



OFFICIAL VEHICLE REGISTRATION

140088

City Stickers:
 W OR CURRENT TITLE NUMBER: **30482059** TRANSACTION CODE: **001** REGISTRATION ONLY NUMBER: **140088**

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) **4** MAO ILU

OWNER NAME: **BOWMAN TRAILER LEASING LLC**

ADDRESS 1 (MAILING): **10233 GOVERNOR LN BLVD** ADDRESS 2 (PHYSICAL):

CITY: **WILLIAMSPORT** STATE: **MD** ZIP CODE: **21795**

OFFICE OF RESIDENCE/PRINCIPAL BUS OR INCORP LOCATION: **HAMILTON 033** PURCHASE DATE: **06/29/2012** TELEPHONE #: **301 582 1793**

VEHICLE INFORMATION: MAKE: **STRI** MODEL: **S75** YEAR: **2000** BODY: **SE** TITLE BRAND - translation: **U** TYPE OF FUEL - translation: **9**

REGISTERED TITLE #: **59901762** STATE: **TN** PREVIOUS STATES TITLED: **TN** VEHICLE USE: **F** VEHICLE TYPE: **S** CURRENT MILEAGE: **1**

PLATE INFORMATION *required for Title and Registration and Registration Only Transactions SEE REVERSE SIDE FOR COMPLETE INSTRUCTIONS

PLATE #: **U381667** CLASSCODE/ISSUEYR(1)(3): **8020/1994** VALIDATION #(1): **PERMANENT**

REGISTRATION INFORMATION: TEMP OPERATOR PERMIT #(3): **0** # OF SEATS(5): **0** ZONE(COUNTY NAME)(6): **0** USDOT / REGISTRANT #(7): **0** MOTOR CARRIER #(8): **140088**

LIEN INFORMATION (if lien present): LIEN CODE: **0** FIRST LIENHOLDER: **SUNTRUST BANK** LIEN DATE: **06/29/2012**

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

SECOND LIENHOLDER: **0** CITY: STATE: ZIP CODE:

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

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

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

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

CERTIFICATION: 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.

SIGNATURE OF CERTIFIER/OWNER: POWER OF ATTORNEY/AUTHORIZED SIGNATURE(IF APPLICABLE): DATE: **09/05/2012**

COUNTY INFORMATION: COUNTY NAME: **HAMILTON** COUNTY NUMBER: **33** DATE OF APPLICATION: **09/05/2012** BY AUTHORITY OF REGISTRAR OF MOTOR VEHICLES(COUNTY CLERK): **W.F. (BILL) KNOWLES** HJC27

FEES: REGISTRATION FEE: **79.75** EMISSION: Trailer LEASE FEE: TRANS FEE: CLERK FEE: ISSUANCE FEE: **12.00** TITLE FEE: **5.50** TOTAL TAX COLLECTED: **.00**

SALES TAX: USE TAX: LOCAL TAX: ADDITIONAL TAX: COLLECTED IN STATE OF: COUNTY WHEEL TAX: CITY STICKER FEE: *TOTAL FEES COLLECTED: **97.25**