



# OFFICIAL VEHICLE REGISTRATION

107469

**City Stickers:**

VEHICLE OR CURRENT TITLE NUMBER <b>30476048</b>	TRANSACTION CODE <b>001</b>	REGISTRATION ONLY NUMBER
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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) <b>4</b>		MAO <input checked="" type="checkbox"/> <b>N</b> ILU <input checked="" type="checkbox"/> <b>N</b>
ST NAME <b>BOWMAN TRAILER LEASING LLC</b>	FIRST NAME <b>BOWMAN</b>	MIDDLE INITIAL <b>TR</b>

ADDRESS 1 (MAILING) <b>10233 GOVERNOR LN BLVD</b>	ADDRESS 2 (PHYSICAL)
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CITY <b>WILLIAMSPORT</b>	STATE <b>MD</b>	ZIP CODE <b>21795</b>	CITY	STATE	ZIP CODE
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HOME OF RESIDENCE/PRINCIPAL BUS OR INCORP LOCATION <b>HAMILTON 033</b>	PURCHASE DATE <b>06/29/2012</b>	LEASED <input checked="" type="checkbox"/> SERVICE OPTIONS <input type="checkbox"/> SEE REVERSE SIDE FOR INSTRUCTIONS	TELEPHONE # <b>301 582 1793</b>	*PLACARD/HEARING IMPAIRED CLS/YR	*INSURANCE POLICY #
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VEHICLE INFORMATION								
VEHICLE IDENTIFICATION NUMBER <b>1GRAA0627YB038826</b>	MAKE <b>GDAN</b>	MODEL <b>731</b>	YEAR <b>2000</b>	BODY <b>SE</b>	TITLE BRAND - translation	CODE <b>U</b>	TYPE OF FUEL - translation	CODE <b>9</b>

PREVIOUSLY REGISTERED TITLE # <b>59041915</b>	STATE <b>TN</b>	PREVIOUS STATES TITLED <b>IN</b>	VEHICLE USE <b>F</b>	VEHICLE TYPE <b>S</b>	CURRENT MILEAGE	ODOMETER ACTUAL (0) NOT ACTUAL (6) INDICATOR OVER 10 YRS / 16,000 LBS (1) (List one) IN EXCESS OF MECHANICAL LIMITS (9)	CODE <b>1</b>
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VEHICLE OR CODE (enter appropriate code)* VEHICLE LOWER <b>3</b>	MOBILE HOME LNGTH WIDTH	# AXLES	GROSS VEHICLE WEIGHT	*VEHICLE TRADE-IN DESCRIPTION	COMPANY VEHICLE # <b>107469</b>
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VEHICLE INFORMATION (required for Title and Registration and Registration Only Transactions) SEE REVERSE SIDE FOR COMPLETE INSTRUCTIONS							
PLATE # (1) <b>J379871</b>	CLASS CODE/ISSUE YR (1)(3) <b>8020/1994</b>	VALIDATION # (1)	COUNTY STICKER # (1)	CITY STICKER # (1)(2)	*PLATE # (TRADE IN) (2)	CLASS CODE/ISSUE YR (2)	EXPIRATION DATE (1)(2)(3) <b>PERMANENT</b>

REGISTRATION STICKER # (4)	TEMP OPERATOR PERMIT # (3)	# OF SEATS (5)	ZONE (COUNTY NAME) (6)	USDOT / REGISTRANT # (7)	MOTOR CARRIER # (8)
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LIEN INFORMATION (if lien present)		
LIEN CODE	FIRST LIENHOLDER <b>SUNTRUST BANK</b>	LIEN DATE <b>06/29/2012</b>

ADDRESS <b>120 E BALTIMORE ST 25 FL</b>	CITY <b>BALTIMORE</b>	STATE <b>MD</b>	ZIP CODE <b>21202</b>
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LIEN CODE	SECOND LIENHOLDER	LIEN DATE
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REGISTRATION CODE	CITY	STATE	ZIP CODE
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REGISTRANT / 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			
ADDRESS		STATE			
ADDRESS		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 #
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<input type="checkbox"/> LOST	<input type="checkbox"/> STOLEN	<input type="checkbox"/> MUTILATED	<input type="checkbox"/> RTND DUE TO NON DELIEVERY	<input type="checkbox"/> ALTERED	<input type="checkbox"/> ILLEGIBLE
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I hereby certify that the 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.

NATURE OF CERTIFIER/OWNER	POWER OF ATTORNEY/AUTHORIZED SIGNATURE (IF APPLICABLE)	DATE <b>08/15/2012</b>
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COUNTY NUMBER <b>12228 @</b>	COUNTY NAME <b>HAMILTON</b>	CO NUMBER <b>33</b>	DATE OF APPLICATION <b>08/15/2012</b>	BY AUTHORITY OF REGISTRAR OF MOTOR VEHICLES (COUNTY CLERK) <b>W.F. (BILL) KNOWLES</b>	<b>HJC27</b>
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VEHICLE USE ONLY EMISSION: Trailer						
REGISTRATION FEE <b>79.75</b>	CREDIT	LEASE FEE	TRANS FEE	CLERK FEE	ISSUANCE FEE <b>12.00</b>	TITLE FEE <b>5.50</b>
COMPUTATION OF SALES OR USE TAX			SA TAX	LOCAL TAX	ADDITIONAL TAX	COLLECTED IN STATE OF
SALES TAX <input type="checkbox"/> USE TAX			POSTAGE	VER	ID / RESIDENCY VERIFICATION	TOTAL TAX COLLECTED <b>.00</b>
SERVICE OPT FEE			ORGAN DONOR	POSTAGE	VER	TOTAL FEES COLLECTED <b>97.25</b>