



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



City Stickers:

NEW OR CURRENT TITLE NUMBER 97009741		TRANSACTION CODE N01	REGISTRATION ONLY NUMBER		STATE
OWNER INFORMATION *LEGAL STATUS: 1 (AND) 2 (OR) <input type="checkbox"/> ENTER NAME CODE IN BOX 1: 1 (SAME) 2 (DIFFERENT) 3 (MULTIPLE LAST NAMES) 4 (COMPANY) 5 (OVER 28 CHARACTERS) 4 MAO <input type="checkbox"/> N <input type="checkbox"/> LU <input type="checkbox"/> N					
LAST NAME BSE TRAILER LEASING LLC		FIRST NAME	MIDDLE INITIAL	LAST NAME	FIRST NAME MIDDLE INITIAL
ADDRESS 1 (MAILING) 10233 GOVERNOR LN BLVD		ADDRESS 2 (PHYSICAL)			
CITY WILLIAMSPORT		STATE MD	ZIP CODE 21795	CITY	STATE ZIP CODE
DNTY OF RESIDENCE/PRINCIPAL BUS OR INCOMP LOCATION HAMILTON 033		PURCHASE DATE 01/13/2016	*LEASED <input type="checkbox"/> *SERVICE OPTIONS <input type="checkbox"/> SEE REVERSE SIDE FOR INSTRUCTIONS	TELEPHONE # 240-772-5474	*PLACARD/HEARING IMPAIRED CLS/YR *INSURANCE POLICY #
VEHICLE INFORMATION					
VIN 3H3V532C1HT386025		MAKE HYTR	MODEL 3H3	YEAR 2017	BODY SE
SURRENDERED TITLE # MSO		STATE CA	PREVIOUS STATES TITLED	VEHICLE USE F	VEHICLE TYPE S
COLOR CODE (enter appropriate code)* UPPER O LOWER		MOBILE HOME LGTH WIDTH	# AXLES	GROSS VEHICLE WEIGHT	*VEHICLE TRADE-IN DESCRIPTION
PLATE INFORMATION *required for Title and Registration and Registration Only Transactions. SEE REVERSE SIDE FOR COMPLETE INSTRUCTIONS		CLASS CODE/ISSUE YR(2) EXPIRATION DATE (1)(2)(3)			
PLATE # (1) U661899		CLASS CODE/ISSUE YR(1)(3) 8020/1994	VALIDATION # (1)	COUNTY STICKER # (1)	CITY STICKER # (1)(2)
TDR STICKER # (4)		TEMP OPERATOR PERMIT # (3)	# OF SEATS (5)	ZONE (COUNTY NAME) (6)	USDOT / REGISTRANT # (7)
LIEN INFORMATION (if lien present)		LIEN DATE			
LIEN CODE FIRST LIENHOLDER SUNTRUST BANK		01/13/2016			
STREET 120 E BALTIMORE ST 25 FL		CITY BALTIMORE		STATE MD	ZIP CODE 21202
LIEN CODE SECOND LIENHOLDER		LIEN DATE			
STREET		CITY		STATE	ZIP CODE
*LESSEE / REGISTRANT INFORMATION (OWNER OF PLATE)					
NAME		LEGAL STATUS <input type="checkbox"/>	NAME CODE <input type="checkbox"/>	MAO <input type="checkbox"/>	LU <input type="checkbox"/>
ADDRESS		CITY		STATE	ZIP CODE
VEHICLE COST / TAX INFORMATION *required for Title & Registration Transactions					
SALE PRICE		TRADE IN ALLOWANCE	TAXABLE AMOUNT	SALESTAX PAID	*TAX EXEMPTION REASON / SALES TAX #
DEALER NAME		DEALER ADDRESS		DEALER #	
*Required for Duplicate Title - T.O.A. 55/3-116 (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 Motor Vehicle Division or its assignees to determine the accuracy of the information provided by me or on my behalf.					
SIGNATURE OF CERTIFIER/OWNER		POWER OF ATTORNEY/AUTHORIZED SIGNATURE (IF APPLICABLE)			DATE 01/29/2016
INVOICE NUMBER 16029 @		COUNTY NAME HAMILTON	CO NUMBER 33	DATE OF APPLICATION 01/29/2016	BY AUTHORITY OF REGISTRAR OF MOTOR VEHICLES (COUNTY CLERK) W.F. (BILL) KNOWLES
OFFICE USE ONLY REGISTRATION FEE 79.75		EMISSION: Trailer			
COMPUTATION OF <input type="checkbox"/> SALES TAX <input type="checkbox"/> USE TAX		SALES OR USE TAX	SA TAX	LOCAL TAX	ADDITIONAL TAX
*SERVICE OPT FEE		ORGAN DONOR	POSTAGE	VER	ID / RESIDENCY VERIFICATION
TOTAL TAX COLLECTED .00		TOTAL FEES COLLECTED 108.25			

HT 386025