



Motor Carrier Attachment

2016 Accident Stretch Limousine Vehicle Registration

Schoharie, NY October 6, 2018

HWY19MH001

(17 pages)



VEHICLE REGISTRATION/TITLE APPLICATION

This form is available at www.dmv.ny.gov

Batch File No. 6072210BC4
Orig Activity Renewal Lease Buyout
Dup Activity W/RR Renew W/RR Sales Tax with Title

Old Plate [redacted] Old Class QML 3 of Name SHVA Ins. Co. Code [redacted] Exp. Date [redacted]
Scofflaw Case Number(s) [redacted] New Plate [redacted] New Class [redacted]
Special Conditions AT BV CF CO CP EX FL GI IF MO NE NF NR NU OD OP OV PA
Sales Tax Information [redacted] Jurisdiction 4111 Rate [redacted] Out of State [redacted] Audit [redacted]
Did you issue plates to this vehicle? [redacted] Plate Number [redacted] Reg. Class [redacted] Date Temp Issued [redacted] Facility ID Number [redacted]
Is there a lienholder? [redacted] Yes [redacted] No [redacted] If "Yes", enter the information in Dealer Only box below. Alterations are not allowed in the lienholder sections.

INSTRUCTIONS -> COMPLETE 1 2 4 6 and 7. WHEN 3 AND 5 APPLY, COMPLETE THOSE SECTIONS. PRINT CLEARLY IN BLUE OR BLACK INK.

1 MARK THE BOX OF THE TYPE OF SERVICE YOU NEED. (For more information, refer to form MV-82.1, "Registering/Titling a Vehicle in New York State")
A FIRST REGISTRATION for this vehicle [redacted] CHANGE a title (refer to 5) [redacted] REGISTER a vehicle that I registered before [redacted] Get a TITLE ONLY for a 1973 or newer vehicle [redacted]
If you mark one of the options below, write the PLATE NUMBER here [redacted]
RENEW a Registration [redacted] CHANGE a Registration (refer to 5) [redacted] REPLACE lost registration items [redacted] TRANSFER a Plate Number [redacted] Purchased my LEASED VEHICLE [redacted]
You can update the address on your registration and renew your registration online at www.dmv.ny.gov.

2 NAME OF PRIMARY REGISTRANT (Last, First, Middle) SHAHED; HUSSAIN; DBA
NYS driver license number of PRIMARY [redacted] SEX M F [redacted] DATE OF BIRTH [redacted]
NAME OF CO-REGISTRANT (Last, First, Middle) Prestige Limo & Chauff
NYS driver license number of CO-REGISTRANT [redacted] SEX M F [redacted] DATE OF BIRTH [redacted]
DAY TELEPHONE (Optional) [redacted] NAME CHANGE? [redacted] ADDRESS CHANGE? [redacted] Is this registration for a corporation or partnership? [redacted] How did you get the vehicle? [redacted]
THE ADDRESS WHERE PRIMARY REGISTRANT GETS MAIL (Include Street Number and Name, Rural Delivery or box number. This address will be on the document.)
776 Samtara road Apt. No. [redacted] City or Town Gansevoort State NY Zip Code 12831 County of Residence [redacted]
THE ADDRESS WHERE PRIMARY REGISTRANT RESIDES IF DIFFERENT FROM THE MAILING ADDRESS. (DO NOT GIVE A P.O. BOX.)
Apt. No. [redacted] City or Town [redacted] State [redacted] Zip Code [redacted]

3 DRIVER LICENSE NUMBER OF OWNER [redacted]
NAME OF CURRENT OWNER (Last, First, Middle) [redacted] DATE OF BIRTH [redacted] DAY TELEPHONE NUMBER OF OWNER (Optional) [redacted]
THE ADDRESS WHERE OWNER GETS MAIL (Include the Street Number and Name, Rural Delivery or box number.)
Apt. No. [redacted] City or Town [redacted] State [redacted] Zip Code [redacted] County [redacted]
AUTHORIZATION: The registrant described in 2 is authorized to register the vehicle described in 4.
(Signature of owner or authorized person, and signature of co-owner if applicable) [redacted] (Date) [redacted]

