

TENNESSEE DEPARTMENT OF REVENUE VEHICLE TAXPAYER SERVICES DIVISION **MULTI-PURPOSE APPLICATION**

OFFICIAL VEHICLE REGISTRATION

OWNER INFORMATION *LEGAL STATUS: 1 (AND) 2 (0R) ENTER NAME CODE IN BOX 1 (SAME) 2 (DIFFERENT) 3 (MULTIPLE LAST NAMES) 4 (COMPANY) 5 (OVER 28 CHARACTERS) AND LAST NAME FIRST NAME MIDDLE INITIAL LAST NAME FIRST NAME MIDDLE INITIAL LAST NAME FIRST NAME	MINISTER 1
FINGLE BILLION COME BILLION COME THOUGHT COME	N _{iu} N
	DDLE INITIAL
BOWMAN TRAILER LEASING LLC	
ADDRESS 1 (MAILING) 10233 GOVERNOR LN BLVD	(
	CODE
WILLIAMSPORT MD 21795	
* FASED O *SERVICE OPTIONS	CE POLICY#
DEC REVENUE DIDE FOR INSTRUCTIONS	
VIN MAKE MODEL YEAR BODY TITLE BRAND - translation CODE TYPE OF FUEL - translation	
1DW1A5323RS854309 STOU 1DW 1994 SE USED U	9
SURRENDERED TITLE \$\ STATE \text{PREVIOUS STATES TITLED} \text{VEHICLE USE} \text{VEHICLE TYPE} \text{CURRENT MILEAGE} ODOMETER ACTUAL (0) NOT ACTUAL (8) INDICATION OVER 10 YES 16,000 LBS (1) (Ust one) IN EXCESS OF MECHANICAL L	CODE
7/049025/0949 SC F S	1
COLOR CODE (enter appropriate code)* UPPER LOWER O MOBILE HOME LGTH WOTH # AXLES GROSS VEHICLE WEIGHT "VEHICLE TRADE-IN DESCRIPTION COMPANY V	3222
PLATE INFORMATION *(required for Title and Registration and Registration Only Transactions) SEE REVERSE SIDE FOR COMPLETE INSTRUCTIONS	
	TION DATE (1)(2)(3) PERMANENT
TDR STICKER #(4) TEMP OPERATOR PERMIT #(3) # OF SEATS(5) ZONE(COUNTY NAME)(6) USDOT / REGISTRANT #(7) MOTOR CARRIEF	
LIEN INFORMATION (If lien present) LIEN CODE FIRST LIENHOLDER	***
SUNTRUST BANK	09/26/2013
STREET CITY STATE ZIP	CODE
120 E BALTIMORE ST 25 FL BALTIMORE MD 212 LIEN CODE SECOND LIENHOLDER	UEN DATE
STREET CITY STATE ZIP (CODE
*LEGAL STATUS NAME CODE NAME 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 REAS*	
DEALER NAME DEALER ADDRESS DEALER #	
*Regulted for Duplicate Title - T.C.A. 55-3-115 (autent) illegible or altered Certificate of Title)	
	GIBLE
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 determine the accuracy of the information provided by me or on my behalf. SIGNATURE OF CERTIFICATION. POWER OF ATTORNEY/AUTHORIZED SIGNATURE(IF APPLICABLE) DATE	
· · · · · · · · · · · · · · · · · · ·	5/2013
NVOICE NUMBER COUNTY NAME CO NUMBER DATE OF APPLICATION BY AUTHORITY OF REGISTRAR OF MOTOR VEHICLES(COUNTY CL	
13309 @ HAMILTON 33 11/05/2013 W.F. (BILL) KNOWLES OFFICE USE ONLY EMISSION: Yraller (total fees collected indicated certifiles this form as a valid registrate.)	HCM27
REGISTRATION FEE CREDIT LEASE FEE TRANS FEE CLERK FEE ISSUANCE FEE TITLE FEE TOTAL TAX COLLE 79.75 TRANS FEE CLERK FEE ISSUANCE FEE TITLE FEE TOTAL TAX COLLE	CIED
COMPUTATION OF SALES OR USE TAX SA TAX LOCAL TAX ADDITIONAL TAX COLLECTED IN STATE OF COUNTY WHEEL TAX CITY STICKER FEE	
SALES TAX USE	LECTED
97.25	