



# OFFICIAL VEHICLE REGISTRATION

291153

**City Stickers:**  
 NEW OR CURRENT TITLE NUMBER: **31441746** TRANSACTION CODE: **N01** REGISTRATION ONLY NUMBER: \_\_\_\_\_

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** MAO  ILU   
 FIRST NAME: **BOWMAN TRAILER LEASING LLC** LAST NAME: \_\_\_\_\_

ADDRESS 1 (MAILING): **PO BOX 433 % 10233 GOVERNOR LN BLVD** ADDRESS 2 (PHYSICAL): \_\_\_\_\_  
 CITY: **MILLIAMSPORT MD 21795** STATE: **MD** ZIP CODE: **21795**

TELEPHONE #: **301 582 1793** \*PLACARD/HEARING IMPAIRED CLS/YR: \_\_\_\_\_ \*INSURANCE POLICY #: \_\_\_\_\_  
 PURCHASE DATE: **11/19/2012** \*LEASED  \*SERVICE OPTIONS

VEHICLE INFORMATION  
 VIN: **IS12E9535TE413390** MAKE: **STR** MODEL: **1S1** YEAR: **1996** BODY: **SE** TITLE BRAND - translation: **USED** CODE: **U** TYPE OF FUEL - translation: \_\_\_\_\_ CODE: **9**

PREVIOUS STATES TITLED: \_\_\_\_\_ VEHICLE USE: **F** VEHICLE TYPE: **S** CURRENT MILEAGE: \_\_\_\_\_  
 ODOMETER ACTUAL (0) NOT ACTUAL (8) INDICATOR OVER 10 YRS / 16,000 LBS (1) IN EXCESS OF MECHANICAL LIMITS (9): \_\_\_\_\_ CODE: **1**  
 GROSS VEHICLE WEIGHT: \_\_\_\_\_ \*VEHICLE TRADE-IN DESCRIPTION: \_\_\_\_\_ COMPANY VEHICLE #: **271153**

PLATE INFORMATION \*(required for Title and Registration and Registration Only Transactions) SEE REVERSE SIDE FOR COMPLETE INSTRUCTIONS  
 CLASS CODE/ISSUE YR(1)(3): **J409433 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): **PERMANENT**

LIEN INFORMATION (If lien present)  
 FIRST LIENHOLDER: **SUNTRUST BANK** LIEN DATE: **11/19/2012**

ADDRESS: **120 E BALTIMORE ST 25 FL** CITY: **BALTIMORE** STATE: **MD** ZIP CODE: **21202**

REGISTRANT INFORMATION (OWNER OF PLATE)  
 LEGAL STATUS:  NAME CODE:  MAO:  ILU:   
 NAME: \_\_\_\_\_ ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

VEHICLE COST / TAX INFORMATION \*(required for Title & Registration Transactions)  
 SALE PRICE: \_\_\_\_\_ TRADE IN ALLOWANCE: \_\_\_\_\_ TAXABLE AMOUNT: \_\_\_\_\_ SALES TAX 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 DELIEVERY  ALTERED  ILLEGIBLE

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's assignment 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: **01/15/2013**

OFFICE NUMBER: **13015 @** COUNTY NAME: **HAMILTON** CO NUMBER: **33** DATE OF APPLICATION: **01/15/2013** BY AUTHORITY OF REGISTRAR OF MOTOR VEHICLES(COUNTY CLERK): **W.F. (BILL) KNOWLES HJC27**

REGISTRATION FEE: **79.75** EMISSION: **Trailer** (total fees collected indicated certifies this form as a valid registration)  
 CREDIT: \_\_\_\_\_ LEASE FEE: \_\_\_\_\_ TRANS FEE: \_\_\_\_\_ CLERK FEE: \_\_\_\_\_ ISSUANCE FEE: **12.00** TITLE FEE: **5.50** TOTAL TAX COLLECTED: **.00**  
 SALES 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**