4 VEHICLE IDENTIFICATION NUMBER IFMNU40551EB [redacted]
VEHICLE DESCRIPTION Year 01 Make FORD
Body Type For Cars (mark one) [redacted]
Body Type For Other Vehicles (mark one) [redacted]
Color WH Unladen Weight 6572
Type of Power (Fuel) Gas Diesel Electric Flex CNG Propane None
Cylinders 10 For trailers & commercial vehicles Maximum Gross Weight [redacted] For rentals, buses & taxis Seating Capacity 11
Odometer Reading in Miles 182000 Does the ODOMETER display 5, 6 or 7 numbers? (write the number, do not include tenths) [redacted] For commercial vehicles Axles [redacted] Distance [redacted]

NY DEALER ONLY Lien Filing Code (Assigned by DMV) [redacted] Lienholder Name and Mailing Address [redacted]
OFFICE [redacted] Issuance State [redacted] Title [redacted] Lien [redacted] Lien Number [redacted]
USE Proof Submitted (Name and Ownership) [redacted] Approved By [redacted] Stop/Response [redacted]
Date 2/2/2016 Old Fee [redacted] Operator [redacted]



This is to certify that this document is a true and complete copy of a record on file in the New York State Department of Motor Vehicles, Albany, New York.

David L. Egan

EXECUTIVE DEPUTY COMMISSIONER OF MOTOR VEHICLES

5

CHANGES - Write new information about a current registration or title on page 1 of this form (for more information, refer to form MV-82.1, "Registering/Titling a Vehicle in New York State".)

NAME CHANGE: Print the **former** name exactly like the former name is printed on the current registration or title.

CHANGES: Describe any vehicle changes and the reasons for the changes.

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ADDITIONAL VEHICLE INFORMATION ————— QUESTIONS 1-3 **MUST BE COMPLETED.**

- 1. I certify that, to the best of my knowledge, this vehicle has been or has not been wrecked, destroyed or damaged to such an extent that the total estimate, or actual cost, of parts and labor to rebuild or reconstruct the vehicle to the condition it was in before an accident, and for legal operation on the road or highways, is more than 75% of the retail value of the vehicle at the time of loss. (Checking the "has been" box means the vehicle must have an anti-theft examination before being registered, and that the title issued will have the statement "Rebuilt Salvage" on it.)
- 2. Is this vehicle registered for your personal use? Yes No
 If you marked "Yes", go to the next question (question 3). If you marked "No", check any of these boxes that apply:
 - This vehicle is a passenger vehicle that will be used for hire with a driver and will be operated in the following location(s):
 - New York City (NYC) A jurisdiction that is not NYC that regulates taxis A jurisdiction that does not regulate taxis
 - This vehicle is a passenger vehicle that is rented without a driver.
 - This vehicle requires a permit for **commercial operation**. (Mark the box of the type of permit that was issued and write the permit number on the line.)
 - NYS DOT Permit No. _____ Federal DOT Permit No. _____
 - The **government owns** this vehicle.
 - This vehicle is used as (mark one) an ambulance an ambulette a hearse or invalid coach
 If payment is received to carry passengers, mark this box.
 - This vehicle is used exclusively as a **hearse** If payment is received to carry passengers, mark this box.
 - This vehicle is a **commercial tow truck** with a gross vehicle weight rating of at least 8,600 pounds.
 - This vehicle is used only as a **farm vehicle**. (form MV-260F, Part 1, must be attached) This vehicle is used only as an **agricultural truck**.
 - This vehicle is subject to the Department of Transportation inspection requirements for the carriers that transport passengers. (For more information, refer to form MV-82.1P, "Inspection Requirements for Carriers Transporting Passengers".)
- 3. Has this vehicle been modified to change its registration class? Yes No If "Yes", explain _____
- 4. This vehicle is a **pick-up truck** with an unladen weight that is a maximum of 5,500 pounds. This vehicle is never used for commercial purposes and does not have advertising on any part of it. I want (mark one): Passenger Plates Commercial Plates

