



OFFICIAL VEHICLE REGISTRATION

764690

Stickers:

VEHICLE OR CURRENT TITLE NUMBER	TRANSACTION CODE	REGISTRATION ONLY NUMBER
4186562	001	

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) 5			MAO <input checked="" type="checkbox"/> <input type="checkbox"/> ILU <input checked="" type="checkbox"/>	
OWNER NAME		FIRST NAME	MIDDLE INITIAL	LAST NAME
BOWMAN SALES AND EQUIPMENT INC				
ADDRESS 1 (MAILING)		ADDRESS 2 (PHYSICAL)		
PO BOX 433 % 10233 GOVERNOR LN BLVD				
CITY	STATE	ZIP CODE	CITY	STATE ZIP CODE
WILLIAMSPORT	MD	21795		
OFFICE OF RESIDENCE/PRINCIPAL BUS OR INCORP LOCATION	PURCHASE DATE	TELEPHONE #	*PLACARD/HEARING IMPAIRED CLS/YR	*INSURANCE POLICY #
HAMILTON 033	06/30/2011	301 582 1793		
*LEASED <input checked="" type="checkbox"/> *SERVICE OPTIONS <input type="checkbox"/>		SEE REVERSE SIDE FOR INSTRUCTIONS		

VEHICLE INFORMATION		MAKE	MODEL	YEAR	BODY	TITLE BRAND - list the appropriate code (N) NEW (1) RECONSTRUCTED VEHICLE (U) USED (2) FLOOD DAMAGE (D) DEMO (3) SPECIALLY CONSTRUCTED (8) PARTS ONLY	CODE	TYPE OF FUEL - list the appropriate code (1) GAS (2) DIESEL (3) ELECTRIC/HYBRID (4) PROPANE (5)	CODE
IGRAA06264D406668		GDAN	741	2004	SE		U		9
PREVIOUS TITLE #		STATE	PREVIOUS STATES TITLED	VEHICLE USE	VEHICLE TYPE	CURRENT MILEAGE	ODOMETER ACTUAL (0) NOT ACTUAL (8) INDICATOR OVER 10 YRS / 18,000 LBS (1) IN EXCESS OF MECHANICAL LIMITS (9)	CODE	
57241335		TN	TN	F	S			1	
*OR CODE (enter appropriate code) *ER LOWER		MOBILE HOME LGTH	WIDTH	# AXLES	GROSS VEHICLE WEIGHT	*VEHICLE TRADE-IN DESCRIPTION		COMPANY VEHICLE #	
C								764690	

*ATE INFORMATION (required for Title and Registration and Registration Only Transactions) SEE REVERSE SIDE FOR COMPLETE INSTRUCTIONS							
ATE # (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)
U332593	8020/1994						PERMANENT
R STICKER # (4)	TEMP OPERATOR PERMIT # (3)	# OF SEATS (5)	ZONE (COUNTY NAME) (6)	USDOT / REGISTRANT # (7)		MOTOR CARRIER # (8)	

*IN INFORMATION (if lien present)		FIRST LIENHOLDER		LIEN DATE	
		SUNTRUST BANK		06/30/2011	
REET		CITY		STATE ZIP CODE	
120 E BALTIMORE 25TH FL		BALTIMORE		MD 21202	
SECOND LIENHOLDER		CITY		STATE ZIP CODE	

*ESSEE / 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)				
VEHICLE 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 if lien or altered Certificate of Title)					
<input type="checkbox"/> LOST	<input type="checkbox"/> STOLEN	<input type="checkbox"/> MUTILATED	<input type="checkbox"/> RTND DUE TO NON DELIVERY	<input type="checkbox"/> ALTERED	<input type="checkbox"/> ILLEGIBLE

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 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
					11/18/2011

VOICE NUMBER	COUNTY NAME	CO NUMBER	DATE OF APPLICATION	BY AUTHORITY OF REGISTRAR OF MOTOR VEHICLES (COUNTY CLERK)				
11322 @	HAMILTON	33	11/18/2011	W.F. (BILL) KNOWLES HJC27				
*FEE 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		