



NEW OR CURRENT TITLE NUMBER		TRANSACTION CODE		REGISTRATION ONLY NUMBER		STATE	
93605546		N01					
OWNER INFORMATION (LEGAL STATUS: 1 (AND) 2 (OR)) ENTER NAME CODE IN BOX 1 (NAME) 2 (DIFFERENT) 3 (MULTIPLE LAST NAMES) 4 (COMPANY) 6 (OVER 28 CHARACTERS)							
LAST NAME		FIRST NAME		MIDDLE INITIAL		LAST NAME	
BSE TRAILER LEASING LLC							
ADDRESS 1 (MAILING)				ADDRESS 2 (PHYSICAL)			
10233 GOVERNOR LN BLVD							
CITY		STATE		ZIP CODE		CITY	
WILLIAMSPORT		MD		21795			
CITY OF RESIDENCE (PRINCIPAL BUS OR INCORP. LOCATION)		PURCHASE DATE		*LEASED		*PLACARD/HEARING IMPAIRED CLS/YR	
HAMILTON 033		06/03/2014		0		240 772 5501	
VEHICLE INFORMATION							
VIN		MAKE		MODEL		YEAR	
3H3V532C8FT154745		HYTR		3H3		2015	
SURRENDERED TITLE #		STATE		PREVIOUS STATES TITLED		VEHICLE USE	
MSO		TN				F	
COLOR CODE (enter appropriate code)*		MOBILE HOME		# AXLES		GROSS VEHICLE WEIGHT	
O		LGTH					
		WDTH				*VEHICLE TRADE-IN DESCRIPTION	
						COMPANY VEHICLE #	
						154745	
PLATE INFORMATION (required for Title and Registration and Registration Only Transactions) SEE REVERSE SIDE FOR COMPLETE INSTRUCTIONS							
PLATE #(1)		CLASS CODE/ISSUE YR (1)(3)		VALIDATION #(1)		COUNTY STICKER #(1)	
U495855		8020/1994					
TDR STICKER #(4)		TEMP OPERATOR PERMIT #(3)		# OF SEATS (5)		ZONE (COUNTY NAME) (6)	
						USDOT / REG STRANT #(7)	
						MOTOR CARRIER #(8)	
LIEN INFORMATION (if lien present)							
LIEN CODE		FIRST LIENHOLDER					LIEN DATE
		SUNTRUST BANK					06/03/2014
STREET		CITY					STATE
120 E BALTIMORE ST 25 FL		BALTIMORE					MD
LIEN CODE		SECOND LIENHOLDER					LIEN DATE
STREET		CITY					STATE
TITLE / REGISTRATION INFORMATION (OWNER OF PLATE)							
NAME		LEGAL STATUS		NAME CODE		MAG	
						ILU	
ADDRESS		CITY		STATE		ZIP CODE	
VEHICLE COST / TAX INFORMATION (required for Title & Registration Transactions)							
SALE PRICE		TRADE IN ALLOWANCE		TAXABLE AMOUNT		SALESTAX PAID	
DEALER NAME		DEALER ADDRESS				DEALER #	
Required for Duplicate Title - 1 (C.A. 55-3-119) (submit legible or signed 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	
						06/05/2014	
INVOICE NUMBER		COUNTY NAME		CO NUMBER		DATE OF APPLICATION	
14156 @		HAMILTON		33		06/05/2014	
OFFICE USE ONLY		EMISSION: Trailer		BY AUTHORITY OF REGISTRAR OF MOTOR VEHICLES (COUNTY CLERK)		HCM27	
REGISTRATION FEE		CREDIT		LEASE FEE		ISSUANCE FEE	
79.75						12.00	
COMPUTATION OF		SALES OR USE TAX		SA TAX		LOCAL TAX	
☐ SALES TAX ☐ USE TAX						ADDITIONAL TAX	
*SERVICE OPT FEE		ORGAN DONOR		POSTAGE		VER	
						ID / RESIDENCY VERIFICATION	
						*TOTAL FEES COLLECTED	
						97.25	

SF-1357

Port: wk48/DR27/0020

Cash: 0.00

Check: 0.00

Checkd:

Credit: 0.00

Author:

Change: 0.00

RDA-692