

OFFICIAL VEHICLE REGISTRATION



STATE

NEW OR CURRENT TITLE NUMBER 98511402		TRANSACTION CODE N01		REGISTRATION ONLY NUMBER	
OWNER INFORMATION *LEGAL STATUS: 1 (AND) 2 (OR) ☐ ENTER NAME CODE IN BOX 1 (SAME) 2(DIFFERENT) 3(MULTIPLE LAST NAMES) 4(COMPANY) 5(OVER 28 CHARACTERS) 5					MAO N ILU N
LAST NAME WELLS FARGO EQUIPMENT FIN INC		FIRST NAME 		MIDDLE INITIAL 	
ADDRESS 1 (MAILING) 3668 S GEYER RD 350		ADDRESS 2 (PHYSICAL) 600 S 4TH ST			
CITY ST LOUIS		STATE MO		ZIP CODE 63127	
CITY MINNEAPOLIS		STATE MN		ZIP CODE 55415	
CITY OF RESIDENCE/PARTIAL BUS OR INCORP LOCATION DAVIDSON 019		PURCHASE DATE 11/15/2016		*LEASED ☒ *SERVICE OPTIONS ☐ SEE REVERSE SIDE FOR INSTRUCTIONS	
TELEPHONE # 3144223862		*PLACARD/HEARING IMPAIRED CLS/YR 		*INSURANCE POLICY # 	

VEHICLE INFORMATION												
VIN		MAKE	MODEL	YEAR	BODY	TITLE BRAND - translation			CODE	TYPE OF FUEL - translation		CODE
1GRAP0624HD466713		GDAN	VAN	2017	SE	NEW			N	Other		9
SURRENDERED TITLE #		STATE	PREVIOUS STATES TITLED		VEHICLE USE	VEHICLE TYPE	CURRENT MILEAGE		ODOMETER ACTUAL (8) NOT ACTUAL (8) INDICATOR OVER 10 YRS / 18,000 MILES (Use one) IN EXCESS OF MECHANICAL LIMITS (9)			CODE
MSO		TN			F	S						1
COLOR CODE (enter appropriate code) UPPER O		MOBILE HOME LGTH		WIDTH	# AXLES	GROSS VEHICLE WEIGHT		VEHICLE TRADE-IN DESCRIPTION			COMPANY VEHICLE # 286684	

PLATE INFORMATION *(required for Title and Registration and Registration Only Transactions) SEE REVERSE SIDE FOR COMPLETE INSTRUCTIONS							
PLATE # (1)	CLASS CODE/ISSUE YR (1)(3)	VALIDATION # (1)	COUNTY STICKER # (1)	CITY STICKER # (1)(2)	*PLATE # (TRADE IN) (2)	CLASS CODE/ISSUE YR (2)	EXPIRATION DATE (1)(2)(3)
U744232	8020/1994						PERMANENT
TOR STICKER # (4)	TEMP OPERATOR PERMIT # (3)	# OF SEATS (5)	ZONE (COUNTY NAME) (6)	USDOT / REGISTRANT # (7)	MOTOR CARRIER # (8)		

LIEN INFORMATION (If Lien present)				LIEN DATE
LIEN CODE	FIRST LIENHOLDER			
STREET		CITY	STATE	ZIP CODE
LIEN CODE	SECOND LIENHOLDER			LIEN DATE
STREET		CITY	STATE	ZIP CODE

*LESSEE / REGISTRANT INFORMATION(OWNER OF PLATE)		LEGAL STATUS	NAME CODE	MAO	ILU
NAME		NAME			
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 # 100551600
DEALER NAME WELLS FARGO EQUIPMENT FINANCE		DEALER ADDRESS 3100 WEST END AVE STE 900 NASHVILLE, TN 37203		DEALER # 2

*Required for Duplicate Title - T.C.A. 55-3-115 (submit legible or altered Certificate of Title)					
☐ LOST	☐ STOLEN	☐ MUTILATED	☐ RTND DUE TO NON DELIVERY	☐ ALTERED	☐ 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 11/18/2016 11:57:11 AM 11/18/2016
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INVOICE NUMBER	COUNTY NAME	CO NUMBER	DATE OF APPLICATION	BY AUTHORITY OF REGISTRAR OF MOTOR VEHICLES(COUNTY CLERK)
16323 @	DAVIDSON	19	11/18/2016	BRENDA WYNN LINEWEAVER - 1

OFFICE USE ONLY		Received 11/17/2016				(total fees collected indicated certifies this form as a valid registration)			
REGISTRATION FEE 79.75	CREDIT	LEASE FEE	TRANS FEE	CLERK FEE	ISSUANCE FEE 12.00	LIEN FEE	TITLE FEE 5.50	TOTAL TAX COLLECTED .00	
COMPUTATION OF ☐ SALES TAX ☐ USE TAX	SALES OR USE TAX	SA TAX	LOCAL TAX	ADDITIONAL TAX	COLLECTED IN STATE OF	COUNTY WHEEL TAX	CITY WHEEL TAX		
*SERVICE OPT FEE	ORGAN DONOR	POSTAGE	VER	ID / RESIDENCY VERIFICATION				*TOTAL FEES COLLECTED 97.25	