

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

OFFICIAL VEHICLE REGISTRATION



City Stickers:													1 11 18	R1 R81111	S	TATE
NEW OR CURRENT TITLE NUMBER					TE	TRANSACTION REGISTRATION ONLY NUMBER										
97727199		1770		was a state of	actor of the	N01	Control of	National States	Section Control	S. 100 77 57	Control of	#75579W	4	The same of	NO ST	TO SERVICE
OWNER INFORMATION LEGAL	, STATUS: 1 (AND) 2	FIRST NA	ENTER NAM	IÈ CODE IN			NT) 3(MULTII LAST NAME		NAMES) 4(C	OMPANY)		28 CHARACT	ERE) 4		N ILU I	-
BSE TRAILER L	EASING LI		NAICE.		IDDLL NATIO	•	LAGT NAME					INOT WANTE		MIC	DLL HITTI	
ADDRESS 1 (MAILING)							ADDRESS 2	(PHYSICA	AL)							
10233 GOVERN	OR LN BL\	/D														
WILLIAMSPORT		MD 2			ZIP CODE 21795		CITY			STATE			ZIP CODE			
ENTY OF RESIDENCE/PRINCIPAL BUS OR INCORP LOCATION		PURCHASE DATE *LEASED			D O SER	VICE OPTION				RD/HEA	RING IMPAIR	ED CLS/Y	R INSURAN	CE POLICY	#	
HAMILTON 033 03/03/2016 EERCEPARS SIDE FOR INSTRUCTIONS 240 772 5474															PERSONAL I	
VEHICLE INFORMATION VIN		MAKE	N	ODEL	YEAR	BODY	TITLE BRA	AND - trans	lation	-1 ⁴ AB		CODE	70 John C 180	FUEL - translation	1 - 1 - 1 - 1	CODE
3H3V532C3HT367315		HY.	-IYTR 3H		2017	SE						N				9
SURRENDERED TITLE #		STATE				VEHICLE U	NEW USE VEHICLE TYPE		CURRENT MILEAC		3E	ODOMETER	ACTUAL (0) NOT ACTUAL (8)	, , , , , , , , , , , , , , , , , , , ,	CODE
MSO		CA				F		S			INDICATOR O (List one) IN		OVER 10 Y	VER 10 YRS / 16,000 LBS (1) EXCESS OF MECHANICAL LIMITS (9)		
COLOR CODE (enter appropriate code)* MOBILE HOME LOWER LOWER LOTH WOTH				# AXLES	GRO	OSS VEHICLE				N DESCRIPTION			COMPANY VEHICLE#			
O LOWER												367	7315			
PLATE INFORMATION (require	d for Title and Regist	ration and R	egistretion O	nly Transac	tions) SEE RE	VERSE SIPÉ	FOR COMPL	ETE INSTE	UOTIONS	7 × X	1000	Vine 14	4.4		数工程	91. T
PLATE #(1) CLAS	8020/199	21000	IDATION #(1	1) CC	DUNTY STICK	ER #(1) CI	TY STICKER	#(1)(2)	PLATE #(TR.	ADE IN)(2)	C	LASS CODE/I	SSUE YR(TION DATE (
TDR STICKER #(4) TEMP OPERATOR PERMIT #(3) # OF SEAT				SEATS(5)	ZONE(CC	OUNTY NAME)	(6) USDOT / REGISTRANT #/			STRANT#	7)			MOTOR CARRIER		INCIAI
		(0)		o , , o (o)	20112(00	, , , , , , , , , , , , , , , , , , , ,	(0)	00	DOT / NEON	0110011111				mo ron orania	(11(0)	
LIEN INFORMATION (If lien pres	sent)	100	Start Sales	100 A(400)		y Verland	12 year 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Startinal	A Miles	1 (v v v v v v v v v v v v v v v v v v	STATE OF	COMPANIES PARA	7.35	recorded to the	(17 m 2 m)	
LIEN CODE FIRST LIENH				***************************************	The state of the state of		Appendix from Laborator of	THE REAL PROPERTY.	MICCORPOLICE PLANE SOF		Scanning Seda	e_totalenter type	THE RESERVE	CAN LINEAU CONTRACTOR	LIEN DAT	E
SUNTRUST BANK											03/03/2016					
120 E BALTIMORE ST 25 FL							BALTIMORE			STATE MD			ZIP CODE 21202			
LIEN CODE SECOND LIE	NHOLDER						500-011								LIEN DAT	rE
STREET					CITY						STATE ZIP COD				CODE	
			No. 4-20-74-2	1000		i i di di	ne si in	学展院等			ESCALA)	N. Jan	**************************************			Transport
*LESSEE / REGISTRANT INFOR	RMATION(OWNER C	F PLATE)		LEGAL	TATUS L	NAME	NAME	M	AO L.J.	ונט ב						4,440
ADDRESS																
ADDRESS		СІТҮ						STATE ZIP COI								
VEHICLE COST / TAX INFORMATION (required for Title & Registration Transactions)					ies i ein i					90 (100 91) 30 (100 91)			95 by 6			
SALE PRICE	TRADE IN AL	LOWANCE				BLE AMOUNT			SALESTAX	PAID			*TAX E	XEMPTION REAS	ON / SALES	TAX#
DEALER NAME				DEALE	R ADDRESS								J	DEALER#		
	V 474 (1955)	PART BALL	10 To Villa 10 To			and AS contracts	er e	A CONTRACTOR OF THE PARTY	CONTROL OFFICE AND ADDRESS OF THE PARTY OF T	25 SEC. 10 TO 10	y de trans	y Robert States				9241518 2815
*Required for Duplicate Title - T.	C.A. 55-3-115 (submi	filleg ble or	altered Certi	ficate of Title	9)			13 m	22 THE 2		0/50	125			19 E 40K	31 11
LOST	STOLEN			MUTILATE		RT	N'D DUE TO	NON DELI	EVERY		ALTER	ED		ILLE	GIBLE	
Under penalties of perjury, I hereb or its assignees to determine the	by certify all information	on provided	Is true and co ded by me or	orrect to the	best of my kn	owledge, and	acknowledge	that it is no	the respons	sibility of the	Motor V	shicle Division				
SIGNATURE OF CERTIFIER/OV			4			TORNEY/AUTI								ATE		
NVOICE NUMBER	COUNTY NAME				AUMPER	DATE OF	IN IOA TIO		DV 411=1	IODIEV C	DECIS	DAD 67 115	1001/5		0/2016	
16070 @	HAMILTO	ON		CO	NUMBER 33		/10/201	6	T			IOWLE:	-	CLES(COUNTY C		PBK14
OFFICE USE ONLY REGISTRATION FEE	EMISSION:		LEASE FEE	L	TRANS FEE	•	RKFEE	LATRONIA DE STATE O			d Indica		his form a	s a valid registra	tion)	
79.75	31,201		LEAGE FEE		INDIAO LEE	CLE	MICE		.00		.00	5.5	200	.00	.0120	
COMPUTATION OF	SALES OR USE TA	X s	A TAX	LOCAL	L TAX	ADDITIONAL T	AX	COLLE	CTED IN STA	ATE OF	COUNT	WHEEL TAX	(CITY STICKER FEI	E	
SALES TAX USE TAX *SERVICE OPT FEE	ORGAN DONOR		POSTAGE		VER		ID/RE	BIDENCY	/ERIFICATIO	NC				TOTAL FEES COL	LECTED	
	I		l											108 25		