFICIAL VEHICLE REGISTRATION**

						050	431
		TRANSACTION CODE*	REGISTR	ATION ONLY NUMBER			
•		N01					
						//V/	ILU N
	MIDDLE IN	NITIAL			FIRST NAME	MIDDLE	
BLVD			ADDRESS 2 (PHYSIC	AL)			
STATE	ZIP C	CODE	СПУ		STA	ATE ZIP CODE	
MD	2179	)5	TELEPHONE	* I *PLACARD	WHEARING IMPAIRE	ED CLSYYR   *INSURANCE P	OLICY#
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MAKE	MODEL YEAR	R BODY	TITLE BRAND - trans				CODE
MONO	1NN 199	99 SE	USED		U		9
STATE PREV	IOUS STATES TITLED	VEHICLE U	SE VEHICLE TYPE	CURRENT MILEAGE	ODOMETER INDICATOR	ACTUAL (0) NOT ACTUAL (8) OVER 10 YRS / 16,000 LBS (1) N EXCESS OF MECHANICAL LIMITS	CODE
11632266 ME  OLOR CODE (enter appropriate code)* MOBILE HOME # AXLES GROS			S				
н жотн							050431
					LOUASE CODEAS	CLIE VD(O) EVDIDATION	DATE (1)(2)(3)
	#(1) COUNTY'S	SHOKEH #(1) CI	14 STICKEH #(1)(2)	PLATE #(THADE IN)(2)	CLASS CODE/IS	``	RMANENT
FOR PERMIT #(3)	DF SEATS(5) ZON	E(COUNTY NAME)	(6) US	DOT / REGISTRANT #(7)		MOTOR CARRIER #(8)	
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RE ST 25 FL				ORE			
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			СПУ		STATI	E ZIP CODE	
NER OF PLATE)	LEGAL STATUS	NAME	CODE M			A CANADA A CANADA C	
			NAME				
		CII	NAME	AO L.J. ILU L.J. S.			CODE
		СП	NAME	AO L.J. · ILU L.ST & A	STAT	re zip (	CODE
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	FIRST NAME EASING LLC  BLVD  STATE  MD  PURCHASE DATE 12/14/201  MAKE MONO  STATE PREV ME  BILLE HOME WDTH  LRegistration and Registration JEYR(1)(3) /1994	FIRST NAME MIDDLE II  EASING LLC  BLVD  STATE ZIP C  MD 2179  PURCHASE DATE 12/14/2012  LEASED 0 SEE REVERSE SID  MAKE MODEL YEAR  MONO 1NN 199  STATE PREVIOUS STATES TITLED  ME  BILLE HOME THE HOME THE HOME THE HOME TO PERMIT #(3)  FOF SEATS(5)  TO BANK  RE ST 25 FL	AND 2 (OR) ENTER NAME CODE IN BOX 1 (SAME) 2 (DIFFERE FIRST NAME MIDDLE INITIAL EASING LLC  BLVD  STATE ZIP CODE  MD 21795  PURCHASE DATE 12/14/2012  LEASED 0 SERVICE OPTION SEE REVERSE SIDE FOR INSTRUCTIONS  MAKE MODEL YEAR BODY  MONO 1NN 1999 SE  STATE PREVIOUS STATES TITLED VEHICLE U  ME F  OBILE HOME WITH # AXLES GROSS VEHICLE  LEYR(1)(3) VALIDATION #(1) COUNTY STICKER #(1) CT  /1994  TOR PERMIT #(3) FOF SEATS(5) ZONE(COUNTY NAME)	(AND) 2 (OR) ENTER NAME CODE IN BOX 1 (SAME) 2(DIFFERENT) 3(MULTIPLE LAST FIRST NAME  EASING LLC  ADDRESS 2 (PHYSIC PHYSIC PHYSI	NO1	(AND) 2 (IP) ENTER NAME CODE IN BOX 1 (SAME) 2(DIFFERENT) 3(MULTIPLE LAST NAMES) 4(COMPANY) 5(OVER 28 CHARACTE FIRST NAME  FIRST NAME  ADDRESS 2 (PHYSICAL)  STATE ZIP CODE CITY STA  MD 21795  PURCHASE DATE 12/14/2012 "LEASED 0 "SERVICE OPTIONS 301-582-1793  TELEPHONE # "PLACARDHEARING IMPAIR! 12/14/2012 "LEASED 0 "SERVICE OPTIONS 301-582-1793  MAKE MODEL YEAR BODY TITLE BRAND - translation CODE INDICATOR INDICATO	TRANSACTION NOT  REGISTRATION ONLY NUMBER  (AND) 2 ((R)