93605499	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 25 CHARACTERS) [4] MAO [N] ILU [N]

LAST NAME / FIRST NAME / MIDDLE INITIAL	LAST NAME / FIRST NAME / MIDDLE INITIAL
BSE TRAILER LEASING LLC	
ADDRESS 1 (MAILING): 10233 GOVERNOR LN BLVD	ADDRESS 2 (PHYSICAL):
CITY: WILLIAMSPORT STATE: MD ZIP CODE: 21795	CITY / STATE / ZIP CODE:

CNTY OF RESIDENCE/PRINCIPAL BUS OR INCORP LOCATION	PURCHASE DATE	*LEASED [0] *SERVICE OPTIONS [ ] (SEE REVERSE SIDE FOR INSTRUCTIONS)	TELEPHONE #	*PLACARD/HEARING IMPAIRED CLS/YR	*INSURANCE POLICY #
HAMILTON 033	06/03/2014		240 772 5501		

154726

VEHICLE INFORMATION

VIN	MAKE	MODEL	YEAR	BODY	TITLE BRAND - translation	CODE	TYPE OF FUEL - translation	CODE
3H3V532C4FT154726	HYTR	3H3	2015	SE	NEW	N		9

SURRENDERED TITLE #	STATE	PREVIOUS STATES TITLED	VEHICLE USE	VEHICLE TYPE	CURRENT MILEAGE	ODOMETER INDICATOR (List one): ACTUAL (0) NOT ACTUAL (6) OVER 10 YRS / 15,000 LBS (1) IN EXCESS OF MECHANICAL LIMITS (9)	CODE
MSO	TN		F	S			1

COLOR CODE (enter appropriate code)* UPPER / LOWER	MOBILE HOME LGTH / WDTH	# AXLES	GROSS VEHICLE WEIGHT	*VEHICLE TRADE-IN DESCRIPTION	COMPANY VEHICLE #
O					154726

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

PLATE #(1)	CLASSCODE/ISSUEYR(1)(3)	VALIDATION #(1)	COUNTY STICKER #(1)	CITY STICKER #(1)(2)	*PLATE #(TRADE IN)(2)	CLASS CODE/ISSUE YR(2)	EXPIRATION DATE (1)(2)(3)
U495836	8020/1994						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
	SUNTRUST BANK	06/03/2014

STREET	CITY	STATE	ZIP CODE
120 E BALTIMORE ST 25 FL	BALTIMORE	MD	21202

LIEN CODE	SECOND LIENHOLDER	LIEN DATE

STREET	CITY	STATE	ZIP CODE

*LESSEE / REGISTRANT INFORMATION(OWNER OF PLATE) LEGAL STATUS [ ] NAME CODE [ ] MAO [ ] ILU [ ]

NAME	NAME

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)

[ ] LOST [ ] STOLEN [ ] MUTILATED [ ] RTN'D DUE TO NON DELIEVERY [ ] 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
		06/05/2014

INVOICE NUMBER	COUNTY NAME	CO NUMBER	DATE OF APPLICATION	BY AUTHORITY OF REGISTRAR OF MOTOR VEHICLES(COUNTY CLERK)
14156 @	HAMILTON	33	06/05/2014	W.F. (BILL) KNOWLES HCM27

OFFICE USE ONLY EMISSION: Trailer

(total fees collected indicated certifies this form as a valid registration)

REGISTRATION FEE	CREDIT	LEASE FEE	TRANS FEE	CLERK FEE	ISSUANCE FEE	TITLE FEE	TOTAL TAX COLLECTED
79.75					12.00	5.50	.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

55-1357 Port: wk48DR27/8020 Cash: 6.00 Check: 0.00 Check#: Credit: 5.50 Acct#: Change: 0.00