



OFFICIAL VEHICLE REGISTRATION

City Stickers:

NEW OR CURRENT TITLE NUMBER 92781728		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) 4 MAO ☒ ILU ☒				
LAST NAME BOWMAN TRAILER LEASING LLC		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 07/23/2013	*LEASED ☒ *SERVICE OPTIONS ☐ SEE REVERSE SIDE FOR INSTRUCTIONS		TELEPHONE # 301 582 1793
*PLACARD/HEARING IMPAIRED CLS/YR				
*INSURANCE POLICY #				
VEHICLE INFORMATION				
VIN 1S12E953X8E518031	MAKE STRI	MODEL 1S1	YEAR 2008	BODY SE
TITLE BRAND - translation USED		CODE U	TYPE OF FUEL - translation	
SURRENDERED TITLE # 8701004928		STATE OH	PREVIOUS STATES TITLED	VEHICLE USE F
COLOR CODE (enter appropriate code)* UPPER O		MOBILE HOME LGTH 1410	WIDTH	COMPANY VEHICLE # 1410
PLATE INFORMATION (required for Title and Registration and Registration Only Transactions) SEE REVERSE SIDE FOR COMPLETE INSTRUCTIONS				
PLATE # (1) U475365	CLASS CODE/ISSUE YR (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 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		NAME		
ADDRESS		CITY		
STATE		ZIP CODE		
VEHICLE COST / TAX INFORMATION (required for Title & Registration Transactions)				
SALE PRICE	TRADE IN ALLOWANCE	TAXABLE AMOUNT	SALE TAX PAID	*TAX EXEMPTION REASON / SALES TAX #
DEALER NAME		DEALER ADDRESS		DEALER #
*Required for Duplicate Title - T.C.A. 55-3-119 (subject ineligible or altered Certificate of Title)				
☐ LOST	☐ STOLEN	☐ MUTILATED	☐ RTN'D DUE TO NON DELIVERY	☐ ALTERED
☐ 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				
EMISSION: Trailer		(total fees collected indicated certifies this form as a valid registration)		
REGISTRATION FEE 79.75	CREDIT	LEASE FEE	TRANS FEE	CLERK FEE
ISSUANCE FEE 12.00		TITLE FEE 5.50		TOTAL TAX COLLECTED .00
COMPUTATION OF ☐ SALES TAX ☐ USE TAX	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		