



TENNESSEE DEPARTMENT OF REVENUE
VEHICLE TAXPAYER SERVICES DIVISION
MULTI-PURPOSE APPLICATION

150360

City Stickers:

NEW OR CURRENT TITLE NUMBER 84173780	TRANSACTION CODE N01	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) 5		MAO <input type="checkbox"/> N	ILU <input type="checkbox"/> N
LAST NAME BOWMAN SALES AND EQUIPMENT INC	FIRST NAME BOWMAN SALES AND EQUIPMENT INC	MIDDLE INITIAL	

ADDRESS 1 (MAILING) PO BOX 433 % 10233 GOVERNOR LN BLVD	ADDRESS 2 (PHYSICAL)
CITY WILLIAMSPORT	STATE MD
ZIP CODE 21202	

TYPE OF RESIDENCE/PRINCIPAL BUS OR INCORP LOCATION HAMILTON 033	PURCHASE DATE 06/30/2011	*LEASED <input type="checkbox"/> 0 *SERVICE OPTIONS <input type="checkbox"/>	TELEPHONE # 301 582 1793	*PLACARD/HEARING IMPAIRED CLS/YR	*INSURANCE POLICY #
---	------------------------------------	---	------------------------------------	----------------------------------	---------------------

VEHICLE INFORMATION VIN 1PNV482N8MGB71572	MAKE PINE	MODEL 1PN	YEAR 1991	BODY SE	TITLE BRAND -list the appropriate code (N)NEW (1)RECONSTRUCTED VEHICLE (U)USED (2)FLOOD DAMAGE (D)DEMO (3)SPECIALLY CONSTRUCTED (8)PARTS ONLY	CODE U	TYPE OF FUEL -list the appropriate code GAS (1) ELECTRICITY/BRD (3) DIE-SEL (2) PROPANE (4)	CODE 9
--	---------------------	---------------------	---------------------	-------------------	---	------------------	---	------------------

SURRENDERED TITLE # 0925704120363	STATE WI	PREVIOUS STATES TITLED	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 WDTH	# AXLES	GROSS VEHICLE WEIGHT	*VEHICLE TRADE-IN DESCRIPTION	COMPANY VEHICLE # 150360
--	-----------------------------	---------	----------------------	-------------------------------	------------------------------------

PLATE INFORMATION *(required for Title and Registration and Registration Only Transactions) SEE REVERSE SIDE FOR COMPLETE INSTRUCTIONS							
PLATE #(1) U329087	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 DATE 06/30/2011
LIEN CODE	FIRST LIENHOLDER SUNTRUST BANK		

STREET 120 E BALTIMORE 25TH 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
ADDRESS	CITY STATE ZIP CODE

VEHICLE COST / TAX INFORMATION *(required for Title & Registration Transactions)	TAXABLE AMOUNT	SALESTAX PAID	*TAX EXEMPTION REASON / SALES TAX #
SALE PRICE	TRADE IN ALLOWANCE		
DEALER NAME	DEALER ADDRESS		DEALER #

<input type="checkbox"/> LOST	<input type="checkbox"/> STOLEN	<input type="checkbox"/> MUTILATED	<input type="checkbox"/> RT'ND 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 10/11/2011
------------------------------	---	---------------------------

INVOICE NUMBER 11284 @	COUNTY NAME HAMILTON	CO NUMBER 33	DATE OF APPLICATION 10/11/2011	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
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
*SERVICE OPT FEE	ORGAN DONOR	POSTAGE	VER	ID / RESIDENCY VERIFICATION	TOTAL TAX COLLECTED .00
					TOTAL FEES COLLECTED 97.25