



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

OFFICIAL VEHICLE REGISTRATION



City Stickers:

STATE

NEW OR CURRENT TITLE NUMBER	TRANSACTION CODE	REGISTRATION ONLY NUMBER
00883555	004	3335780

OWNER INFORMATION *LEGAL STATUS: 1 (AND) 2 (OR) <input type="checkbox"/> ENTER NAME CODE IN BOX 1 (SAME) 2 (DIFFERENT) 3 (MULTIPLE LAST NAMES) 4 (COMPANY) 5 (OVER 28 CHARACTERS) <input type="checkbox"/> 4	MAO <input type="checkbox"/> N <input type="checkbox"/> I <input type="checkbox"/> M <input type="checkbox"/> N
LAST NAME FIRST NAME MIDDLE INITIAL LAST NAME FIRST NAME MIDDLE INITIAL	

BSE TRAILER LEASING LLC

ADDRESS 1 (MAILING) ADDRESS 2 (PHYSICAL)

10233 GOVERNOR LANE BLVD

CITY	STATE	ZIP CODE	CITY	STATE	ZIP CODE
WILLIAMSPORT	MD	21795-4029			

CITY OF RESIDENCE/PRINCIPAL BUS OR MCOMM LOCATION	PURCHASE DATE	*LEASED <input type="checkbox"/> *SERVICE OPTIONS <input type="checkbox"/> SEE REVERSE SIDE FOR INSTRUCTIONS	TELEPHONE #	*PLACARD/HEARING IMPAIRED PLATE <input type="checkbox"/> *RESTRICTION POLICE #
HAMILTON 033	11/30/2017		301 582 1793	

VEHICLE INFORMATION

VIN	MAKE	MODEL	YEAR	BODY	ADS Level	TITLE BRAND - Translation	CODE	TYPE OF FUEL	TRANSFERR
3H3V532CXKR210031	HYTR	3H3	2019	SE			N	Other	9
SURRENDERED TITLE #	STATE	PREVIOUS STATES TITLED	VEHICLE USE	VEHICLE TYPE	CURRENT MILEAGE	ODOMETER ACTUAL - NOT ACTUAL (INDICATOR OVER 41,999, 42,000, 43,000, 44,000, 45,000, 46,000, 47,000, 48,000, 49,000, 50,000, 51,000, 52,000, 53,000, 54,000, 55,000, 56,000, 57,000, 58,000, 59,000, 60,000, 61,000, 62,000, 63,000, 64,000, 65,000, 66,000, 67,000, 68,000, 69,000, 70,000, 71,000, 72,000, 73,000, 74,000, 75,000, 76,000, 77,000, 78,000, 79,000, 80,000, 81,000, 82,000, 83,000, 84,000, 85,000, 86,000, 87,000, 88,000, 89,000, 90,000, 91,000, 92,000, 93,000, 94,000, 95,000, 96,000, 97,000, 98,000, 99,000, 100,000)	COMPANY VEHICLE #	1	
MSO	STATE	PREVIOUS STATES TITLED	VEHICLE USE	VEHICLE TYPE	CURRENT MILEAGE	ODOMETER ACTUAL - NOT ACTUAL (INDICATOR OVER 41,999, 42,000, 43,000, 44,000, 45,000, 46,000, 47,000, 48,000, 49,000, 50,000, 51,000, 52,000, 53,000, 54,000, 55,000, 56,000, 57,000, 58,000, 59,000, 60,000, 61,000, 62,000, 63,000, 64,000, 65,000, 66,000, 67,000, 68,000, 69,000, 70,000, 71,000, 72,000, 73,000, 74,000, 75,000, 76,000, 77,000, 78,000, 79,000, 80,000, 81,000, 82,000, 83,000, 84,000, 85,000, 86,000, 87,000, 88,000, 89,000, 90,000, 91,000, 92,000, 93,000, 94,000, 95,000, 96,000, 97,000, 98,000, 99,000, 100,000)	COMPANY VEHICLE #	1	
COLOR CODE (enter appropriate code)* UPPER LOWER LGTH WOTH	# AXLES	GROSS VEHICLE WEIGHT	VEHICLE TRADE-IN DESCRIPTION	COMPANY VEHICLE #	210031				

PLATE INFORMATION *Required for Title and Registration and Registration Only Transactions SEE REVERSE SIDE FOR COMPLETE INSTRUCTIONS

PLATE # (1)	CLASS CODE/ISSUER (1)(3)	VALIDATION # (1)	COUNTY STICKER # (1)	CITY STICKER # (1)(2)	PLATE # (TRADE IN) (2)	CLASS CODE/ISSUE (R/L) (1)	EXPIRATION DATE (1)(2)(3)
473435T	8020/1994				U828531	8020 1994	PERMANENT
TDR 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 CODE	FIRST LIENHOLDER	EXPIRATION DATE
		SUNTRUST BANK	11/30/2017

STREET	CITY	STATE	ZIP CODE
120 E BALTIMORE ST 25 FL	BALTIMORE	MD	21202
LIEN CODE	SECOND LIENHOLDER	CITY	STATE

LESSEE / REGISTRANT INFORMATION (OWNER OF PLATE)	LEGAL STATUS <input type="checkbox"/>	NAME CODE <input type="checkbox"/>	MAO <input type="checkbox"/>	ILU <input type="checkbox"/>
NAME	NAME	NAME	NAME	NAME
ADDRESS	CITY	STATE	ZIP CODE	

VEHICLE COST / TAX INFORMATION * (Required for Title & Registration Transactions)	TRADE IN ALLOWANCE	WARRANTY AMOUNT	TAXABLE AMOUNT	SALES TAX PAID	TAX EXEMPTION REASON SALES TAX #
SALE PRICE	DEALER NAME	DEALER ADDRESS	DEALER #		

Required for Duplicate Title - TCA 55-3-115 (submit legible or altered Certificate of Title)	LOST <input type="checkbox"/>	STOLEN <input type="checkbox"/>	MUTILATED <input type="checkbox"/>	RTND DUE TO NON DELIVERY <input type="checkbox"/>	ALTERED <input type="checkbox"/>	MISSING <input type="checkbox"/>
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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 assigns to determine the accuracy of the information provided by me or on my behalf. POWER OF ATTORNEY/AUTHORIZED SIGNATURE (IF APPLICABLE) DATE ISSUED 11/18/2024 8:46:38 AM

SIGNATURE OF CERTIFIER/OWNER POWER OF ATTORNEY/AUTHORIZED SIGNATURE (IF APPLICABLE) 01/18/2024

INVOICE NUMBER	COUNTY NAME	CO NUMBER	DATE OF APPLICATION	BY AUTHORITY OF REGISTRAR OF MOTOR VEHICLES/COUNTY CLERK					
24018 @	HAMILTON	33	01/18/2024	W. F. BILL KNOWLES					
OFFICE USE ONLY	ELECTRIC VEHICLE FEE	CREDIT	LEASE FEE	TRANS FEE	CLERK FEE	ISSUANCE FEE	LIEN FEE	TITLE FEE	TOTAL TAX COLLECTED
COMPUTATION OF	SALES OR USE TAX	SA TAX	LOCAL TAX	ADDITIONAL TAX	COLLECTED IN STATE OF	COUNTY WHEEL TAX	CITY STICKER FEE (INS FEE)		
*SALES TAX <input type="checkbox"/> USE TAX <input type="checkbox"/>	ORGAN DONOR	POSTAGE	VER	ID / RESIDENCY VERIFICATION	VIN PLATE FEE	TOTAL FEES COLLECTED			