

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

OFFICIAL VEHICLE REGISTRATION



City Stickers:									PROMETERS !	HATE MAKE AND	STATE	
NEW OR CURRENT TITLE NU 97747428	JMBER			TI	RANSACTION CODE*	REGIST	RATION ONLY NUMBE	R			JIAIL	
OWNER INFORMATION *LEG	AL STATUS: 1 (AND) 2	(OR) ENTER	NAME CODE IN	N BOX 1 (SAM		ENT) 3/MIII TIDI E I AC	T NAMES) A/COMPANIA	S EVOLUTE OF OUR DA	4	MAO N ILU	N	
AST NAME FIRST NAME MIDDLE INITIAL					L	LAST NAME			FIRST NAME		MAO N ILU N	
BSE TRAILER	LEASING LL	С										
DDRESS 1 (MAILING) 10233 GOVERI	NOBINBLY	Б				ADDRESS 2 (PHYSI	CAL)					
ITY	NOR LIN BLV	STATI		ZIP CODE		CITY			STATE	ZIP CODE		
WILLIAMSPORT ITY OF RESIDENCE/PRINCIPAL BUS OR INCORP LOCATION		MD 21		21795	5.7							
HAMILTON 03		04/20/20	16 LEASE	ED 0 SER	VICE OPTION	301	582 1793	CARD/HEARING IMPA	IRED CLS/YR	*INSURANCE POLICY	′#	
EHICLE INFORMATION			AND VALUE									
IN .		MAKE	MODEL	YEAR	BODY	TITLE BRAND - tra	nslation	CODE	TYPE OF FUEL	- translation	CODE	
2MN01JAHX81	002490	TRIM	2MN	2008	SE	USED		ι	J		9	
URRENDERED TITLE #			VIOUS STATES	TITLED	VEHICLE U	SE VEHICLE TYPE	CURRENT MILE	AGE ODOMETI INDICATO (List one)	DR OVER 10 YRS / 1	DT ACTUAL (8) 16,000 LBS (1) ECHANICAL LIMITS (9)	CODE	
11082935		ME			F	S				20 000 00 00 00 00 00 00 00 00 00 00 00	1	
DLOR CODE (enter appropriate PPER LOWER	code)* MOBILE HO	ME WDTH	# AXLES	GRO	OSS VEHICLE	WEIGHT	*VEHICLE TRADE-	IN DESCRIPTION	C	COMPANY VEHICLE #		
0			TOTAL PROPERTY AND ADDRESS OF THE PERSON NAMED AND ADDRESS OF	Turesosus.						85	209	
ATE INFORMATION *(requir ATE #(1) CLA	red for Title and Registra ASSCODE/ISSUEYR(1)(tions) SEE RE		FOR COMPLETE INST TY STICKER #(1)(2)	FRUCTIONS *PLATE #(TRADE IN)(2) CLASS CODE	E/ISSUE YR(2)	EXPIRATION DATE	(1)(2)(3)	
U679657	8020/1994		533			20 5000				PERMA	NEN	
DR STICKER #(4) TEMP OPERATOR PERMIT #(3) # OF		OF SEATS(5)	ZONE(CC	UNTY NAME)	(6) USDOT / REGISTRANT #(7)		(7)	MOTOR C				
EN INFORMATION (If lien pr	esent)											
EN CODE FIRST LIEN	HOLDER									LIEN DA	TE	
SU	SUNTRUST BANK									04/20	0/2016	
TREET	ALTIMORE ST 25 FL				BALTIN	IOPE	ST	MD	ZIP CODE 21202			
	ENHOLDER	23 I L				DALIII	IOIL		IVID	LIEN DA	TE	
TREET						CITY		ST	TATE	ZIP CODE		
LESSEE / REGISTRANT INFO	ORMATION(OWNER OF	PLATE)	LEGAL S	STATUS	NAME	CODE	MAO ILU					
IAME						NAME						
DDRESS					CITY				STATE	ZIP CODE		
						the second secon				No. of Contract Contr		
EHICLE COST / TAX INFORT			Transactions)	TANA	DI E AMOUNT	A THE WANT	SALESTAX PAID		*TAY EYEME	PTION REASON / SALES	S TAY#	
	TRADE IN ALL	OWANCE		TAXA	BLE AMOUNT		SALESTAX PAID		TAX EXEMP	TION REAGON / GALLO	3 1700#	
ALE PRICE			DEALE	ER ADDRESS					ı	DEALER #		
									- 1			
DEALER NAME		done no podrezo		W. 1879-1981								
EALER NAME	T.C A. 55-3-115 (submit	llegible or altered		e)						1	-	
EALER NAME	T.C.A. 55-3-115 (submit	llegible or altered			RI	'N'D DUE TO NON DE	LIEVERY	ALTERED		ILLEGIBLE		
EALER NAME Required for Duplicate Title -	STOLEN		Certificate of Titl MUTILATE	D			(A.C.)		on	ILLEGIBLE		
Required for Duplicate Title - LOST Inder penalties of perjury, I her its assignees to determine th	STOLEN reby certify all information e accuracy of the information		MUTILATE	D e best of my kr	nowledge, and		not the responsibility of th		ion DATE		•	
Required for Duplicate Title - LOST Inder penalties of perjury, I her its assignees to determine th	STOLEN reby certify all information e accuracy of the information DWNER		MUTILATE	best of my kr alf. OWER OF AT	nowledge, and	acknowledge that it is a	not the responsibility of the	ne Motor Vehicle Divisi	DATE	04/29/2016	6	