7

CERTIFICATION: The information I have given on this application is true to the best of my knowledge. I certify that the vehicle is fully equipped as required by the Vehicle and Traffic Law, and has passed the required New York State inspection within the past 12 months, or has qualified for a time extension (Form VS-1077) and will be inspected within 10 days. I also certify that appropriate insurance coverage is in effect, and that the vehicle will be operated in accordance with the Vehicle and Traffic Law. If I am applying for replacement registration items, I certify that the registration is not currently under suspension or revocation. If I have plates in a series reserved for a special group, I certify that I am still eligible to receive them, and that I have only one set of these plates. **If I am using a credit card for payment of any fees in connection with this application, I understand that my signature below also authorizes use of my credit card.**

Print Name Here SHAHED HUSSAIN
(Print Name in Full - if registering for a corporation, print your full name and title)

Sign Here [Redacted Signature]
(Sign Here)

Print Additional Name Here _____
(Print Name in Full)

Additional Signature Sign Here _____
(Sign Here - Additional signature required for a partnership or if registering this vehicle in more than one name.)

IMPORTANT: Making a false statement in any registration application or in any proof or statements in connection with it, or deceiving or substituting in connection with this application, is a misdemeanor under Section 392 of the Vehicle and Traffic Law, and may also result in the revocation or suspension of the registration pursuant to regulations established by the Commissioner. The Department makes no representation that it will issue a certificate of title or transferable registration until the Commissioner is satisfied that the applicant is entitled to a certificate of title or transferable registration, and until all documentation required to establish ownership of the vehicle is submitted and deemed to be satisfactory. Pending review of this application, neither the Commissioner of the Department of Motor Vehicles nor any of his, or her employees, deputies or agents assumes any liability or responsibility for repairs performed, improvements made or work done to the vehicle referenced in this application.

CREDIT CARD AUTHORIZATION IF CARDHOLDER IS NOT THE APPLICANT:

My signature authorizes _____ to use my credit card for payment of fees in connection with this application, and I understand that I must be present for this transaction.

Sign Here _____
(Cardholder-Sign Name in Full)

To Be Completed by a Registered New York State Dealer Only - List any additional Lienholders

Lien Filing Code (Assigned by DMV) _____ Lienholder Name _____

Mailing Address _____ (Number and Street) _____ (City) _____ (State) _____ (Zip Code)

Lien Filing Code (Assigned by DMV) _____ Lienholder Name _____

Mailing Address _____ (Number and Street) _____ (City) _____ (State) _____ (Zip Code)

NY DEALER CERTIFICATION: I certify that all information provided on this application is true. I take responsibility for the integrity of the papers delivered to the Motor Vehicles office. _____
(Signature of Dealer or Authorized Representative)

**STATE OF NEW YORK
DEPARTMENT OF MOTOR VEHICLES**

6 EMPIRE STATE PLAZA, ALBANY NY 12228



This is to certify that this image is a true and complete copy of a record on file in the New York State Department of Motor Vehicles, Albany, New York.

A handwritten signature in black ink, appearing to read "Theresa L. Egan".

Theresa L. Egan

EXECUTIVE DEPUTY COMMISSIONER OF MOTOR VEHICLES

000025

CERTIFICATE OF TITLE

NEW YORK STATE

www.dmv.ny.gov

THIS IS A DUPLICATE CERTIFICATE AND MAY BE SUBJECT TO THE RIGHTS OF A PERSON UNDER THE ORIGINAL CERTIFICATE

*** * LIENS * ***
Document No. [REDACTED]

Title and/Identification No.

Year

Make

Model Code

Body/Hull

1FMNU40S51EB
1FMNU40S51EB

2001

FORD

EXC

LIM

Color

Wt./Sts./Lgth.

Fuel

Cyl./Prop.

New or Used

Type of Title

Date Issued

WH

6572

GAS

10

NEW

VEHICLE

11/19/15

Name and Address of Owner(s)

ODOMETER READING: 02058

02058

ACTUAL MILEAGE

VOID IF ALTERED

VOID IF ALTERED

This document is your proof of ownership for this vehicle, boat or manufactured home. Keep it in a safe place, not with your license or registration or in your vehicle or boat. To dispose of your vehicle, boat or manufactured home, complete the transfer section on the back and give this title to the new owner.

