NEW OR CURRENT TITLE NUMBER	TRANSACTION CODE*	REGISTRATION ONLY NUMBER

OWNER INFORMATION *LEGAL STATUS: 1 (AND) 2 (OR) ☐ ENTER NAME CODE IN BOX 1 (SAME) 2 (DIFFERENT) 3 (MULTIPLE LAST NAMES) 4 (COMPANY) 5 (OVER 28 CHARACTERS) ☐   MAO ☐ ILU ☐

LAST NAME	FIRST NAME	MIDDLE INITIAL	LAST NAME	FIRST NAME	MIDDLE INITIAL

ADDRESS 1 (MAILING)	ADDRESS 2 (PHYSICAL)	CITY	STATE	ZIP CODE

CITY	STATE	ZIP CODE	ADDITIONAL OWNER

CNTY OF RESIDENCE/PRINCIPAL BUS OR INCORP LOCATION	PURCHASE DATE	*LEASED ☐ * SERVICE OPTIONS ☐ SEE REVERSE SIDE FOR INSTRUCTIONS	TELEPHONE #	*PLACARD / HEARING IMPAIRED CLS/YR	*INSURANCE POLICY #

VEHICLE INFORMATION

VIN	MAKE	MODEL	YEAR	BODY	TITLE BRAND –list the appropriate code (N) NEW (1) RECONSTRUCTED VEHICLE (U) USED (2) FLOOD DAMAGE (D) DEMO (3) SPECIALLY CONSTRUCTED (8) PARTS ONLY	CODE	TYPE OF FUEL - list the appropriate code GAS (1) ELECTRIC/HYBRID (3) DIESEL (2) PROPANE (4)	CODE

SURRENDERED TITLE #	STATE	PREVIOUS STATES TITLED	VEHICLE USE	VEHICLE TYPE	CURRENT MILEAGE	ODOMETER INDICATOR (List one)	ACTUAL (0) NOT ACTUAL (8) OVER 10 YRS / 16,000 LBS (1) IN EXCESS OF MECHANICAL LIMITS (9)	CODE

COLOR CODE (enter appropriate code)* UPPER LOWER	MOBILE HOME LGTH WDTH	# 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)	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)

TDS 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	LIEN DATE

STREET	CITY	STATE	ZIP CODE

LIEN CODE	SECOND LIENHOLDER	LIEN DATE

STREET	CITY	STATE	ZIP CODE

LESSEE / REGISTRANT INFORMATION (OWNER OF PLATE)   LEGAL STATUS ☐   NAME CODE ☐   MAO ☐   ILU ☐

NAME	NAME

ADDRESS	CITY	STATE	ZIP CODE

VEHICLE COST / TAX INFORMATION *(required for Title & Registration Transactions)

SALE PRICE	TRADE IN ALLOWANCE	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)

☐ LOST	☐ STOLEN	☐ MUTILATED	☐ RTN'D DUE TO NON DELIVERY	☐ ALTERED	☐ 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

INVOICE NUMBER	COUNTY NAME	CO NUMBER	DATE OF APPLICATION	BY AUTHORITY OF REGISTRAR OF MOTOR VEHICLES (COUNTY CLERK)

OFFICE USE ONLY   (total fees collected indicated certifies this form as a valid registration)

REGISTRATION FEE	CREDIT	LEASE FEE	TRANSACTION FEE	ISSUANCE FEE	TITLE FEE	TOTAL TAX COLLECTED

COMPUTATION OF ☐ SALES TAX ☐ USE TAX	SALES OR USE TAX	LOCAL RATE	ADDITIONAL TAX	COLLECTED IN STATE OF	COUNTY WHEEL TAX	CITY WHEEL TAX

*SERVICE OPT FEE	ORGAN DONOR	POSTAGE	VER	ID / RESIDENCY VERIFICATION	*TOTAL FEES COLLECTED

RV-F1315201

RDA-692