

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

OFFICIAL VEHICLE REGISTRATION



City Stickers:											STATE
NEW OR CURRENT TITLE NUM 94465936	MBER			TRANSACTION NO.	5	EGISTRATION ONLY I	NUMBER				
OWNER INFORMATION *LEGA	L STATUS: 1 (AND) 2	(OR) ENTER NAM	ME CODE IN BO	X 1 (SAME) 2(DIFFE	RENT) 3(MULTIPL	E LAST NAMES) 4(CO	MPANY) 5(C	VER 28 CHARACTE	RS) 4	MAO N ILU	N
LAST NAME BSE TRAILER L	EASING LL	FIRST NAME	MIDE	LE INITIAL	LAST NAME			FIRST NAME		MIDDLE INITIA	AL
ADDRESS 1 (MAILING)					ADDRESS 2 (PHYSICAL)					
10233 GOVERN	OR LN BLV	STATE		ZIP CODE	CITY			STA	TE	ZIP CODE	
		MD			l citt						
CATY OF RESIDENCE/PRINCIPAL BUS OR INCORP LOCATION HAMILTON 033		URCHASE DATE 08/27/2014	*LEASED	O *SERVICE OPT	IONS 3			D/HEARING IMPAIRE	ED CLS/YR	*INSURANCE POLICY	Y#
VEHICLE INFORMATION											-T
VIN				YEAR BODY		D - translation			TYPE OF FUEL	- translation	CODE
			1DW 2005 EVIOUS STATES TITLED		OOLD	105/2000		ODOMETER ACTUAL (0)		NOT ACTUAL (8) CODE	
09401751		ME		F		6		(List one) IN	OVER 10 YRS / 16 N EXCESS OF ME	CHANICAL LIMITS (9)	1
COLOR CODE (enter appropriate co UPPER LOWER	MOBILE HO	OME WDTH	# AXLES	GROSS VEHIC	CLE WEIGHT	*VEHICLE 1	TRADE-IN D	ESCRIPTION	C	OMPANY VEHICLE #	3181.
PLATE INFORMATION *(require PLATE #(1) CLAS	ed for Title and Registra SSCODE/ISSUEYR(1)			s) SEE REVERSE SI	DE FOR COMPLE CITY STICKER #(DE IN)(2)	CLASS CODE/IS	SUE YR(2)	EXPIRATION DATE	(1)(2)(3)
U543801 8020/1994									PERMANENT		
TDR STICKER #(4)	EMP OPERATOR PE	RMIT #(3) # OF	SEATS(5)	ZONE(COUNTY NAI	ME)(6)	USDOT / REGIST	RANT #(7)		мото	R CARRIER #(8)	
LIEN INFORMATION (If lien pres	sent)								I		
LIEN CODE FIRST LIENH		NIIZ								LIEN DA	
STREET	NTRUST BA	INK			CITY			STATI	E	ZIP CODE	7/2014
120 E BALTIMORE ST 25 FL LIEN CODE SECOND LIENHOLDER			BALTIMORE					MD 21202			
LIEN CODE SECOND LIE	NHOLDER									E.E.V. D.	
STREET			CITY					STATI	E	ZIP CODE	
*LESSEE / REGISTRANT INFO	RMATION(OWNER O	F PLATE)	LEGAL STA	TUS NA	ME CODE	мао 🔲 п					
NAME					NAME						
DDRESS			CITY					STATE ZIP CODE			
VEHICLE COST / TAX INFORM	ATION *(required for T		sactions)	TAXABLE AMO	JNT	SALESTAX P	AID		*TAX EXEMP	TION REASON / SALE	S TAX#
DEALER NAME			DEALER A	ADDRESS						DEALER#	
*Required for Duplicate Title - T.	C A 55-3-115 (submit	Illegible or altered Cert	ificate of Title)								
LOST	STOLEN		MUTILATED		RTN'D DUE TO N			LTERED		ILLEGIBLE	
Under penalties of perjury, I here or its assignees to determine the		n provided is true and contains provided by me of	correct to the bear on my behalf.	st of my knowledge, a	and acknowledge th	at it is not the responsib	ility of the Mo	otor Vehicle Division	DATE		
SIGNATURE OF CERTIFIER/O	WNER		POW	ER OF ATTORNET	UTHORIZED SIGN					09/10/201	4
INVOICE NUMBER	COUNTY NAME	NI.	CONU		F APPLICATION			KNOWLES			HCM27
0FFICE USE ONLY	EMISSION: 1		11		(total fees collecte		s collected I	Indicated certifies this form as a			
79.75	CREDIT					12.0	0	5.50	.00.		
COMPUTATION OF SALES TAX USE TAX	SALES OR USE TA	X SA TAX	LOCAL TA	AX ADDITIONA	AL TAX	COLLECTED IN STAT	E OF CO	OUNTY WHEEL TAX		TICKER FEE	
*SERVICE OPT FEE	ORGAN DONOR	POSTAGE		VER	ID / RESI	DENCY VERIFICATION	1			FEES COLLECTED	
									Change:		