



APPLICATION FOR CERTIFICATE OF TITLE AND REGISTRATION REPORT

COUNTY NO. _____ COUNTY _____ DATE _____ 20 _____ INVOICE NO. _____ PAGE _____ OF _____

	NAME	MAKE	VIN	REGISTRATION PLATE NUMBER	VALIDATION DECAL NUMBER	REGISTRATION FEE	TITLE FEE	LICENSE # "TRADE IN" OR REPLACED	STATE SALES TAX	LOCAL SALES TAX
1										
2										
3										
4										
5										
6										
7										
8										
9										
10										
11										
12										
13										
14										
15										
16										
17										
18										
19										
20										

Report must be forwarded same day application received.
T.C.A. 55-6-105

SUBTOTAL
TOTAL TITLE &
REGISTRATION FEES

SUBTOTAL
TOTAL STATE &
LOCAL SALES TAX

_____ County Clerk Signature