Lienholder

Lienholder

SUMMIT FEDERAL CREDIT UNION
100 MARINA DR
ROCHESTER NY 14626

01

*** ONE LIEN RECORDED ***

Lienholder

Lienholder

*** ONE LIEN RECORDED ***

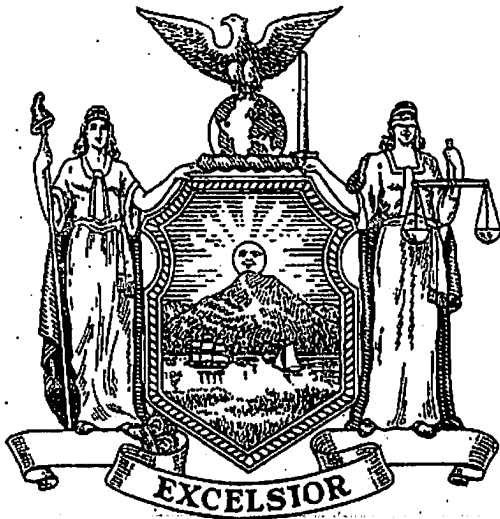
*** ONE LIEN RECORDED ***

MV-990 (1/11)

DEPARTMENT OF MOTOR VEHICLES

**STATE OF NEW YORK
DEPARTMENT OF MOTOR VEHICLES**

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Theresa L. Egan

EXECUTIVE DEPUTY COMMISSIONER OF MOTOR VEHICLES

ANY CHANGE OR ERASURE WILL VOID THIS TITLE -- ANY FALSE STATEMENT IS A MISDEMEANOR

SECTION I - Transfer by Owner

ODOMETER DISCLOSURE STATEMENT

Note: This vehicle cannot be registered or titled in the name of the new owner unless mileage is disclosed. Federal and State Law require that you state the mileage of the vehicle described on this certificate when transferring ownership. Failure to do so, or providing a false statement, may result in fines and/or imprisonment.

ODOMETER READING

--

(no tenths)

ODOMETER HAS SPACE FOR: (Check one)

- Five Digits, excluding tenths
 Six Digits, excluding tenths

- I certify that, to the best of my knowledge, this odometer reading (check one):
1. reflects the ACTUAL MILEAGE as seen on the odometer of the vehicle described on the front.
 2. EXCEEDS MECHANICAL LIMITS (odometer started over at zero)
 3. not the actual mileage. WARNING - ODOMETER DISCREPANCY.

DAMAGE DISCLOSURE STATEMENT (To be Completed by Owner Named on Face of Title)

I certify that, to the best of my knowledge, this vehicle has been or has not been wrecked, destroyed or damaged to such an extent that the total estimate or actual cost of parts and labor to rebuild or reconstruct the vehicle to the condition it was in before an accident, and for legal operation on the road or highways, is more than 75% of the retail value of the vehicle at the time of loss. (Checking the "has" box means that the vehicle must have an anti-theft examination before being registered and that the title issued will have the statement "Rebuilt Salvage: NY" on it.)

I or we transfer the vehicle, boat or manufactured home described on this certificate. At the time of transfer, this title is subject only to the liens or encumbrances listed on this certificate, if any. I also certify that this is the most recent title issued for this vehicle, boat or manufactured home.

Note: Section 2113 of the Vehicle and Traffic Law requires that application for a title must be made within 30 days of transfer.

Seller	[Redacted Signature]		[Redacted Name]		State	ZIP code	Date of Statement
	[Redacted]		[Redacted]				7/21/16
Buyer	Buyer's Signature		Buyer's Name (Print in Full)		State	ZIP code	Date of Statement
	[Redacted Signature]		HUSSAIN SHAHEED		NY	12831	7/21/16
	Street Address		City				
	476 Saratoga road		Gansevoort				

SECTION II - Reassignment by Manufactured Home Dealer or Registered Boat Dealer or Out-of-State Dealer

ODOMETER DISCLOSURE STATEMENT

Note: This vehicle cannot be registered or titled in the name of the new owner unless mileage is disclosed. Federal and State Law require that you state the mileage of the vehicle described on this certificate when transferring ownership. Failure to do so, or providing a false statement, may result in fines and/or imprisonment.

