

DVS Plate MN



PAID

OCT 13 2009

DEPUTY #160

5974

A PURCHASER(S) OWNER(S) MUST COMPLETE vehicle information	TITLE & REG. <input checked="" type="checkbox"/> X	TITLE ONLY	REG. ONLY	REG. CHANGE	TRF	PREVIOUS PLATE NUMBER MSO	YEAR	EXPIRATION DATE MONTH YEAR	PLEASE CHECK IF THIS VEHICLE HAS BEEN PREVIOUSLY REGISTERED IN MINNESOTA <input type="checkbox"/>	TRUCKS/TRAILERS EMPTY WEIGHT	TRUCKS NUMBER OF AXLES		
	DATE OF PURCHASE 10-13-09	NEW <input checked="" type="checkbox"/> X	USED	CHECK FUEL TYPE GASOLINE DIESEL	NATURAL GAS OR PROPANE OTHER	MODEL YEAR 2009	MAKE STOUGHTON	BODY/MODEL TYPE SEMI-TRLR		<input type="checkbox"/> You may disclose my personal information for any use in response to requests for my individual driver or motor vehicle records. <input type="checkbox"/> You may disclose my personal information for bulk distribution for surveys, marketing or solicitations.			
PURCHASER(S) OWNER(S) information	VEHICLE IDENTIFICATION NUMBER 1DW1A53249S170174					COLOR CODE	BODY	ROOF	DRIVERS LICENSE NO. / DEALER NO. N/A			DATE OF BIRTH	
	LAST, FIRST, AND MIDDLE NAME T D I LEASING LLC					ADDITIONAL PURCHASER(S) OWNER(S) LAST, FIRST, AND MIDDLE NAME(S)			DRIVERS LICENSE		DATE OF BIRTH(S)		
STREET ADDRESS 7200 W 128 TH ST P.O. BOX 322				CITY SAVAGE		COUNTY SCOTT	STATE 70 MN	ZIP CODE 55378		NAME OF INSURANCE CO. LIBERTY MUTUAL		POLICY NUMBER AT2-141-006170-098	HOME TELEPHONE NO.

B PURCHASER(S) OWNER(S) MUST COMPLETE	IS THIS VEHICLE SUBJECT TO SECURITY AGREEMENT(S)? YES <input checked="" type="checkbox"/> X NO		IF YES, COMPLETE SECTION BELOW.	
FIRST SECURED PARTY (PRINT NAME) WELLS FARGO EQUIPMENT FINANCE		DATE OF LOAN		FOR ADDITIONAL SECURED PARTIES, ATTACH COMPLETED FORM NO. PS2017.
STREET ADDRESS 733 MARQUETTE AVE SUITE 700		CITY MPLS	STATE MN	ZIP CODE 55402

C SELLER(S) MUST COMPLETE AND SIGN	ODOMETER DISCLOSURE STATEMENT, I (WE) CERTIFY THAT THE ODOMETER NOW READS _____ (NO TENTHS) MILES AND TO THE BEST OF MY KNOWLEDGE THE ODOMETER MILEAGE IS: <input type="checkbox"/> ACTUAL MILEAGE <input type="checkbox"/> EXCEEDS MECHANICAL LIMITS OF ODOMETER <input type="checkbox"/> NOT ACTUAL MILEAGE - WARNING ODOMETER DISCREPANCY		DAMAGE DISCLOSURE STATEMENT. TO THE BEST OF MY KNOWLEDGE THIS VEHICLE <input type="checkbox"/> HAS <input type="checkbox"/> HAS NOT (CHECK ONE) SUSTAINED DAMAGE IN EXCESS OF 70% ACTUAL CASH VALUE POLLUTION SYSTEM DISCLOSURE STATEMENT. TO THE BEST OF MY KNOWLEDGE THE POLLUTION CONTROL SYSTEM ON THIS VEHICLE INCLUDING THE RESTRICTED GASOLINE PIPE <input type="checkbox"/> HAS <input type="checkbox"/> HAS NOT (CHECK ONE) BEEN REMOVED, ALTERED OR RENDERED INOPERATIVE.	
	ASSIGNMENT: I (WE) CERTIFY THAT THIS VEHICLE IS FREE FROM ALL SECURITY INTERESTS, WARRANT TITLE, AND ASSIGN THE REGISTRATION TAX AND VEHICLE TO THE PERSON(S) NAMED ABOVE:			
SELLER'S PRINTED NAME(S)		DATE OF SALE		
SELLER'S ADDRESS		DEALER LICENSE #		
X ALL SELLER'S SIGNATURE(S)				

D PURCHASER(S) OWNER(S) MUST COMPLETE AND SIGN	PURCHASER'S MOTOR VEHICLE SALES TAX DECLARATION		BASE VALUE OR GROSS WTGT.	REGISTRATION TAX + \$	
	1. FULL PURCHASE PRICE \$ 19,678 00			PLATE FEE	4 50
2. LESS TRADE-IN ALLOWANCE COMPLETE ITEM NO. 6		REGISTRATION PERIOD FROM THROUGH	ARREARS TAX		
3. NET PURCHASE PRICE 19,678 00		CHANGE OF GROSS VEHICLE WEIGHT TIME OF CHANGE : HOURS	CONVERSION FEE		
4. LESS TAX PAID TO ANOTHER STATE		DATE OF CHANGE	STATE PATROL VEHICLE FEE	3 50	
NET SALES TAX DUE 109 26		DATE CHANGE EXPIRES	TRANSFER TAX	10 00	
5. TRADE-IN WAS A MODEL YEAR MAKE PLATE NUMBER		CHANGE OF WGT AND/OR CLASS FROM TO	TITLE/TRANSFER FEE	10 00	
MN DEALER LICENSE #			MOTOR VEHICLE SALES TAX	109 26	
MN SALES TAX ACCOUNT #			LATE TRANSFER PENALTY		
INTERNET REVENUE CODE # (IRC)			SUB-TOTAL \$	137 26	
PRIVATE ACCOUNT # (Seller has done when registered)	5583		STATE/DEPUTY FILING FEE	8 50	
NOTARY SIGNATURE	SUBSCRIBED AND SWORN TO BEFORE ME	DATE	TOTAL DUE \$	145 76	
COUNTY	DATE MY COMMISSION EXPIRES		X TDI Leasing LLC X Wells Fargo 10-13-09		



MINNESOTA DEPARTMENT OF PUBLIC SAFETY

DRIVER AND VEHICLE SERVICES DIVISION
445 MINNESOTA ST. SUITE 160, ST. PAUL, MN 55101-5160

PS2000-25

SIGNATURE(S) (ALL PURCHASERS/OWNER(S) MUST SIGN)

DATE

DO NOT SIGN UNTIL COMPLETED