



NEW OR CURRENT TITLE NUMBER 93605602		TRANSACTION CODE* N01		REGISTRATION ONLY NUMBER		STATE MD	
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 28 CHARACTERS) ☐ 4 ☐ N ☐ N							
LAST NAME BSE TRAILER LEASING LLC		FIRST NAME 		MIDDLE INITIAL 		LAST NAME 	
ADDRESS 1 (MAILING) 10233 GOVERNOR LN BLVD		ADDRESS 2 (PHYSICAL) 		FIRST NAME 		MIDDLE INITIAL 	
CITY WILLIAMSPORT		STATE MD		ZIP CODE 21795		CITY 	
CITY 		STATE 		ZIP CODE 		CITY 	
CITY OF RESIDENCE/PRINCIPAL BUS OR INCORP LOCATION HAMILTON 033		PURCHASE DATE 06/03/2014		*LEASED ☒ *SERVICE OPTIONS ☐ SEE REVERSE SIDE FOR INSTRUCTIONS		TELEPHONE # 240 772 5501	
				*PLACARD/HEARING IMPAIRED CLS/YR 		*INSURANCE POLICY # 	

VEHICLE INFORMATION												
VIN		MAKE	MODEL	YEAR	BODY	TITLE BRAND - translation		CODE	TYPE OF FUEL - translation		CODE	
3H3V532C3FT154779		HYTR	3H3	2015	SE	NEW		N			9	
SURRENDERED TITLE #		STATE	PREVIOUS STATES TITLED		VEHICLE USE	VEHICLE TYPE	CURRENT MILEAGE	ODOMETER ACTUAL (0) NOT ACTUAL (8) INDICATOR OVER 10 YRS / 10,000 LBS (1) (Unit one) IN EXCESS OF MECHANICAL LIMITS (9)		CODE		
MSO		TN			F	S				1		
COLOR CODE (enter appropriate code)* UPPER LOWER		MOBILE HOME LGTH WIDTH		# AXLES	GROSS VEHICLE WEIGHT		*VEHICLE TRADE-IN DESCRIPTION		COMPANY VEHICLE #			
O									154779			

PLATE INFORMATION (Plate Issued 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)	CITY STICKER # (1)(2)	*PLATE # (TRADE IN) (2)	CLASS CODE/ISSUE YR (2)	EXPIRATION DATE (1)(2)(3)
U495889	8020/1994						PERMANENT
TDR STICKER # (4)	TEMP OPERATOR PERMIT # (3)	# OF SEATS (5)	ZONE (COUNTY NAME) (6)	USDOT / REGISTRANT # (7)	MOTOR CARRIER # (8)		

LIEB INFORMATION (if applicable)			
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

LESSOR / REGISTRANT INFORMATION (OWNER OF PLATE)		LEGAL STATUS	NAME	MAC	ICU
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 #

☐ LOST	☐ STOLEN	☐ MUTILATED	☐ RTN'D DUE TO NON DELIEVERY	☐ ALTERED	☐ ILLEGIBLE
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Under penalties of perjury, I hereby certify that the 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
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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 OR USE TAX	SA TAX	LOCAL TAX	ADDITIONAL TAX	COLLECTED IN STATE OF	COUNTY WHEEL TAX	CITY STICKER FEE	
☐ SALES TAX ☐ USE TAX								
*SERVICE OPT FEE	ORGAN DONOR	POSTAGE	VER	ID / RESIDENCY VERIFICATION	*TOTAL FEES COLLECTED			
					97.25			