ODOMETER READING

--

(no tenths)

ODOMETER HAS SPACE FOR: (Check one)

- Five Digits, excluding tenths
 Six Digits, excluding tenths

- I certify that, to the best of my knowledge, this odometer reading (check one):
1. reflects the ACTUAL MILEAGE of the vehicle described on the front.
 2. EXCEEDS MECHANICAL LIMITS (odometer started over at zero)
 3. not the actual mileage. WARNING ODOMETER DISCREPANCY.

I or we transfer the vehicle, boat or manufactured home described on this certificate. At the time of transfer, this title is subject only to the liens or encumbrances listed on this certificate, if any. I also certify that this is the most recent title issued for this vehicle, boat or manufactured home.

Note: Section 2113 of the Vehicle and Traffic Law requires that application for a title must be made within 30 days of transfer.

Seller	Seller's Signature		Seller's Name (Print in Full)		State	ZIP code	Date of Statement
	[Redacted]		[Redacted]				
Buyer	Buyer's Signature		Buyer's Name (Print in Full)		State	ZIP code	Date of Statement
	[Redacted]		[Redacted]				
	Street Address		City				
	[Redacted]		[Redacted]				

Boat Dealer's Facility #

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EXECUTIVE DEPUTY COMMISSIONER OF MOTOR VEHICLES



Canal Ponds Business Park
100 Marina Drive • Rochester, New York 14626
(585) 453-7000 • (800) 836-7328
summitfcu.org

December 9, 2015

Title Bureau Service
New York State DMV
Empire State Plaza
Albany NY 12228

This letter is to inform you that we no longer have a lien or security interest for the vehicle described below.

Name: [REDACTED]
Vehicle: 2001 Ford Excursion
VIN: 1FMNU40S51EE [REDACTED]
Date Paid: N/A – Paid in full

The following are also known as The Summit Federal Credit Union:

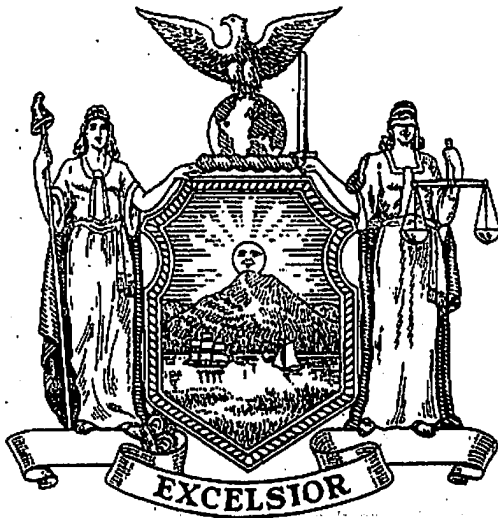
Brighton School Employees Federal Credit Union	Onondaga Employees Federal Credit Union
Buffalo Telephone Employees Credit Union	Penn Central Federal Credit Union
Cortland County Federal Credit Union	Penn Central Syracuse Employees Federal Credit Union
Cortland-Madison Schools and Colleges Federal Credit Union	Pine Cone Federal Credit Union
First Link Federal Credit Union	Rollway Credit Union
Frontier Federal Credit Union	SunFirst Federal Credit Union
GM Employees Federal Credit Union	Syracuse Federal Credit Union
Hilton Federal Credit Union	Syracuse Police Federal Credit Union
Kenton Federal Credit Union	US Onondaga County Employees Federal Credit Union
Onondaga County Employees Federal Credit Union	US Onondaga Federal Credit Union

Sincerely,

[REDACTED]
Amy Skrip
[REDACTED]

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New York State
Department of Motor Vehicles



