

RO NUMBER

5012033

NEW OR CURRENT TITLE NUMBER

67345074

CLASS CODE / ISSUE YEAR

8020/1994

LICENSE NO.

T652999 *0

VALIDATION NO.

1900 RT

MAKE

STRU 1981S1

YEAR

MODEL

BODY

COLOR

SE 0 0

NEW USED FORMER TITLE NO.

STATE

DATE PURCHASED

LICENSE NO. / CLASS CODE / ISSUE YEAR / TRADE IN

11/17/2003

LAST NAME

FIRST NAME

MIDDLE INITIAL

PREVIOUS STATES TITLED

LAST NAME

FIRST NAME

MIDDLE INITIAL

AXLES

MOBILE HOME

LGTH.

WDTH

STREET ADDRESS OR R.F.D.

1395 SPIELMAN RD
PO BOX 4331. GAS
2. DIESEL
3. ELECTRIC
4. PROPANE

'LEASE

MAIL

CITY

ZIP CODE

COMPANY VEHICLE NO.

1ST LIENHOLDER

KIND

DATE

STREET ADDRESS

CITY

STATE

ZIP CODE

2ND LIENHOLDER

KIND

DATE

STREET ADDRESS

CITY

STATE

ZIP CODE

REGISTERED WT.

WT. CLASS SEATS

ODOMETER

LICENSE FEE

PRINCIPAL DRIVERS LICENSE NO.

TOTAL SALES OR USE TAX PAID ON VEHICLE

CREDIT

SUBTOTAL

COST OF VEHICLE

COMPUTATION OF

 SALES TAX USE TAX

TAXES PAID

PENALTY

Sales or Use Tax (State Rate)

LEASE FEE

TRADE-IN ALLOWANCE

Local Rate (Subject to Maximum)

TRANSACTION

Subtotal

TOTAL REGISTRATION

TAXABLE AMOUNT

Credit Sales or Use Tax Paid in State of

Tax Due

TITLE FEE

I certify the information given is correct and there are no liens against the vehicle except those identified:

SUBTOTAL

SALES TAX

Signature of Owner

Owner Phone Number

ISSUANCE FEE

DATE OF APPLI-CATION

1/22/2004

COUNTY CLERK

BILL COVINGTON

REG. CTY.

COUNTY FEE

OD

BY AUTHORITY OF REGISTRAR OF MOTOR VEHICLES

COUNTY STICKER NO.

TOTAL

NO CHARGE

I CERTIFY THAT I AM A RESIDENT OF:

OUT OF STATE

COUNTY, (99)

33508242



TENNESSEE DEPARTMENT OF SAFETY

REGISTRATION EXPIRES

APPLICATION FOR
CERTIFICATE OF
TITLE
AND REGISTRATION

PERM

INVOICE NO.

42-20040122

TRANS
TYPE

17

VIN

1S12E8483KD322131

NEW	USED	FORMER TITLE NO.	STATE	DATE PURCHASED	LICENSE NO. / CLASS CODE / ISSUE YEAR / TRADE IN
				11/17/2003	
LAST NAME			FIRST NAME		MIDDLE INITIAL
4 BOWMAN SALES AND EQUIPMENT					
LAST NAME			FIRST NAME		MIDDLE INITIAL
STREET ADDRESS OR R.F.D.			CITY		STATE
1395 SPIELMAN RD PO BOX 433			TN 37195		
1ST LIENHOLDER			KIND		DATE
STREET ADDRESS			CITY		STATE
2ND LIENHOLDER			KIND		DATE
STREET ADDRESS			CITY		STATE
REGISTERED WT.	WT. CLASS SEATS	ODOMETER		LICENSE FEE	
PRINCIPAL DRIVERS LICENSE NO.		TOTAL SALES OR USE TAX PAID ON VEHICLE		CREDIT	
				SUBTOTAL	
COST OF VEHICLE	COMPUTATION OF		TAXES PAID		PENALTY
	<input type="checkbox"/> SALES TAX <input type="checkbox"/> USE TAX				
	Sales or Use Tax (State Rate)				LEASE FEE
TRADE-IN ALLOWANCE	Local Rate (Subject to Maximum)				TRANSACTION
	Subtotal				TOTAL REGISTRATION
TAXABLE AMOUNT	Credit Sales or Use Tax Paid in State of				TITLE FEE
	Tax Due				
I certify the information given is correct and there are no liens against the vehicle except those identified:					SUBTOTAL
					SALES TAX
Signature of Owner					ISSUANCE FEE
Owner Phone Number					COUNTY FEE
DATE OF APPLI-CATION	1/22/2004	COUNTY CLERK	BILL COVINGTON	REG. CTY.	OD
BY AUTHORITY OF REGISTRAR OF MOTOR VEHICLES					
COUNTY STICKER NO.					TOTAL
					NO CHARGE

OUT OF STATE

99

33508242

