



OFFICIAL VEHICLE REGISTRATION

Stickers:

VEHICLE OR CURRENT TITLE NUMBER	TRANSACTION CODE	REGISTRATION ONLY NUMBER
1441552	001	

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) ☒		MAO ☒ ILU ☒
OWNER NAME	FIRST NAME	MIDDLE INITIAL
BOWMAN TRAILER LEASING LLC		
ADDRESS 1 (MAILING)		ADDRESS 2 (PHYSICAL)
PO BOX 433 % 10233 GOVERNOR LN BLVD		
CITY	STATE	ZIP CODE
WILLIAMSPORT	MD	21795
DATE OF RESIDENCE/PRINCIPAL BUS OR INCORP LOCATION	PURCHASE DATE	TELEPHONE #
MILSON 095	11/19/2012	301 582 1793
*LEASED ☒ *SERVICE OPTIONS ☐		*PLACARD/HEARING IMPAIRED CLS/YR
SEE REVERSE SIDE FOR INSTRUCTIONS		*INSURANCE POLICY #

VEHICLE INFORMATION	MAKE	MODEL	YEAR	BODY	TITLE BRAND - translation	CODE	TYPE OF FUEL - translation	CODE
11RV48246JS200446	RDRL	RCT	1988	SE	USED	U		9
REGISTERED TITLE #	STATE	PREVIOUS STATES TITLED	VEHICLE USE	VEHICLE TYPE	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
11918723	ME		F	S				1
VEHICLE OR CODE (enter appropriate code)* *VEHICLE LOWER	MOBILE HOME LGTH	WIDTH	# AXLES	GROSS VEHICLE WEIGHT	*VEHICLE TRADE-IN DESCRIPTION	COMPANY VEHICLE #		
5						1687 RT		

VEHICLE INFORMATION *(required for Title and Registration and Registration Only Transactions) SEE REVERSE SIDE FOR COMPLETE INSTRUCTIONS							
STATE # (1)	CLASSCODE/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)
J409401	8020/1994						PERMANENT
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	11/19/2012	
REET	CITY	STATE	ZIP CODE
120 E BALTIMORE ST 25 FL	BALTIMORE	MD	21202
LIEN CODE	SECOND LIENHOLDER	LIEN DATE	
REET	CITY	STATE	ZIP CODE

SSEE / REGISTRANT INFORMATION (OWNER OF PLATE)		LEGAL STATUS ☐	NAME CODE ☐	MAO ☐	ILU ☐
ME		NAME			
ADDRESS		CITY	STATE	ZIP CODE	

VEHICLE COST / TAX INFORMATION *(required for Title & Registration Transactions)				
VEHICLE 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 DELIVERY	☐ ALTERED
☐ ILLEGIBLE				

I, the undersigned, 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 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
	W.F. Knowles	01/15/2013

OFFICE NUMBER	COUNTY NAME	CO NUMBER	DATE OF APPLICATION	BY AUTHORITY OF REGISTRAR OF MOTOR VEHICLES (COUNTY CLERK)		
13015 @	HAMILTON	33	01/15/2013	W.F. (BILL) KNOWLES HJC27		
EMISSION: Trailer						
(total fees collected indicated certifies this form as a valid registration)						
REGISTRATION FEE	CREDIT	LEASE FEE	TRANS FEE	ISSUANCE FEE	TITLE FEE	TOTAL TAX COLLECTED
79.75				12.00	5.50	.00
SALES TAX		SA TAX	LOCAL TAX	ADDITIONAL TAX	COLLECTED IN STATE OF	COUNTY WHEEL TAX
SALES TAX						
SERVICE OPT FEE		ORGAN DONOR	POSTAGE	VER	ID / RESIDENCY VERIFICATION	*TOTAL FEES COLLECTED
						97.25