



TENNESSEE DEPARTMENT OF REVENUE
VEHICLE SERVICES
MULTI-PURPOSE APPLICATION

OFFICIAL VEHICLE REGISTRATION

Form instructions are available at <http://www.tn.gov/revenue/forms/11315201inst.pdf> or call toll-free at 1 (888) 871-3171, Monday-Friday, 8:00-4:30, CST.

| | | | | |
|--|--|--|---|--|
| NEW OR CURRENT TITLE NUMBER 90400185 | | TRANSACTION CODE N1 | REGISTRATION ONLY NUMBER | |
| OWNER INFORMATION *LEGAL STATUS: 1 (AND) 2 (OR) <input checked="" type="checkbox"/> 0 ENTER NAME CODE IN BOX 1 (SAME) 2 (DIFFERENT) 3 (MULTIPLE LAST NAMES) 4 (COMPANY) 5 (OVER 28 CHARACTERS) <input checked="" type="checkbox"/> 2 MAO <input checked="" type="checkbox"/> Y ILU <input checked="" type="checkbox"/> Y | | | | |
| LAST NAME WELLS FARGO EQUIPMENT | | FIRST NAME FINANCE INC | MIDDLE INITIAL | |
| ADDRESS 1 (MAILING) 3100 WEST END AVE STE 530 | | ADDRESS 2 (PHYSICAL) | CITY | STATE ZIP CODE |
| CITY NASHVILLE | | STATE TN | ZIP CODE 37203 | ADDITIONAL OWNER |
| CITY OF RESIDENCE/PRINCIPAL BUS OR INCORP LOCATION DAVIDSON | | PURCHASE DATE 19 9/ 5/2012 | *LEASED <input type="checkbox"/> *SERVICE OPTIONS <input type="checkbox"/> | TELEPHONE # 9999999 |
| | | *PLACARD / HEARING IMPAIRED CLS/YR | *INSURANCE POLICY # | |
| VEHICLE INFORMATION | | | | |
| VIN 1GRAP9627DD449144 | MAKE GDAN | MODEL VAN | YEAR 2013 | BODY SE |
| TITLE BRAND - translation N | | CODE N | TYPE OF FUEL - translation 9 | |
| SURRENDERED TITLE # MSO | STATE TN | PREVIOUS STATES TITLED | VEHICLE USE F | VEHICLE TYPE S |
| CURRENT MILEAGE | ODOMETER INDICATOR (List one) | | ACTUAL (S) NOT ACTUAL (S) OVER 10 YRS / 16,000 LBS (1) IN EXCESS OF MECHANICAL LIMITS (1) | |
| CODE 1 | | | | |
| COLOR CODE (enter appropriate code) UPPER 9 LOWER 9 | MOBILE HOME LGTH | WDTH | # AXLES | GROSS VEHICLE WEIGHT |
| *VEHICLE TRADE-IN DESCRIPTION | | | COMPANY VEHICLE # SL221499 | |
| PLATE INFORMATION * (required for Title and Registration and Registration Only Transactions) | | | | |
| PLATE # (1) U391290 | 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) PERM |
| TDS STICKER # (4) | TEMP OPERATOR PERMIT # (3) | # OF SEATS (5) | ZONE (COUNTY NAME) (6) | USDOT / REGISTRANT # (7) |
| MOTOR CARRIER # (8) | | | | |
| LIEN INFORMATION (if lien present) | | | | |
| FIRST LIENHOLDER | | | | LIEN DATE |
| STREET | | | | CITY STATE ZIP CODE |
| SECOND LIENHOLDER | | | | LIEN DATE |
| STREET | | | | CITY STATE ZIP CODE |
| *LESSEE / REGISTRANT INFORMATION (OWNER OF PLATE) | | | | |
| LEGAL STATUS <input type="checkbox"/> | | NAME CODE <input type="checkbox"/> | MAO <input type="checkbox"/> | ILU <input type="checkbox"/> |
| NAME | | NAME | | |
| ADDRESS | | CITY STATE ZIP CODE | | |
| VEHICLE COST / TAX INFORMATION * (required for Title & Registration Transactions) | | | | |
| SALE PRICE | TRADE IN ALLOWANCE | TAXABLE AMOUNT | SALES TAX PAID | *TAX EXEMPTION REASON / SALES TAX # |
| DEALER NAME | | DEALER ADDRESS | DEALER # 9999 | |
| * Required for Duplicate Title -- T.C.A. 55-3-115 (submit illegible or altered Certificate of Title) | | | | |
| <input type="checkbox"/> LOST | <input type="checkbox"/> STOLEN | <input type="checkbox"/> MUTILATED | <input type="checkbox"/> RTN'D 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 Taxpayer and Vehicle Services Division or its assignees to determine the accuracy of the information provided by me or on my behalf. | | | | |
| SIGNATURE OF CERTIFIER/OWNER X | | POWER OF ATTORNEY/AUTHORIZED SIGNATURE (IF APPLICABLE) | | DATE 9/11/2012 11:3 |
| INVOICE NUMBER 37 20120911 | COUNTY NAME DAVIDSON | CO NUMBER 19 | DATE OF APPLICATION 9/11/2012 | BY AUTHORITY OF REGISTRAR OF MOTOR VEHICLES (COUNTY CLERK) BRENDA WYNN # 37 LINEWEAV rr |
| OFFICE USE ONLY | | | | |
| REGISTRATION FEE | CREDIT | LEASE FEE | TRANSACTION FEE | ISSUANCE FEE |
| COMPUTATION OF 79.75 | SALES OR USE TAX | LOCAL RATE | ADDITIONAL TAX | COLLECTED IN STATE OF 12.00 |
| COUNTY WHEEL TAX 5.50 | CITY WHEEL TAX | TOTAL TAX COLLECTED | | |
| *SALES TAX <input type="checkbox"/> USE TAX | ORGAN DONOR | POSTAGE | VER | ID / RESIDENCY VERIFICATION |
| EXEMPT | | *TOTAL FEES COLLECTED | | |