



OFFICIAL VEHICLE REGISTRATION

City Stickers:

1170

NEW OR CURRENT TITLE NUMBER 92781675		TRANSACTION CODE N01	REGISTRATION ONLY NUMBER	
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 25 CHARACTERS) 4 MAO <input checked="" type="checkbox"/> N <input type="checkbox"/> ILU <input checked="" type="checkbox"/> N				
LAST NAME BOWMAN TRAILER LEASING LLC		FIRST NAME	MIDDLE INITIAL	LAST NAME
ADDRESS 1 (MAILING) 10233 GOVERNOR LN BLVD		ADDRESS 2 (PHYSICAL)		
CITY WILLIAMSPORT		STATE MD	ZIP CODE 21795	CITY
CITY OF RESIDENCE/PRINCIPAL BUS OR INCORP LOCATION HAMILTON 033		PURCHASE DATE 07/23/2013	*LEASED <input checked="" type="checkbox"/> *SERVICE OPTIONS <input type="checkbox"/> <small>SEE REVERSE SIDE FOR INSTRUCTIONS</small>	TELEPHONE # 301 582 1793
		*PLACARD/HEARING IMPAIRED CLS/YR		*INSURANCE POLICY #
VEHICLE INFORMATION				
VIN 1S12E95357E513902	MAKE STRI	MODEL 1S1	YEAR 2007	BODY SE
TITLE BRAND - translation USED		CODE U	TYPE OF FUEL - translation	
SURRENDERED TITLE # 4802890784		STATE OH	PREVIOUS STATES TITLED	VEHICLE USE F
			VEHICLE TYPE S	CURRENT MILEAGE
COLOR CODE (enter appropriate code)* UPPER O LOWER		MOBILE HOME LGTH WIDTH	# AXLES	GROSS VEHICLE WEIGHT
				*VEHICLE TRADE-IN DESCRIPTION
				COMPANY VEHICLE # 1170
PLATE INFORMATION * (required for Title and Registration and Registration Only Transactions) SEE REVERSE SIDE FOR COMPLETE INSTRUCTIONS				
PLATE # (1) U475332	CLASSCODE/ISSUEYR (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
TDR STICKER # (4)	TEMP OPERATOR PERMIT # (3)	# OF SEATS (5)	ZONE (COUNTY NAME) (6)	USDOT / REGISTRANT # (7)
				MOTOR CARRIER # (8)
LIEN INFORMATION (if applicable)				
LIEN CODE	FIRST LIENHOLDER SUNTRUST BANK			LIEN DATE 07/23/2013
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
LESSOR / REGISTRANT INFORMATION (OWNER OF PLATE)				
NAME		LEGAL STATUS <input type="checkbox"/>	NAME CODE <input type="checkbox"/>	MAO <input type="checkbox"/> ILU <input type="checkbox"/>
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 Duplicates Title - T.C.A. 55-3-115 (submit legal title 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
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 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 10/28/2013
INVOICE NUMBER 13301 @				
COUNTY NAME HAMILTON		CO NUMBER 33	DATE OF APPLICATION 10/28/2013	BY AUTHORITY OF REGISTRAR OF MOTOR VEHICLES/COUNTY CLERK W.F. (BILL) KNOWLES
OFFICE USE ONLY				
REGISTRATION FEE 79.75		CREDIT	LEASE FEE	TRANS FEE
COMPUTATION OF <input type="checkbox"/> SALES TAX <input type="checkbox"/> USE TAX		SALES OR USE TAX	SA TAX	LOCAL TAX
*SERVICE OPT FEE		ORGAN DONOR	POSTAGE	VER
		ID / RESIDENCY VERIFICATION		*TOTAL FEES COLLECTED 97.25