



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



City Stickers:

NEW OR CURRENT TITLE NUMBER 13301221268	TRANSACTION CODE N01	REGISTRATION ONLY NUMBER P5260142	STATE
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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) 5				MAO <input checked="" type="checkbox"/> N ILU <input checked="" type="checkbox"/> N	
LAST NAME PREMIER TRAILER LEASING I LLC		FIRST NAME		MIDDLE INITIAL	
ADDRESS 1 (MAILING) PO BOX 1014		ADDRESS 2 (PHYSICAL)			
CITY GRAPEVINE		STATE TX		ZIP CODE 76099-1014	
CITY OF RESIDENCE/PRINCIPAL BUS OR INCORP LOCATION HAMILTON 033		PURCHASE DATE 12/03/2024		*LEASED <input checked="" type="checkbox"/> 0 *SERVICE OPTIONS <input type="checkbox"/> SEE REVERSE SIDE FOR INSTRUCTIONS	
TELEPHONE # 817 421 2066		*PLACARD/HEARING IMPAIRED CLS/YR		*INSURANCE POLICY #	

VIN 1GR1P0629TJ806108		MAKE GDAN		MODEL 1GR		YEAR 2026		BODY SE		ADS Level		TITLE BRAND - translation		CODE N		TYPE OF FUEL - translation Other		CODE 9	
SURRENDERED TITLE # MSO		STATE IL		PREVIOUS STATES TITLED		VEHICLE USE F		VEHICLE TYPE S		CURRENT MILEAGE		ODOMETER ACTUAL (0) NOT ACTUAL (8) INDICATOR OVER 10 YRS / 16,000 LBS (1) (List one) IN EXCESS OF MECHANICAL LIMITS (9)		CODE 1					
COLOR CODE (enter appropriate code)* UPPER O		MOBILE HOME LGTH		WIDTH		# AXLES		GROSS VEHICLE WEIGHT		*VEHICLE TRADE-IN DESCRIPTION		COMPANY VEHICLE #							

PLATE INFORMATION *(required for Title and Registration and Registration Only Transactions) SEE REVERSE SIDE FOR COMPLETE INSTRUCTIONS															
PLATE # (1) 631893T		CLASSCODE/ISSUEYR(1)(3) 8020/1994		VALIDATION # (1)		COUNTY STICKER # (1)		CITY STICKER # (1)(2)		*PLATE # (TRADE IN) (2)		CLASS CODE/ISSUE YR (2)		EXPIRATION DATE (1)(2)(3) 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 WILMINGTON TRUST NA AS AGT								LIEN DATE 12/03/2024	
STREET 50 S 6TH ST STE 1290		CITY MINNEAPOLIS		STATE MN		ZIP CODE 55402					
LIEN CODE		SECOND LIENHOLDER								LIEN DATE	
STREET		CITY		STATE		ZIP CODE					

*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							
ADDRESS		CITY		STATE		ZIP CODE			

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

*Required for Duplicate Title - T.C.A. 55-3-115 (submit illegible or altered Certificate of Title)											
<input type="checkbox"/> LOST		<input type="checkbox"/> STOLEN		<input type="checkbox"/> MUTILATED		<input type="checkbox"/> RTND DUE TO NON DELIVERY		<input type="checkbox"/> ALTERED		<input type="checkbox"/> 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 ISSUED 1/13/2025 9:45:18 AM 01/13/2025			

INVOICE NUMBER 25013 @		COUNTY NAME HAMILTON		CO NUMBER 33		DATE OF APPLICATION 01/13/2025		BY AUTHORITY OF REGISTRAR OF MOTOR VEHICLES (COUNTY CLERK) W. F. BILL KNOWLES		HCM27	
(total fees collected indicated certifies this form as a valid registration)											
OFFICE USE ONLY REGISTRATION FEE 100.25		ELECTRIC VEHICLE FEE		CREDIT		LEASE FEE		TRANS FEE 3.00		ISSUANCE FEE 12.00	
COMPUTATION OF <input type="checkbox"/> SALES TAX <input type="checkbox"/> USE TAX		SALES OR USE TAX		SA TAX		LOCAL TAX		ADDITIONAL TAX		COLLECTED IN STATE OF	
*SERVICE OPT FEE		ORGAN DONOR		POSTAGE		VER		ID / RESIDENCY VERIFICATION		VIN PLATE FEE .00	
										*TOTAL FEES COLLECTED 131.75	