



OFFICIAL VEHICLE REGISTRATION

143392

City Stickers:

NEW OR CURRENT TITLE NUMBER 84173267	TRANSACTION CODE* O04	REGISTRATION ONLY NUMBER 1065106
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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"/> 4		MAO <input checked="" type="checkbox"/> N	ILU <input checked="" type="checkbox"/> N
LAST NAME BOWMAN TRAILER LEASING LLC	FIRST NAME BOWMAN TRAILER LEASING LLC	MIDDLE INITIAL	MIDDLE INITIAL
ADDRESS 1 (MAILING) 10233 GOVERNOR LN BLVD	ADDRESS 2 (PHYSICAL)		
CITY WILLIAMSPORT	STATE MD	ZIP CODE 21795	STATE MD
CITY WILLIAMSPORT	STATE MD	ZIP CODE 21795	STATE MD
CITY OF RESIDENCE/PRINCIPAL BUS OR INCORP LOCATION HAMILTON 033	PURCHASE DATE 12/14/2012	*LEASED <input type="checkbox"/> *SERVICE OPTIONS <input type="checkbox"/> SEE REVERSE SIDE FOR INSTRUCTIONS	TELEPHONE # 301-582-1793
		*PLACARD/HEARING IMPAIRED CLS/YR	*INSURANCE POLICY #

VEHICLE INFORMATION										
VIN 1NNVA5328YM332125	MAKE MONN	MODEL MA3	YEAR 2000	BODY SE	TITLE BRAND - translation USED	CODE U	TYPE OF FUEL - translation	CODE 9		
SURRENDERED TITLE #	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) (List one) IN EXCESS OF MECHANICAL LIMITS (9)			CODE 1	
COLOR CODE (enter appropriate code)* UPPER O	MOBILE HOME LGTH O	WDTH	# AXLES	GROSS VEHICLE WEIGHT	*VEHICLE TRADE-IN DESCRIPTION			COMPANY VEHICLE # 143392		

PLATE INFORMATION *(required for Title and Registration and Registration Only Transactions) SEE REVERSE SIDE FOR COMPLETE INSTRUCTIONS									
PLATE #(1) U401715	CLASSCODE/ISSUEYR(1)(3) 8020/1994	VALIDATION #(1)	COUNTY STICKER #(1)	CITY STICKER #(1)(2)	*PLATE #(TRADE IN)(2) U325884	CLASS CODE/ISSUE YR(2) 8020 1994	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								LIEN DATE
STREET	CITY								STATE
ZIP CODE									
LIEN CODE	SECOND LIENHOLDER								LIEN DATE
STREET	CITY								STATE
ZIP CODE									

*LESSEE / 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 Duplicate Title - T.C.A. 55-3-115 (submit illegible or altered Certificate of Title)									
<input type="checkbox"/> LOST	<input type="checkbox"/> STOLEN	<input type="checkbox"/> MUTILATED	<input type="checkbox"/> RTN'D 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 <i>W.F. Knowles</i>	POWER OF ATTORNEY/AUTHORIZED SIGNATURE (IF APPLICABLE) <i>W.F. Knowles POA</i>	DATE 12/19/2012
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INVOICE NUMBER 12354 @	COUNTY NAME HAMILTON	CO NUMBER 33	DATE OF APPLICATION 12/19/2012	BY AUTHORITY OF REGISTRAR OF MOTOR VEHICLES (COUNTY CLERK) W.F. (BILL) KNOWLES		VBS03
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OFFICE USE ONLY									
EMISSION: NOT APPLICABLE (total fees collected indicated certifies this form as a valid registration)									
REGISTRATION FEE	CREDIT	LEASE FEE	TRANS FEE 12.75	CLERK FEE	ISSUANCE FEE 2.50	TITLE FEE	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	CITY STICKER FEE		
*SERVICE OPT FEE	ORGAN DONOR	POSTAGE	VER	ID / RESIDENCY VERIFICATION			*TOTAL FEES COLLECTED 15.25		