

OFFICIAL VEHICLE REGISTRATION

Stickers:

OR CURRENT TITLE NUMBER 480902	TRANSACTION CODE 001	REGISTRATION ONLY NUMBER 762593
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FOR 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 MAO ☒ ILU ☒		
NAME DJWMAN TRAILER LEASING LLC	FIRST NAME DJWMAN	MIDDLE INITIAL TRAILER
ADDRESS 1 (MAILING) 1233 GOVERNOR LN BLVD	ADDRESS 2 (PHYSICAL)	
STATE MD	ZIP CODE 21795	CITY
RESIDENCE/PRINCIPAL BUS OR INCORP LOCATION AMILTON 033	PURCHASE DATE 06/29/2012	TELEPHONE # 301 582 1793
*LEASED ☒ *SERVICE OPTIONS ☐	*PLACARD/HEARING IMPAIRED CLSYR	*INSURANCE POLICY #

VEHICLE INFORMATION	MAKE STOU	MODEL AVW	YEAR 2004	BODY SE	TITLE BRAND - translation	CODE U	TYPE OF FUEL - translation	CODE 9
VEHICLE IDENTIFICATION # DW1A53264B691910	STATE TN	PREVIOUS STATES TITLED TN	VEHICLE USE F	VEHICLE TYPE S	CURRENT MILEAGE	ODOMETER ACTUAL (8) NOT ACTUAL (8) INDICATOR OVER 10 YRS / 16,000 LBS (1) (List one) IN EXCESS OF MECHANICAL LIMITS (9)	CODE 1	
OR CODE (enter appropriate code) R LOWER	MOBILE HOME LSTH	WIDTH	# AXLES	GROSS VEHICLE WEIGHT	*VEHICLE TRADE-IN DESCRIPTION	COMPANY VEHICLE # 767593		

*INFORMATION *(required for Title and Registration and Registration Only Transactions) SEE REVERSE SIDE FOR COMPLETE INSTRUCTIONS							
VE # (1) 1381153	CLASSCODE/ISSUE YR (1)(3) 8020/1994	VALIDATION # (1)	COUNTY STICKER # (1)	CITY STICKER # (1)(2)	*PLATE # (TRADE IN) (2)	CLASS CODE/ISSUE YR (2)	EXPIRATION DATE (1)(2)(3) PERMANENT
STICKER # (4)	TEMP OPERATOR PERMIT # (3)	# OF SEATS (5)	ZONE (COUNTY NAME) (6)	USDOT / REGISTRANT # (7)	MOTOR CARRIER # (8)		

*INFORMATION (If Lien present)				LIEN DATE 06/29/2012
LIEN CODE	FIRST LIENHOLDER SUNTRUST BANK	CITY BALTIMORE	STATE MD	ZIP CODE 21202
LIEN CODE	SECOND LIENHOLDER	CITY	STATE	ZIP CODE

SEE / REGISTRANT INFORMATION (OWNER OF PLATE)	LEGAL STATUS ☐	NAME CODE ☐	MAO ☐	ILU ☐
NAME	CITY			
ADDRESS	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 #
VEHICLE NAME	DEALER ADDRESS			DEALER #

*required for Duplicate Title - T.C.A. 55-9-115 (submit Illegible or altered Certificate of Title)				
☐ 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 assign to determine the accuracy of the information provided by me or on my behalf.		DATE 08/30/2012
SIGNATURE OF CERTIFIER/OWNER		POWER OF ATTORNEY/AUTHORIZED SIGNATURE (IF APPLICABLE)

VOICE NUMBER 12243 @	COUNTY NAME HAMILTON	CO NUMBER 33	DATE OF APPLICATION 08/30/2012	BY AUTHORITY OF REGISTRAR OF MOTOR VEHICLES (COUNTY CLERK) W.F. (BILL) KNOWLES	HJC27
*FEE USE ONLY (total fees collected indicated certifies this form as a valid registration)					
REGISTRATION FEE 79.75	CREDIT	LEASE FEE	TRANS FEE	CLERK FEE	ISSUANCE FEE 12.00
SALES OR USE TAX		SA TAX	LOCAL TAX	ADDITIONAL TAX	TITLE FEE 5.50
SALES TAX ☐ USE TAX		COLLECTED IN STATE OF		COUNTY WHEEL TAX	TOTAL TAX COLLECTED .00
SERVICE OPT FEE	ORGAN DONOR	POSTAGE	VER	ID / RESIDENCY VERIFICATION	CITY STICKER FEE
*TOTAL FEES COLLECTED 97.25					