



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



City Stickers:

NEW OR CURRENT TITLE NUMBER	TRANSACTION CODE*	REGISTRATION ONLY NUMBER
92784947	N01	

OWNER INFORMATION *LEGAL STATUS: 1 (AND) 2 (OR) <input type="checkbox"/> ENTER NAME CODE IN BOX 1 (SAME) 2 (DIFFERENT) 3 (MULTIPLE LAST NAMES) 4 (COMPANY) 5 (OVER 28 CHARACTERS) <input type="checkbox"/> 4		MAO <input type="checkbox"/> N <input type="checkbox"/> ILU <input type="checkbox"/> N			
LAST NAME	FIRST NAME	MIDDLE INITIAL	LAST NAME	FIRST NAME	MIDDLE INITIAL
BOWMAN TRAILER LEASING LLC					
ADDRESS 1 (MAILING)			ADDRESS 2 (PHYSICAL)		
10233 GOVERNOR LN BLVD					
CITY	STATE	ZIP CODE	CITY	STATE	ZIP CODE
WILLIAMSPORT	MD	21795			
CITY OF RESIDENCE/PRINCIPAL BUS OR INCORP LOCATION	PURCHASE DATE	*LEASED <input type="checkbox"/> 0 *SERVICE OPTIONS <input type="checkbox"/>	TELEPHONE #	*PLACARD/HEARING IMPAIRED CLS/YR	*INSURANCE POLICY #
HAMILTON 033	09/26/2013	SEE REVERSE SIDE FOR INSTRUCTIONS	301 582 1793		

VEHICLE INFORMATION		VIN		MAKE	MODEL	YEAR	BODY	TITLE BRAND - translation	CODE	TYPE OF FUEL - translation	CODE
2MN01AAH311001655		TRIM		2MN	2001	SE	USED		U		9
SURRENDERED TITLE #		STATE	PREVIOUS STATES TITLED	VEHICLE USE	VEHICLE TYPE	CURRENT MILEAGE	ODOMETER ACTUAL (0) NOT ACTUAL (8) INDICATOR OVER 10 YRS / 15 000 LBS (1) (List one) IN EXCESS OF MECHANICAL LIMITS (9)	CODE			
770490247049		SC		F	S			1			
COLOR CODE (enter appropriate code)* UPPER LOWER	MOBILE HOME LGTH WIDTH	# AXLES	GROSS VEHICLE WEIGHT	*VEHICLE TRADE-IN DESCRIPTION	COMPANY VEHICLE #						
O					3258						
PLATE INFORMATION *(required for Title and Registration and Registration Only Transactions) SEE REVERSE SIDE FOR COMPLETE INSTRUCTIONS											
PLATE #(1)	CLASSCODE/ISSUEYR(1)(3)	VALIDATION #(1)	COUNTY STICKER #(1)	CITY STICKER #(1)(2)	*PLATE #(TRADE IN)(2)	CLASS CODE/ISSUE YR(2)	EXPIRATION DATE (1)(2)(3)				
U476625	8020/1994						PERMANENT				
TDR STICKER #(4)	TEMP OPERATOR PERMIT #(3)	# OF SEATS(5)	ZONE(COUNTY NAME)(6)	USDOT / REGISTRANT #(7)	MOTOR CARRIER #(8)						

LIEN INFORMATION (If lien present)		LIEN CODE		FIRST LIENHOLDER	LIEN DATE	
				SUNTRUST BANK	09/26/2013	
STREET		CITY		STATE		ZIP CODE
120 E BALTIMORE ST 25 FL		BALTIMORE		MD		21202
LIEN CODE		SECOND LIENHOLDER		LIEN DATE		
STREET		CITY		STATE		ZIP CODE

*LESSEE / REGISTRANT INFORMATION(OWNER OF PLATE)		LEGAL STATUS <input type="checkbox"/>	NAME CODE <input type="checkbox"/>	MAO <input type="checkbox"/>	ILU <input type="checkbox"/>	
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 REASON / SALES TAX #
DEALER NAME		DEALER ADDRESS		DEALER #			

*Required for Duplicate Title - T.C.A. 55-3-115 (submit illegible or altered Certificate of Title)					
<input type="checkbox"/> LOST	<input type="checkbox"/> STOLEN	<input type="checkbox"/> MUTILATED	<input type="checkbox"/> RTN'D DUE TO NON DELIVERY	<input type="checkbox"/> ALTERED	<input type="checkbox"/> ILLEGIBLE

Under penalties of perjury, I hereby certify that 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 its assignees to determine the accuracy of the information provided by me or on my behalf.

SIGNATURE OF CERTIFIER/OWNER	POWER OF ATTORNEY/AUTHORIZED SIGNATURE(IF APPLICABLE)	DATE
		11/06/2013

INVOICE NUMBER	COUNTY NAME	CO NUMBER	DATE OF APPLICATION	BY AUTHORITY OF REGISTRAR OF MOTOR VEHICLES(COUNTY CLERK)			
13310 @	HAMILTON	33	11/06/2013	W.F. (BILL) KNOWLES KAR46			
OFFICE USE ONLY	EMISSION: Trailer					(total fees collected indicated certifies this form as a valid registration)	
REGISTRATION FEE	CREDIT	LEASE FEE	TRANS FEE	CLERK FEE	ISSUANCE FEE	TITLE FEE	TOTAL TAX COLLECTED
79.75					12.00	5.50	.00
COMPUTATION OF	SALES OR USE TAX	SA TAX	LOCAL TAX	ADDITIONAL TAX	COLLECTED IN STATE OF	COUNTY WHEEL TAX	CITY STICKER FEE
<input type="checkbox"/> SALES TAX <input type="checkbox"/> USE TAX							
*SERVICE OPT FEE	ORGAN DONOR	POSTAGE	VER	ID / RESIDENCY VERIFICATION	*TOTAL FEES COLLECTED		
					97.25		