



STATE

City Stickers:

NEW OR CURRENT TITLE NUMBER 93617017			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 NAME(S) COMPANY (OVER 23 CHARACTERS) <input type="checkbox"/> MAO N <input type="checkbox"/> N						
LAST NAME BSE TRAILER LEASING LLC			FIRST NAME	MIDDLE INITIAL	LAST NAME	FIRST NAME
ADDRESS 1 (MAILING) 10233 GOVERNOR LN BLVD			ADDRESS 2 (PHYSICAL)			
CITY WILLIAMSPORT		STATE MD	ZIP CODE 21795	CITY		STATE ZIP CODE
CITY OF RESIDENCE/PRINCIPAL BUS OR INCORP LOCATION HAMILTON 033		PURCHASE DATE 07/14/2014	*LEASED <input type="checkbox"/> *SERVICE OPTIONS <input type="checkbox"/> SEE REVERSE SIDE FOR INSTRUCTIONS		TELEPHONE # 301 582 1793	*PLACARD/HEARING IMPAIRED CLS/VR *INSURANCE POLICY #

VEHICLE INFORMATION		VIN 3H3V532C9FT154964	MAKE HYTR	MODEL 3H3	YEAR 2015	BODY SE	TITLE BRAND - translation NEW		CODE N	TYPE OF FUEL - translation	CODE 9
SURRENDERED TITLE # MSO		STATE TN	PREVIOUS STATES TITLED			VEHICLE USE F	VEHICLE TYPE S	CURRENT MILEAGE	ODOMETER ACTUAL (0) NOT ACTUAL (8) INDICATOR OVER 10 YRS / 18,000 LBS (1) (List one) IN EXCESS OF MECHANICAL LIMITS (9)		CODE 1
COLOR CODE (enter appropriate code)* UPPER O	LOWER LGTH	MOBILE HOME WDTH	# AXLES	GROSS VEHICLE WEIGHT			*VEHICLE TRADE-IN DESCRIPTION			COMPANY VEHICLE #	

PLATE INFORMATION		CLASS CODE/ISSUE YR(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)
TDR STICKER #(4)	TEMP OPERATOR PERMIT #(3)	# OF SEATS(5)	ZONE(COUNTY NAME)(6)			USDOT / REGISTRANT #(7)	PERMANENT		MOTOR CARRIER #(8)

LIEN INFORMATION		LIEN CODE SUNTRUST BANK		FIRST LIENHOLDER			LIEN DATE 07/14/2014	
STREET 120 E BALTIMORE ST 25 FL		CITY		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"/> N <input type="checkbox"/>
NAME		NAME	
ADDRESS		CITY	
STATE		ZIP CODE	

VEHICLE COST / TAX INFORMATION		SALE PRICE		TRADE IN ALLOWANCE	TAXABLE AMOUNT	SALESTAX PAID	*TAX EXEMPTION REASON / SALES TAX #
DEALER NAME				DEALER ADDRESS			DEALER #

Required for Duplicate Title - TCA 55-115 (except for vehicles registered before 1/1/90)											
<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						

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 assigns 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 07/17/2014
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INVOICE NUMBER 14198 @		COUNTY NAME HAMILTON		CO NUMBER 33	DATE OF APPLICATION 07/17/2014	BY AUTHORITY OF REGISTRAR OF MOTOR VEHICLES(COUNTY CLERK) W.F. (BILL) KNOWLES KAR46		
(total fees collected indicated certifies this form as a valid registration)								
OFFICE USE ONLY REGISTRATION FEE 79.75	CREDIT	LEASE FEE	TRANS FEE	CLERK FEE	ISSUANCE FEE 12.00	TITLE FEE 5.50	TOTAL TAX COLLECTED .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	COUNTY WHEEL TAX	CITY STICKER FEE	
*SERVICE OPT FEE	ORGAN DONOR	POSTAGE	VER	ID / RESIDENCY VERIFICATION			*TOTAL FEES COLLECTED 97.25	