

.00

Change:

GV: 0.00

131.75

RDA-692

0.00

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

OFFICIAL VEHICLE REGISTRATION

City Stickers: NEW OR CURRENT TITLE NUMBER GISTRATION ONLY NUMBER 13301230256 N01 ENTER NAME CODE IN BOX 1 (SAME) 2(DIFFERENT) 3(MULTIPLE LAST NAMES) 4(COMPANY) 5(OVER 28 CHARACTERS) MAO OWNER INFORMATION "LEGAL STATUS: 1 (AND) 2 (0R) LAST NAME MIDDLE INITIAL LAST NAME FIRST NAME PREMIER TRAILER LEASING I LLC ADDRESS 1 (MAILING) ADDRESS 2 (PHYSICAL) PO BOX 1014 STATE ZIP CODE STATE ZIP CODE CITY **GRAPEVINE** TX 76099-1014 TELEPHONE # PLACARD/HEARING IMPAIRED CLS/YR PURCHASE DATE INSURANCE POLICY # LEASED 0 SERVICE OPTIONS 01/09/2025 817 421 2066 **HAMILTON 033** SEE REVERSE SIDE FOR INSTRUCTIONS VEHICLE INFORMATION MAKE MODEL YEAR BODY ADS Level TITLE BRAND - translation CODE TYPE OF FUEL - translation CODE VIN 9 1GR1P062XTJ806618 **GDAN** 1GR 2026 SE N Other ODOMETER ACTUAL (0) NOT ACTUAL (8)
INDICATOR OVER 10 YRS / 16,000 LBS (1)
(List one) IN EXCESS OF MECHANICAL LIMITS (9) SURRENDERED TITLE# STATE PREVIOUS STATES TITLED VEHICLE USE VEHICLE TYPE CURRENT MILEAGE F S 1 IL MSO COLOR CODE (enter appropriate code) MOBILE HOME # AXLES GROSS VEHICLE WEIGHT *VEHICLE TRADE-IN DESCRIPTION COMPANY VEHICLE # 0 PLATE INFORMATION "(required for Title and Registration and Registration Only Transactions) SEE REVERSE SIDE FOR COMPLETE INSTRUCTIONS. CLASSCODE/ISSUEYR(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) PERMANENT 634474T 8020/1994 ZONE(COUNTY NAME)(6) USDOT / REGISTRANT #(7) MOTOR CARRIER #(8) TDR STICKER #(4) TEMP OPERATOR PERMIT #(3) # OF SEATS(5) LIEN INFORMATION (If lien present) LIEN DATE LIEN CODE WILMINGTON TRUST NA AS AGT 01/09/2025 STATE ZIP CODE 55402 **MINNEAPOLIS** MN 50 S 6TH ST STE 1290 LIEN DATE LIEN CODE SECOND LIENHOLDER STATE STREET LESSEE / REGISTRANT INFORMATION(OWNER OF PLATE) NAME CODE NAME NAME ZIP CODE STATE ADDRESS CITY VEHICLE COST / TAX INFORMATION *(required for Title & Registration Transactions) TAXABLE AMOUNT SALESTAX PAID TAX EXEMPTION REASON / SALES TAX # WARRANTY AMOUNT SALE PRICE TRADE IN ALLOWANCE DEALER NAME DEALER ADDRESS DEALER # *Required for Duplicate Title - T.C.A. 55-3-115 (submit Illegible or altered Certificate of Title) ILLEGIBLE ALTERED LOST STOLEN MUTILATED RTN'D DUE TO NON DELIEVERY t is true and correct to the best of my knowledge, and acknowledge that it is not the responsibility of the Motor Vehicle Division ided by me or on my behalf. Under penalties of perjury, I hereby certify all informat or its assignees to determine the accuracy of the infor POWER OF ATTORNEY/AUTHORIZED SIGNATURE(IF APPLICABLE) DATE ISSUED 2/3/2025 9:40:49 AM SIGNATURE OF CERTIFIER/OWNER 02/03/2025 BY AUTHORITY OF REGISTRAR OF MOTOR VEHICLES(COUNTY CLERK) INVOICE NUMBER DATE OF APPLICATION COUNTY NAME CO NUMBER 25034 @ W. F. BILL KNOWLES HCM27 HAMILTON 33 02/03/2025 OFFICE USE ONLY (total fees collected Indicated certifies this form as a valid registration)
ISSUANCE FEE | LIEN FEE | TITLE FEE | TOTAL TAX COLLECTED CLERK FEE ELECTRIC VEHICLE FEE CREDIT LEASE FEE TRANS FEE 100.25 3.00 12.00 11.00 5.50 .00 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 ☐ USE TAX VIN PLATE FEE TOTAL FEES COLLECTED *SERVICE OPT FEE ORGAN DONOR

Cash: 0.00

Port: WK48/DR27/8020

SF-1357

Check: 0.00

Check#:

Credit: 0.00

Auth#: