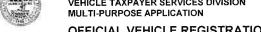


TENNESSEE DEPARTMENT OF REVENUE VEHICLE TAXPAYER SERVICES DIVISION MULTI-PURPOSE APPLICATION

OFFICIAL VEHICLE REGISTRATION



					0	521	~ 11.11.	2		EK OK K	ewww.			
City Stickers:	LIMBÉR		_	ТД		526		SATION ONLY NUMBE	R		S	TATE		
13301221269					N01		NEGIO I N	ON ONE! NOWIDE						
OWNER INFORMATION "LEG	GAL STATUS: 1 (AND)	2 (OR) ENTER	NAME CODE I	N BOX 1 (SAME	E) 2(DIFFERE	NT) 3(MULT	IPLE LAST	NAMES) 4(COMPAN)) 5(OVER 28 CHARA	ACTERS) 5	MAO N ILU			
LAST NAME PREMIER TRA	ILER LEASI	TINOTIVAME	ſ	MIDDLE INITIAL	-	LAST NAM	E		FIRST NA	ME	MIDDLE INITIAL			
ADDRESS 1 (MAILING)							ADDRESS 2 (PHYSICAL)							
PO BOX 1014														
GRAPEVINE	STAT (T		ZIP CODE	9-1014					STATE	ZIP CODE				
NTY OF RESIDENCE/PRINCIPAL BUS C	OR INCORP LOCATION	PURCHASE DATE					LEPHONE	# PLA	CARD/HEARING IMP	PAIRED CLS/Y	R INSURANCE POLICY	#		
HAMILTON 03	33	12/03/20	24 LEAS	ED U *SER	VICE OPTION	s	817 4	21 2066						
VEHICLE INFORMATION		MAKE	MODEL	YEAR	BODY	ADS Level	TITLE BE	RAND - translation		CODE	TYPE OF FUEL - translation	CODE		
1GR1P0620TJ806109		GDAN			SE					N	Other	9		
SURRENDERED TITLE #		V = 1 11 1			VEHICLE U	SE VEHI	HICLE TYPE CURRENT MI		AGE ODOME	TER ACTUAL (0) NOT ACTUAL (B)	CODE		
MSO		IL			F		s		(List one)	IN EXCESS	YRS / 16 000 LBS (1) OF MECHANICAL LIMITS (9)	1		
DLOR CODE (enter appropriate code)* PPER LOWER O		HOME #AXLES		S GRC	SS VEHICLE	WEIGHT	VEIGHT *VEHICLE T		RADE-IN DESCRIPTION		COMPANY VEHICLE #			
PLATE INFORMATION *(requ	ired for Title and Regis			ctions) SEE RE		FOR COMP		RUCTIONS PLATE #(TRADE IN)(2) CLASS COL	DE/ISSUE YR	(2) EXPIRATION DATE ((1)(2)(3)		
631894T 8020/19		***)N #(1)	JOBINT STICK	LICH(I)	TTOTICILL	. #(1)(2)	T BYTE II (TIVIDE III)	02.0000	36,10002 111	PERMA			
TDR STICKER #(4)	TEMP OPERATOR P	ERMIT#(3)	# OF SEATS(5)	ZONE(CO	UNTY NAME)	(6)	US	DOT / REGISTRANT	#(7)		MOTOR CARRIER #(8)			
LIEN INFORMATION (If lien p	(esent)			WE ST		TA ES	ET, A							
LIEN CODE FIRST LIE	NHOLDER										LIEN DAT			
STREET W	ILMINGTON	TRUST N	A AS AG	iT		CITY				STATE	ZIP CODE	3/2024		
50 S 6TH ST	STE 1290						NNEA	POLIS		MN	55402			
LIEN CODE SÉCOND !	IENHOLDER										LIEN DAT	TE.		
STREET					CITY					STATE ZIP CODE				
		30 7												
*LESSEE / REGISTRANT INF NAME	FORMATION(OWNER	OF PLATE)	LEGAL	STATUS L	NAME	NAME	M	IAO L.J. ILU L.						
ADDRESS					CI	TY				STATE	ZIP CODE			
VEHICLE COST / TAX INFORMATION *(required for SALE PRICE TRADE IN ALLOWAN					TAXABLE AI	MOUNT		SALESTAX PAID		*TAX E	EXEMPTION REASON / SALES TAX #			
DEALER NAME			DEAL	ER ADDRESS						DEALER#				
Required for Duplicate Title -	T.C.A. 55-3-115 (subm	it illegible or altered	Gertificate of Ti	tie)			5001				ř =			
LOST	STOLEN		MUTILATE			'N'D DUE TO			ALTERED		ILLEGIBLE			
Under penalties of perjury, I he or its assignees to determine to SIGNATURE OF CERTIFIER		ion provided is true mation provided by						of the responsibility of I	ne Mator Vehicle Divi	Ision	ATE ISSUED 1/13/2025 9:45	5:47 AM		
OF CERTIFIER											01/13/2025			
NVOICE NUMBER	COUNTY NAME	ON	C	O NUMBER	DATE OF A	/13/20			L KNOWLI		CLES(COUNTY CLERK)	ICM27		
25013 @ DEFICE USE ONLY REGISTRATION FEE	HAMILT LECTRIC VEHICLE FE		LEASE FE		NS FEE	CLERK F		(total fees colle	cted Indicated certifi	ies this form	as a valid registration) OTAL TAX COLLECTED	.01112/		
100.25	ors erver en en executar en en en executar en en e	No. of the contract of the con				3.00		12.00	11.00 5.5	50	.00			
COMPUTATION OF SALES TAX USE T.	SALES OR USE TA	AX SA TAX	LOCA	AL TAX	DDITIONAL T	AX	COLLE	CTED IN STATE OF	COUNTY WHEEL	TAX CITY	STICKER FEE INS FEE			
SERVICE OPT FEE	ORGAN DONOR	POST	AGE	VER		ID/R	SIDENCY	VERIFICATION	VIN PLATE FEE		TOTAL FEES COLLECTED			
SF-1357 Port: WK4	8/DR27/8020	Cash: 0.00	Check:	0.00 Ch	eck#:	Credit:	0.00	Auth#: G		ange: 0.		692		