



OFFICIAL VEHICLE REGISTRATION

13008

City Stickers:

NEW OR CURRENT TITLE NUMBER 90476761	TRANSACTION CODE 001	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 28 CHARACTERS) <input checked="" type="checkbox"/> MAO <input checked="" type="checkbox"/> ILU <input checked="" type="checkbox"/>					
LAST NAME BOWMAN TRAILER LEASING LLC	FIRST NAME 	MIDDLE INITIAL 	LAST NAME 	FIRST NAME 	MIDDLE INITIAL
ADDRESS 1 (MAILING) 10233 GOVERNOR LN BLVD			ADDRESS 2 (PHYSICAL) 		
CITY WILLIAMSPORT		STATE MD	ZIP CODE 21795		
CITY OF RESIDENCE/PRINCIPAL BUS OR INCORP LOCATION HAMILTON 033	PURCHASE DATE 02/27/2012	*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 1JJV532D4CL692444	MAKE WABA	MODEL 1JJ	YEAR 2012	BODY SE	TITLE BRAND - translation 	CODE U	TYPE OF FUEL - translation 		CODE 9
SURRENDERED TITLE # 82152464	STATE TN	PREVIOUS STATES TITLED TN	VEHICLE USE F	VEHICLE TYPE S	CURRENT MILEAGE 	ODOMETER ACTUAL (0) NOT ACTUAL (8) INDICATOR OVER 10 YRS / 16,000 LBS (1) IN EXCESS OF MECHANICAL LIMITS (9)			CODE 1
COLOR CODE (enter appropriate code) UPPER O	MOBILE HOME LGTH WDTH 	# AXLES 	GROSS VEHICLE WEIGHT 	*VEHICLE TRADE-IN DESCRIPTION 			COMPANY VEHICLE # 13008		

PLATE INFORMATION *(required for Title and Registration and Registration Only Transactions) SEE REVERSE SIDE FOR COMPLETE INSTRUCTIONS							
PLATE #(1) U380106	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 lien present)			
LIEN CODE 	FIRST LIENHOLDER SUNTRUST BANK	LIEN DATE 02/27/2012	
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

*LESSEE / 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 		STATE 		ZIP CODE 	
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 #

<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
-------------------------------	---------------------------------	------------------------------------	--	----------------------------------	------------------------------------

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 08/17/2012
---	--	---------------------------

INVOICE NUMBER 12230 @	COUNTY NAME HAMILTON	CO NUMBER 33	DATE OF APPLICATION 08/17/2012	BY AUTHORITY OF REGISTRAR OF MOTOR VEHICLES(COUNTY CLERK) W.F. (BILL) KNOWLES		KAR46
OFFICE USE ONLY REGISTRATION FEE 79.75						
CREDIT EMISSION: Trailer	LEASE FEE 	TRANS FEE 	CLERK FEE 	ISSUANCE FEE 12.00	TITLE FEE 5.50	TOTAL TAX COLLECTED .00
COMPUTATION OF <input type="checkbox"/> SALES TAX <input type="checkbox"/> USE TAX	SALES OR USE TAX 	SA TAX 	LOCAL TAX 	ADDITIONAL TAX 	COLLECTED IN STATE OF 	COUNTY WHEEL TAX
*SERVICE OPT FEE 	ORGAN DONOR 	POSTAGE 	VER 	ID / RESIDENCY VERIFICATION 	*TOTAL FEES COLLECTED 97.25	