New York State
Department of Motor Vehicles

SERVICE
AMOUNT PAID
RATE
JURISDICTION

SALES TAX
\$84.00
7.000%
4111

SERVICE
AMOUNT PAID
RATE
JURISDICTION

SALES TAX
\$84.00
7.000%
4111

PLATE REG TYPE YR MAKE REG EXPIRES
2001 FORD

PLATE REG TYPE YR MAKE REG EXPIRES
2001 FORD

SHAHED HUSSAIN DBA
PRESTIGE LIMO&CHAUF
776 SARATOGA RD
GANSEVOORT NY 12831

VIN 1FMNU40S51EB [REDACTED]
SURRENDER DATE
ITEMS SURRENDERED

VIN 1FMNU40S51EB [REDACTED]
SURRENDER DATE
ITEMS SURRENDERED

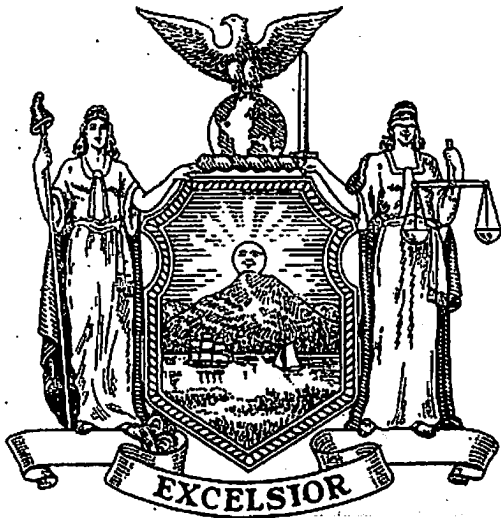
SHAHED HUSSAIN DBA
PRESTIGE LIMO&CHAUF
776 SARATOGA RD
GANSEVOORT NY 12831

VISA [REDACTED] 84.00
6020556F JUL 21 2016
LRS SPA952

6020556F JUL 21 2016
LRS SPA952 20160721142731
6020556F

**STATE OF NEW YORK
DEPARTMENT OF MOTOR VEHICLES**

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EXECUTIVE DEPUTY COMMISSIONER OF MOTOR VEHICLES

GS275269

AUTO TLR 1 NONTRANSFERABLE

6072210BC4 GS275269 LAC 60.00

SHAHED HUSSAIN DBA
PRESTIGE LIMO&CHAUF
FH

Corp/Govt reg transaction

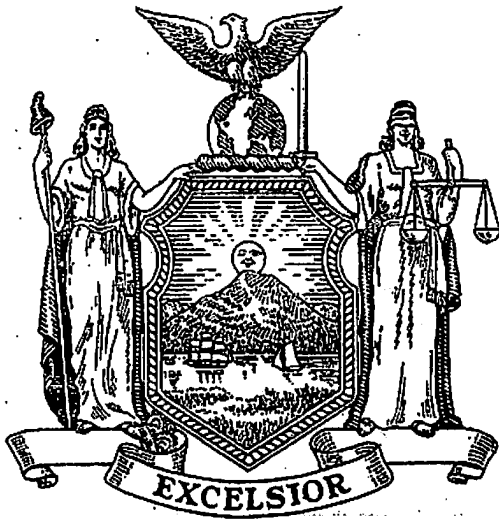


RAC



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REGPLESS NEW YORK STATE DEPARTMENT OF MOTOR VEHICLE Page 5
05/02/2017 Paperless, and Non-Inventory Daily report
SPA Terminal: 952 Cashier:JPG DocType:RGD

	Pless	document	tcode	clientID	name	plate	cls	Spec	Cond	OD	MV	fee	payment	proof	cancel
Y		GW281801	RRRN	762614447	[REDACTED]	[REDACTED]	HOU					\$55.50	CASH	001	
Y		GW281807	RRRN		[REDACTED]	[REDACTED]	OML					\$92.00	CRDT	059	
Y		GW281808	RRRN	486506109	[REDACTED]	[REDACTED]	TRL					\$50.50	CRDT	001	
Y		GW281816	RRRN	502347062	[REDACTED]	[REDACTED]	LTR					\$9.75	CRDT	001	
Y		GW281826	RRRN	792515183	[REDACTED]	[REDACTED]	MOT SR					\$36.25	CRDT	001	
Total number: 5												fee:	\$244.00		

GW281807

CREDIT CARD

NONTRANSFERABLE

[REDACTED] GW281807 JPG 92.00
[REDACTED]

SHAHED HUSSAIN DBA
PRESTIGE LIMO&CHAUF

Corp/Govt reg transaction

Paperless

RRN [REDACTED]

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