



# OFFICIAL VEHICLE REGISTRATION

150107

**Vehicle Stickers:**

VEHICLE OR CURRENT TITLE NUMBER <b>30483863</b>	TRANSACTION CODE <b>N01</b>	REGISTRATION ONLY NUMBER
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VEHICLE 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

VEHICLE NAME <b>BOWMAN TRAILER LEASING LLC</b>	FIRST NAME <b>BOWMAN</b>	MIDDLE INITIAL	LAST NAME <b>TRAILER LEASING LLC</b>	FIRST NAME	MIDDLE INITIAL
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ADDRESS 1 (MAILING) <b>10233 GOVERNOR LN BLVD</b>	ADDRESS 2 (PHYSICAL)
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CITY <b>MILLIAMSPORT</b>	STATE <b>MD</b>	ZIP CODE <b>21795</b>	CITY	STATE	ZIP CODE
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OFFICE OF RESIDENCE/PRINCIPAL BUS OR INCORP LOCATION <b>HAMILTON 033</b>	PURCHASE DATE <b>06/29/2012</b>	*LEASED <input checked="" type="checkbox"/> *SERVICE OPTIONS <input type="checkbox"/> <small>SEE REVERSE SIDE FOR INSTRUCTIONS</small>	TELEPHONE # <b>301 582 1793</b>	*PLACARD/HEARING IMPAIRED CLS/YR	*INSURANCE POLICY #
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VEHICLE IDENTIFICATION NUMBER <b>3BD2E9533YX466298</b>	MAKE <b>STOU</b>	MODEL <b>3BD</b>	YEAR <b>2000</b>	BODY <b>SE</b>	TITLE BRAND - translation <b>USED</b>	CODE <b>U</b>	TYPE OF FUEL - translation	CODE <b>9</b>
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PREVIOUSLY REGISTERED TITLE # <b>J2101460398</b>	STATE <b>IN</b>	PREVIOUS STATES TITLED	VEHICLE USE <b>F</b>	VEHICLE TYPE <b>S</b>	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 <b>1</b>
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VEHICLE OR CODE (enter appropriate code)* <b>C</b>	MOBILE HOME LGTH <b>0</b>	MOBILE HOME WIDTH	# OF AXLES	GROSS VEHICLE WEIGHT	*VEHICLE TRADE-IN DESCRIPTION	COMPANY VEHICLE # <b>150107</b>
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VEHICLE INFORMATION *(required for Title and Registration and Registration Only Transactions) SEE REVERSE SIDE FOR COMPLETE INSTRUCTIONS
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VEHICLE # (1) <b>J382297</b>	CLASS CODE/ISSUE YR (1)(3) <b>8020/1994</b>	VALIDATION # (1)	COUNTY STICKER # (1)	CITY STICKER # (1)(2)	*PLATE # (TRADE IN) (2)	CLASS CODE/ISSUE YR (2)	EXPIRATION DATE (1)(2)(3) <b>PERMANENT</b>
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VEHICLE STICKER # (4)	TEMP OPERATOR PERMIT # (3)	# OF SEATS (5)	ZONE (COUNTY NAME) (6)	USDOT / REGISTRANT # (7)	MOTOR CARRIER # (8)
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VEHICLE INFORMATION (If lien present)
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LIEN CODE	FIRST LIENHOLDER <b>SUNTRUST BANK</b>	LIEN DATE <b>06/29/2012</b>
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VEHICLE STREET <b>120 E BALTIMORE ST 25 FL</b>	CITY <b>BALTIMORE</b>	STATE <b>MD</b>	ZIP CODE <b>21202</b>
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LIEN CODE	SECOND LIENHOLDER	LIEN DATE
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VEHICLE STREET	CITY	STATE	ZIP CODE
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VEHICLE REGISTRATION INFORMATION (OWNER OF PLATE)	LEGAL STATUS <input type="checkbox"/>	NAME CODE <input type="checkbox"/>	MAO <input type="checkbox"/>	ILU <input type="checkbox"/>
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VEHICLE NAME	NAME
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VEHICLE ADDRESS	CITY	STATE	ZIP CODE
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VEHICLE COST / TAX INFORMATION *(required for Title & Registration Transactions)
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VEHICLE PRICE	TRADE IN ALLOWANCE	TAXABLE AMOUNT	SALES TAX PAID	*TAX EXEMPTION REASON / SALES TAX #
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DEALER NAME	DEALER ADDRESS	DEALER #
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VEHICLE INFORMATION *(required for Duplicate Title - T.C.A. 55-3-115 (submit illegible or altered Certificate of Title))
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<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
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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 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 <b>09/10/2012</b>
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COUNTY NUMBER <b>12254 @</b>	COUNTY NAME <b>HAMILTON</b>	CO NUMBER <b>33</b>	DATE OF APPLICATION <b>09/10/2012</b>	BY AUTHORITY OF REGISTRAR OF MOTOR VEHICLES (COUNTY CLERK) <b>W.F. (BILL) KNOWLES</b>	<b>HJC27</b>
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VEHICLE USE ONLY REGISTRATION FEE <b>79.75</b>	CREDIT	LEASE FEE	TRANS FEE	CLERK FEE	ISSUANCE FEE <b>12.00</b>	TITLE FEE <b>5.50</b>	TOTAL TAX COLLECTED <b>.00</b>
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COMPUTATION OF 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
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VEHICLE SERVICE OPT FEE	ORGAN DONOR	POSTAGE	VER	ID / RESIDENCY VERIFICATION	*TOTAL FEES COLLECTED <b>97.25</b>
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Part: wk52/DB27/0020 Cash: 0.00 Check: 0.00 Check#: Credit: 0.00 Auth#: Change: 0.00