



OFFICIAL VEHICLE REGISTRATION

120678

City Stickers:
 VOR CURRENT TITLE NUMBER: **10475916** TRANSACTION CODE: **N01** REGISTRATION ONLY NUMBER: _____

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) MAO ILU

OWNER NAME FIRST NAME MIDDLE INITIAL LAST NAME FIRST NAME MIDDLE INITIAL
BOWMAN TRAILER LEASING LLC

ADDRESS 1 (MAILING) ADDRESS 2 (PHYSICAL)
0233 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 06/29/2012 301 582 1793

*LEASED *SERVICE OPTIONS
SEE REVERSE SIDE FOR INSTRUCTIONS

VEHICLE INFORMATION

VEHICLE IDENTIFICATION NUMBER (VIN): **PNV482B0YG315303** MAKE: **GDAN** MODEL: **1PN** YEAR: **2000** BODY: **SE** TITLE BRAND - translation: _____ CODE: **U** TYPE OF FUEL - translation: _____ CODE: **9**

PREVIOUS TITLE # STATE PREVIOUS STATES TITLED VEHICLE USE VEHICLE TYPE CURRENT MILEAGE ODOMETER ACTUAL (8) NOT ACTUAL (8) INDICATOR OVER 10 YRS / 16,000 LBS (1) IN EXCESS OF MECHANICAL LIMITS (9) CODE
922891065 OR F S

VEHICLE CODE (enter appropriate code) *LOWER MOBILE HOME LGTH WIDTH # AXLES GROSS VEHICLE WEIGHT *VEHICLE TRADE-IN DESCRIPTION COMPANY VEHICLE #
120678

PLATE INFORMATION *required for Title and Registration and Registration Only Transactions) 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)
J379803 8020/1994 PERMANENT

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

LIEN INFORMATION (if lien present)

LIEN CODE FIRST LIENHOLDER **SUNTRUST BANK** LIEN DATE **06/29/2012**

ADDRESS CITY STATE ZIP CODE
120 E BALTIMORE ST 25 FL BALTIMORE MD 21202

LIEN CODE SECOND LIENHOLDER _____ LIEN DATE _____

ADDRESS CITY STATE ZIP CODE _____

REGISTRANT INFORMATION (OWNER OF PLATE) LEGAL STATUS NAME CODE MAO ILU

NAME _____

ADDRESS CITY STATE ZIP CODE _____

VEHICLE COST / TAX INFORMATION *required for Title & Registration Transactions)

VEHICLE PRICE TRADE IN ALLOWANCE TAXABLE AMOUNT SALES TAX PAID *TAX EXEMPTION REASON / SALES TAX #

DEALER NAME DEALER ADDRESS DEALER #

required for Duplicate Title - T.C.A. 55-3-115 (submit illegible or altered Certificate of Title)

LOST STOLEN MUTILATED RTN'D DUE TO NON DELIVERY ALTERED ILLEGIBLE

or 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.

NATURE OF CERTIFIER/OWNER POWER OF ATTORNEY/AUTHORIZED SIGNATURE (IF APPLICABLE) DATE **08/15/2012**

OFFICE NUMBER COUNTY NAME **CO NUMBER** DATE OF APPLICATION **BY AUTHORITY OF REGISTRAR OF MOTOR VEHICLES (COUNTY CLERK)**

12228 @ HAMILTON 33 08/15/2012 W.F. (BILL) KNOWLES HJC27

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

SERVICE OPT FEE ORGAN DONOR POSTAGE VER ID / RESIDENCY VERIFICATION **TOTAL FEES COLLECTED**
97.25