Required for Duplicate Title - LOST Inder penalties of perjury, I her its assignees to determine th SIGNATURE OF CERTIFIER/O	STOLEN reby certify all information e accuracy of the information DWNER COUNTY NAME	n provided is true a ation provided by r	MUTILATE	best of my kr alf. DWER OF AT	TORNEY/AUT	acknowledge that it is in HORIZED SIGNATUR	not the responsibility of the	e Motor Vehicle Divisi	OTOR VEHICLES	04/29/2016 (COUNTY CLERK)		
Required for Duplicate Title - LOST Inder penalties of perjury, I her its assignees to determine th SIGNATURE OF CERTIFIER/O	STOLEN reby certify all information e accuracy of the information of t	n provided is true a ation provided by r	MUTILATE	best of my kr alf. OWER OF AT	TORNEY/AUT	acknowledge that it is a	BY AUTHORITY C W.F. (BIL (total fees collect	F REGISTRAR OF M	OTOR VEHICLES	04/29/2016 (COUNTY CLERK)		
Required for Duplicate Title - LOST Inder penalties of perjury, I her its assignees to determine th BIGNATURE OF CERTIFIER/ IVOICE NUMBER 16120 @ FFICE USE ONLY REGISTRATION FEE	STOLEN reby certify all information e accuracy of the information DWNER COUNTY NAME	n provided is true a ation provided by r	MUTILATE: MUTILATE: and correct to the or on my beh	best of my kr alf. DWER OF AT	DATE OF A	acknowledge that it is it HORIZED SIGNATURE PPLICATION 1/29/2016	BY AUTHORITY C W.F. (BIL (total fees collecance FEE LIEN FE	FREGISTRAR OF M L) KNOWLI ted Indicated certifie TITLE FE	OTOR VEHICLES	04/29/2016 (COUNTY CLERK)	6 HCM2	
Required for Duplicate Title - LOST Inder penalties of perjury, I her its assignees to determine th SIGNATURE OF CERTIFIER/ VIVOICE NUMBER 16120 @ IFFICE USE ONLY REGISTRATION FEE 79.75	STOLEN reby certify all information e accuracy of the information of t	n provided is true a strong provided by a strong pr	MUTILATE: MUTILATE: and correct to the me or on my beh CCC	b best of my kraif. DWER OF AT DNUMBER 33	DATE OF A	acknowledge that it is i	BY AUTHORITY C W.F. (BIL (total fees collecance FEE LIEN FE	FREGISTRAR OF M L) KNOWLI ted Indicated certifie TITLE FE	DATE OTOR VEHICLES ES Is this form as a v. E TOTAL .50 .00	04/29/2016 (COUNTY CLERK)		
Required for Duplicate Title - LOST Inder penalties of perjury, I her its assignees to determine th SIGNATURE OF CERTIFIER/ VIVOICE NUMBER 16120 @ IFFICE USE ONLY REGISTRATION FEE 79.75	STOLEN reby certify all information e accuracy of the information of	n provided is true a true true true true true true true true	MUTILATE: MUTILATE: and correct to the me or on my beh CCC	b best of my kraif. DWER OF AT DNUMBER 33	DATE OF A	HORIZED SIGNATUR PPLICATION 1/29/2016 RK FEE ISSU 1 TAX COLU	BY AUTHORITY C W.F. (BIL (total fees collecance FEE LIEN FE 2.00 1 ECTED IN STATE OF	FREGISTRAR OF M L) KNOWLI ted Indicated certifie TITLE FE 1.00 5.	OTOR VEHICLES ES set this form as a v. EE TOTAL 50 .00 TAX CITY S	04/29/2016 (COUNTY CLERK) Halid registration) L TAX COLLECTED STICKER FEE		
inder penalties of perjury, I her ir its assignees to determine th SIGNATURE OF CERTIFIER/O VOICE NUMBER 16120 @ DEFICE USE ONLY REGISTRATION FEE 79.75 COMPUTATION OF	STOLEN reby certify all information e accuracy of the information of	n provided is true a true true true true true true true true	MUTILATE: MUTILATE: and correct to the me or on my beh CCC	b best of my kraif. DWER OF AT DNUMBER 33	DATE OF A	HORIZED SIGNATUR PPLICATION 1/29/2016 RK FEE ISSU 1 TAX COLU	BY AUTHORITY C W.F. (BIL (total fees collecance FEE LIEN FE 2.00 1	FREGISTRAR OF M L) KNOWLI ted Indicated certifie TITLE FE 1.00 5.	OTOR VEHICLES ES set this form as a v. EE TOTAL 50 .00 TAX CITY S	04/29/2016 (COUNTY CLERK)		

SF-1357