Tennessee Department of Revenue
Taxpayer and Vehicle Services Division
Vehicle Services Section

44 Vantage Way, Suite 160
Nashville, TN 37243-8050

# Leased Vehicle
## Owner's Authorization to Lessee

THE DESCRIBED VEHICLE:

MAKE _____ YEAR MODEL _____ _____

BODY TYPE _____ VIN _____

**Lessor (Vehicle Owner):**

_____
Printed Name Signature

_____
Complete Mailing Address

The Lessee has leased the vehicle described in this form. Under the terms of the lease, Lessee has exclusive control of its operation for a period of not less than 90 days. Lessor authorizes Lessee to register the vehicle as provided by T.C.A. Section 55-4-101 (d)(1) and to change the classification of the registration prior to its expiration or prior to the termination of the lease.

Lessor authorizes the State of Tennessee to register the vehicle in Lessee's name ($2.00 fee required). Lessor waives its rights to any license plate issued to Lessee.

**Lessee Registrant (owner of plate):**

_____
Printed Name Signature

_____
Complete Mailing Address

*To be Completed by Lessor*