

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

## OFFICIAL VEHICLE REGISTRATION

RDA-692



| City Stickers:  |   |  |   |   | MIII BYBALT K  | ווו ומשלי בהשיח ההברבוד מי מוחר" היה<br>STATE  |
|---|---|--|---|---|--|--|
| NEW OR CURRENT TITLE NUMBER   |   | TRANSACTIO<br>CODE*  |   | NLY NUMBER                              |  |  |
| 97747397  | n n   | N01  |   |   |  |  |
| OWNER INFORMATION *LEGAL STATUS: 1 (AN<br>LAST NAME   | ID) 2 (0R) ENTER NAME<br>FIRST NAME             | CODE IN BOX 1 (SAME) 2(DIFFE<br>MIDDLE INITIAL               | RENT) 3(MULTIPLE LAST NAMES) 4            | 4(COMPANY) 5(OVE                        | ER 28 CHARACTERS)  | MAO N ILU N  |
| BSE TRAILER LEASING   |   |  |   |   |  |  |
| ADDRESS 1 (MAILING)   |   |  | ADDRESS 2 (PHYSICAL)                      |   |  |  |
| 10233 GOVERNOR LN B   | LVD   |  |   |   |  |  |
| WILLIAMSPORT  | STATE<br>MD                                     | ZIP CODE<br>21795  | CITY                                      |   | STATE  | ZIP CODE   |
| HAMILTON 033  | 03/01/2016                                      | *LEASED 0 *SERVICE OPTIONS SEE REVERSE SIDE FOR INSTRUCTIONS |   | 1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 | TEARING IMPAIRED CLS/Y   | 'INSURANCE POLICY#   |
| VEHICLE INFORMATION   | MAKE MOI  | DEL YEAR BODY  | TITLE BRAND - translation                 |   | CODE TYPE OF   | FUEL - translation CODE  |
| 5V8VC5320GM607538   |   | V8 2016 SE   | -8  |   | N  | 9  |
| SURRENDERED TITLE #   |   | STATES TITLED VEHICLE  | 14544                                     | RRENT MILEAGE                           | ODOMETER ACTUAL (  | 0) NOT ACTUAL (8) CODE   |
| MSO   | ОН  | F  | s   |   | INDICATOR OVER 10 Y  | (RS / 16,000 LBS (1)<br>OF MECHANICAL LIMITS (9)   |
| COLOR CODE (enter appropriate code)* MOBILE   | E HOME #  | # AXLES GROSS VEHIC  |   | ICLE TRADE-IN DES                       | CRIPTION   | COMPANY VEHICLE #  |
| O LÓWER LGTH  | WDTH  |  |   |   |  |  |
| PLATE INFORMATION *(required for Title and Re   | gistration and Registration Only                | Transactions) SEE REVERSE SII                                | DE FOR COMPLETE INSTRUCTION               | ıs                                      | irana ma   |  |
| PLATE #(1) CLASSCODE/ISSUEY   | um company                                      | COUNTY STICKER #(1)  | CITY STICKER #(1)(2) PLATE #(             | (TRADE IN)(2)                           | CLASS CODE/ISSUE YR  | And the second s |
| U679644 8020/19   |   |  |   |   |  | PERMANENT  |
| TEMP OPERATOR   | R PERMIT #(3) # OF SE.                          | ATS(5) ZONE(COUNTY NAM                                       | (E)(6) USDOT / RE                         | EGISTRANT #(7)                          |  | MOTOR CARRIER #(8)   |
|   |   |  |   |   |  |  |
| LIEN INFORMATION (If lien present) LIEN CODE FIRST LIENHOLDER   |   |  |   |   |  | LIEN DATE  |
| SUNTRUST  | BANK  |  |   |   |  | 03/01/2016   |
| STREET  |   |  | CITY                                      |   | STATE  | ZIP CODE   |
| 120 E BALTIMORE JEN CODE SECOND LIENHOLDER  | S1 25 FL  |  | BALTIMORE                                 |   | MD   | 21202<br>LIEN DATE   |
|   |   |  |   |   |  |  |
| STREET  |   |  | CITY                                      |   | STATE  | ZIP CODE   |
|   |   |  |   |   |  |  |
| LESSEE / REGISTRANT INFORMATION(OWNE  | R OF PLATE)                                     | LEGAL STATUS NAM   | ME CODE MAO                               | ILU 🗌                                   |  |  |
| NAME  |   |  | NAME                                      |   |  |  |
| ADDRESS   |   | CITY   |   |   | ZIP CODE   |  |
|   |   |  |   |   |  |  |
| VEHICLE COST / TAX INFORMATION *(required   TRADE IN  | for Title & Registration Transac<br>N ALLOWANCE | tions) TAXABLE AMOU  | INT SALEST                                | FAX PAID                                | *TAX E   | XEMPTION REASON / SALES TAX #  |
| 251152 11115  |   | DEALER (PROSES   |   |   |  | DEMEDIC  |
| DEALER NAME   |   | DEALER ADDRESS   |   |   |  | DEALER#  |
| *Required for Duplicate Title - T.C.A. 55-3-115 (sul  | bmit Illegible or altered Certifica             | ate of Title)  |   |   |  |  |
| LOST STOL   |   |  | RTN'D DUE TO NON DELIEVERY                | ALTE                                    | ERED   | ILLEGIBLE  |
|   |   |  |   |   | and the second s |  |
| Inder penalties of perjury, I hereby certify all inform<br>rits assignees to determine the accuracy of the interpretation<br>SIGNATURE OF CERTIFIER/OWNER | formation provided by me or on                  |  | nd acknowledge that it is not the respons |   |  | ATE  |
|   |   |  |   | enconnite (1900 e € nii                 | "  | 04/29/2016   |
| NVOICE NUMBER COUNTY NAME   |   | CO NUMBER DATE OF  | APPLICATION BY AU                         | JTHORITY OF REGI                        | ISTRAR OF MOTOR VEHIC  | LES(COUNTY CLERK)  |
| 16120 @ HAMIL   |   | 33 0   |   | F. (BILL) K                             |  | HCM27  |
| REGISTRATION FEE CREDIT   | N: Trailer<br>LEASE FEE                         | TRANS FEE CI   | LERK FEE ISSUANCE FEE                     | LIEN FEE                                | A CONTRACTOR OF THE PARTY OF TH | OTAL TAX COLLECTED   |
| 79.75  COMPUTATION OF SALES OR USE  | E TAX SA TAX                                    | LOCAL TAX ADDITIONAL   | 12.00                                     | 11.00                                   |  | .00  |
| SALES TAX USE TAX   | - IAA   SA IAA                                  | LOCAL IAA ADDITIONAL   | - IAA COLLECTED IN S                      | SIAIE OF COUR                           | VIII VVIIEEL IAX   | ALL SHOKEK FEE   |
| C SALES TAX C SSE TAX   |   | 1  |   |   |  |  |
| SERVICE OPT FEE ORGAN DONOR   | R POSTAGE                                       | VER  | ID / RESIDENCY VERIFICA                   | ITION                                   |  | TOTAL FEES COLLECTED  108.25   |

SF-1357