



NEW OR CURRENT TITLE NUMBER	TRANSACTION CODE	REGISTRATION ONLY NUMBER	STATE
93627899	N01		

OWNER INFORMATION *LEGAL STATUS: 1 (AND) 2 (OR) ☐ ENTER NAME CODE IN BOX 1 (SAME) 2 (DIFFERENT) 3 (MULTIPLE LAST NAMES) 4 (COMPANY) 5 (OVER 28 CHARACTERS) ☒ 4										MAG ☒ N		JEU ☒ N			
LAST NAME			FIRST NAME			MIDDLE INITIAL		LAST NAME			FIRST NAME			MIDDLE INITIAL	
BSE TRAILER LEASING LLC															

ADDRESS 1 (MAILING)	ADDRESS 2 (PHYSICAL)
10233 GOVERNOR LN BLVD	

CITY	STATE	ZIP CODE	CITY	STATE	ZIP CODE
WILLIAMSPORT	MD	21795			

ADDRESS HAMILTON 033	PURCHASE DATE 08/11/2014	*LEASED ☒ *SERVICE OPTIONS ☐ SEE REVERSE SIDE FOR INSTRUCTIONS	TELEPHONE # 240 772 5501	*PLACARD/HEARING IMPAIRED CLS/YR	*INSURANCE POLICY #
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VEHICLE INFORMATION									
VIN	MAKE	MODEL	YEAR	BODY	TITLE BRAND - translation	CODE	TYPE OF FUEL - translation	CODE	
3H3V532C2FT328423	HYTR	3H3	2015	SE					

SURRENDERED TITLE #	STATE	PREVIOUS STATES TITLED	VEHICLE USE	VEHICLE TYPE	CURRENT MILEAGE	ODOMETER ACTUAL (D) NOT ACTUAL (B) INDICATOR OVER 10 YRS / 10,000 LBS (1) (List one) IN EXCESS OF MECHANICAL LIMITS (6)	CODE
MSO	CA		F	S			1

COLOR CODE (enter appropriate code) UPPER LOWER		MOBILE HOME LOTH WIDTH		# AXLES	GROSS VEHICLE WEIGHT	VEHICLE TRADE-IN DESCRIPTION	COMPANY VEHICLE #
0							328423

FOR INFORMATION: Transfer to the new Registration and Renewal Only Transmittals. SEE REVERSE SIDE FOR COMPLETE INSTRUCTIONS.							
PLATE #(1)	CLASS CODE/ISSUE YR(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)
U526473	8020/1994						PERMANENT

DR STICKER # (4)	TEMP OPERATOR PERMIT # (3)	# OF SEATS (5)	ZONE/COUNTY NAME (6)	USDOT / REGISTRANT # (7)	MOTOR CARRIER # (8)

USER INFORMATION (If filled correctly)

LIEN CODE	FIRST LIENHOLDER	LIEN DATE
	SUNTRUST BANK	08/11/2014
STREET		

120 E BALTIMORE ST 25 FL		CITY	BALTIMORE	STATE	MD	ZIP CODE	21202
LIEN CODE	SECOND LIENHOLDER				LIEN DATE		

STREET	CITY	STATE	ZIP CODE
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LESSEE / REGISTRANT INFORMATION (OWNER OF PLATE)		LEGAL STATUS	NAME CODE	MAO	ILL
NAME			NAME		

ADDRESS	CITY	STATE	ZIP CODE
VEHICLE COST TAX INFORMATION			

SALE PRICE		TRADE IN ALLOWANCE		TAXABLE AMOUNT		SALESTAX PAID		*TAX EXEMPTION REASON / SALES TAX #	
DEALER NAME		DEALER ADDRESS							

[illegible]

☐ LOST	☐ STOLEN	☐ MUTILATED	☐ RTN'D DUE TO NON DELIVERY	☐ ALTERED	☐ ILLEGIBLE
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 to 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
		08/19/2014
VOICE NUMBER	COUNTY NAME	CO NUMBER
11001	ALABAMA	
	DATE OF APPLICATION	BY AUTHORITY OF REGISTRAR OF MOTOR VEHICLES (COUNTY CLERK)

14231 @	HAMILTON	33	08/19/2014	W.F. (BILL) KNOWLES			HCM27
PRICE 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	5.75	

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 TAX							
SERVICE OPT FEE		ORGAN DONOR	POSTAGE	VER	ID / RESIDENCY VERIFICATION	TOTAL FEE DUE		

1057	Port: wk48/DR27/0020	Cash: 0.00	Check: 0.00	Check#:	Credit: 0.00	Auth#:	Change: 0.00	TOTAL FEES COLLECTED 97.25	RDA-602
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