

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

OFFICIAL VEHICLE REGISTRATION

TOTAL FEES COLLECTED

RDA-692

131.75

Change: 0.00

P5260/39 City Stickers: REGISTRATION ONLY NUMBER NEW OR CURRENT TITLE NUMBER TRANSACTIO 13301221262 N01 ENTER NAME CODE IN BOX 1 (SAME) 2(DIFFERENT) 3(MULTIPLE LAST NAMES) 4(COMPANY) 5(OVER 28 CHARACTERS) OWNER INFORMATION "LEGAL STATUS: 1 (AND) 2 (0R) MIDDLE INITIAL IRST NAME MIDDLE INITIAL LAST NAME FIRST NAME PREMIER TRAILER LEASING I LLC ADDRESS 2 (PHYSICAL) ADDRESS 1 (MAILING) PO BOX 1014 STATE ZIP CODE CITY STATE ZIP CODE 76099-1014 **GRAPEVINE** TX ELEPHONE # *PLACARD/HEARING IMPAIRED CLS/YR INSURANCE POLICY # NTY OF RESIDENCE/PRINCIPAL BUS OR INCORP LOCATION PURCHASE DATE LEASED 0 SERVICE OPTIONS 817 421 2066 **HAMILTON 033** 12/03/2024 SEE REVERSE SIDE FOR INSTRUCTIONS VEHICLE INFORMATION CODE TYPE OF FUEL - translation MAKE MODEL YEAR BODY ADS Level TITLE BRAND - translation CODE 9 1GR 2026 SE Ν Other 1GR1P0623TJ806105 **GDAN** ODOMETER ACTUAL (0) NOT ACTUAL (8)
INDICATOR OVER 10 YRS / 16,000 LBS (1)
(List one) IN EXCESS OF MECHANICAL LIMITS (9) PREVIOUS STATES TITLED VEHICLE USE VEHICLE TYPE CURRENT MILEAGE CODE SURRENDERED TITLE # STATE 1 S MSO IL F VEHICLE TRADE-IN DESCRIPTION COMPANY VEHICLE # COLOR CODE (enter appropriate code)* MOBILE HOME LGTH WDTH # AXLES GROSS VEHICLE WEIGHT 0 PLATE INFORMATION "(required for Title and Registration and Registration Only Transactions) SEE REVERSE SIDE FOR COMPLETE INSTRUCTIONS *PLATE #(TRADE IN)(2) CLASS CODE/ISSUE YR(2) EXPIRATION DATE (1)(2)(3) COUNTY STICKER #(1) PLATE #(1) CLASSCODE/ISSUEYR(1)(3) VALIDATION #(1) PERMANENT 631890T 8020/1994 MOTOR CARRIER #(8) USDOT / REGISTRANT #(7) TOR STICKER #(4) TEMP OPERATOR PERMIT #(3) # OF SEATS(5) ZONE(COUNTY NAME)(6) LIEN INFORMATION (If lien present) LIEN DATE 12/03/2024 WILMINGTON TRUST NA AS AGT STATE ZIP CODE STREET **MINNEAPOLIS** MN 55402 50 S 6TH ST STE 1290 LIEN DATE SECOND LIENHOLDER LIEN CODE ZIP CODE STATE STREET CITY LEGAL STATUS NAME CODE *LESSEE / REGISTRANT INFORMATION(OWNER OF PLATE) NAME NAME STATE ZIP CODE ADDRESS VEHICLE COST / TAX INFORMATION "(required for Title & Registration Transactions) *TAX EXEMPTION REASON / SALES TAX # SALESTAX PAID TAXABLE AMOUNT TRADE IN ALLOWANCE WARRANTY AMOUNT DEALER ADDRESS DEALER # DEALER NAME *Required for Duplicate Title - T.C.A. 55-3-115 (submit Illegible or altered Certificate of Title) II.LEGIBLE MUTILATED RTN'D DUE TO NON DELIEVERY ALTERED LOST 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. DATE ISSUED 1/13/2025 9:43:54 AM POWER OF ATTORNEY/AUTHORIZED SIGNATURE(IF APPLICABLE) SIGNATURE OF CERTIFIER/OWNER 01/13/2025 BY AUTHORITY OF REGISTRAR OF MOTOR VEHICLES(COUNTY CLERK) INVOICE NUMBER COUNTY NAME CO NUMBER DATE OF APPLICATION 25013 @ **HAMILTON** 33 01/13/2025 W. F. BILL KNOWLES HCM27 FFICE USE ONLY REGISTRATION FEE (total fees collected Indicated certifies this form as a valid registration)
ISSUANCE FEE | LIEN FEE | TITLE FEE | TOTAL TAX COLLECTED ELECTRIC VEHICLE FEE LEASE FEE TRANS FEE CLERK FEE CREDIT 3.00 12.00 11.00 5.50 .00 100.25 CITY STICKER FEE INS FEE COLLECTED IN STATE OF WHEEL TAX SALES OR USE TAX ADDITIONAL TAX COUNTY SA TAX LOCAL TAX COMPUTATION OF

ID / RESIDENCY VERIFICATION

Credit: 0.00 Auth#:

VIN PLATE FEE

GV: 0.00

☐ SALES TAX ☐ USE TAX

ORGAN DONOR

Port: WK48/DR27/8020 Cash: 0.00

POSTAGE

Check: 0.00

Check#:

SERVICE OPT FEE

SF-1357