

TENNESSEE DEPARTMENT OF REVENUE VEHICLE TAXPAYER SERVICES DIVISION MULTI-PURPOSE APPLICATION

**OFFICIAL VEHICLE REGISTRATION** 



Change: 0.00

P.DA-692

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NEW OR CURRENT TITLE NUMBER 92791763			ষ্ট	ANSACTION DODE	REGISTR	ATION ONLY NUMBE	iR .				
	П			N01				FRED [4]	N III		
OWNER INFORMATION "LEGAL STATUS: 1 (AND LAST NAME	2 (OR) L. LENTI FIRST NAME	ER NAME CODE	E IN BOX 1 (SAM) MIDDLE INITIAL		IT) 3(MULTIPLE LAST LAST NAME	NAMES) 4(COMPAN	Y) 5(OVER 28 CHARACT FIRST NAME	ERS) 🗀	MAO ILU MIDDLE INITIAL	<u> </u>	
BOWMAN TRAILER LEASING LLC											
ADDRESS 1 (MAILING) 10233 GOVERNOR LN BLVD					ADDRESS 2 (PHYSICAL)						
CITY STATE		ATE	ZIP CODE		CITY		ST	ATE	ZIP CODE	{	
WILLIAMSPORT MD		MD	21795								
CHTY OF RESIDENCE/PRINCIPAL BUS OR INCORP LOCATION	PURCHASE DAT	-1 54	ASED 0 -SER	VICE OPTIONS	TELEPHONE	·	CARD/HEARING IMPAIR	ED CLS/YR 1	INSURANCE POLICY#	1	
HAMILTON 033 VEHICLE INFORMATION	10/01/2		E REVERSE SIDE FOR		301 5	82 1793					
VEHICLE INFORMATION VIN	MAKE	MODEL	YEAR	BODY	TITLE BRAND - trans	slation	CODE	TYPE OF FUEL -	translation	CODE	
1JJV532W0XL469969	WABA	A 1JJ	1999	SE	USED		U			9	
SURRENDERED TITLE #	STATE P	PREVIOUS STAT	ES TITLED	VEHICLE US	E VEHICLE TYPE	CURRENT MILE	AGE ODOMETER	ACTUAL (0) NOT / OVER 10 YR8 / 16,0	ACTUAL (8) 000 LBS (1) HANICAL LIMITS (9)	CODE	
T9041801015	IL			F	S					1	
COLOR CODE (enter appropriate code)* UPPER LOWER  LOWER  MOBILE LGTH	#AXL	KLES GROSS VEHICLE WEIGHT "VEHICLE TRAD				IN DESCRIPTION	CO	MPANY VEHICLE # 343	14		
PLATE INFORMATION *(required for Tifle and Red	tration and Regist	tration Only Trans	sections) SEE RE	VERSE SIDE F	OR COMPLETE INSTR	RUCTIONS			040	,,,,	
PLATE #(1) CLASSCODE/ISSUEYR	(1)(3) VALIDAT		COUNTY STICK			PLATE #(TRADE IN)(	2) CLASS CODE/IS	SSUE YR(2)	EXPIRATION DATE (1		
U478317 8020/19 TDR STICKER #(4) TEMP OPERATOR I		# OF SEATS(5	5) ZONE(CO	UNTY NAME)(	n lus	DOT / REGISTRANT	<b>9</b> (7)	MOTOR	PERMAI  CARRIER #(8)	NENI	
,,				<b>/</b>	,		•••				
LIEN INFORMATION (Hillen present)					1						
LIEN CODE FIRST LIENHOLDER  CLINTDLICT E							10/04				
SUNTRUST BANK STREET				СІТУ				10/01/2013   STATE   ZIP CODE			
120 E BALTIMORE	ST 25 FL				BALTIM	ORE		MD	21202 LIEN DATE		
									J LICH DATE	E	
									LEN DATE	<b>E</b>	
STREET					CITY		STAT	E	ZIP CODE	Ē	
						ं न ः	STAT	E			
	OF PLATE)	LEGA	LI STATUS	NAME C		AO LILU Z	STAT	E			
*LESSEE / REGISTRANT INFORMATION(OWNER	OF PLATE)	LEGA	IL STATUS	NAME C	ODE M	AO ILU Z	STAT	Salar Sa			
*LESSEE / REGISTRANT INFORMATION(OWNER NAME	OF PLATE)	LEGA	L STATUS	NAMEC	ODE M	AO I ILU		Salar Sa	ZIP CODE		
*LESSEE / REGISTRANT INFORMATION(OWNER NAME  ADDRESS  VEHICLE COST / TAX INFORMATION (URQUITED IN				NAMEC	ODE M	NO ILU SALESTAX PAID		TE	ZIP CODE		
*LESSEE / REGISTRANT INFORMATION(OWNER NAME  ADDRESS  VEHICLE COST / TAX INFORMATION (URQUITED IN	Title & Registratio	on Transactions)	TAXAI	NAME C	ODE M			TE TAX EXEMPTION	ZIP CODE		
*LESSEE / REGISTRANT INFORMATION(OWNER NAME  ADDRESS  VEHICLE COST / TAX INFORMATION (Unquitted to SALE PRICE)  TRADE IN A	Title & Registratio	on Transactions)		NAME C	ODE M		STA	TE TAX EXEMPTION	ZIP CODE  ZIP CODE  DN REASON / SALES T	AX#	
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**LESSEE / REGISTRANT INFORMATION OWNER NAME  ADDRESS  VEHICLE COST / TAX INFORMATION **Crequited for SALE PRICE**  DEALER NAME  **Recurred for Dupiticate Title - T.C.A. 55-3-115 (subtract for Bupiticate Title - T.C.A. 55-3-115 (subt	it lites & Registration LLOWANCE	on Transactions)  DE/ ad Certificate of 1  MUTILAT  Be and correct to by me or on my be	TAXAI  ALER ADDRESS  Title)  TED  Line best of my known of articles  POWER OF ATTI  CO NUMBER  33	RTN DATE OF APF	NAME NAME TO DUE TO NON DELIE ROWLED SIGNATURE(I	SALESTAX PAID  EVERY  Ithe responsibility of the responsibility of	ALTERED TO Motor Vehicle Division OF REGISTRAR OF MOTO L) KNOWLES The dindicated certifies the	TE  TAX EXEMPTION  DE  DATE  DATE  DR VEHICLES(CC)	ZIP CODE  ZIP CODE  ZIP CODE  ALER \$  (LLEGIBLE  12/04/2013  DUNTY CLERK)  HO  (registration)	AX#	
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**LESSEE / REGISTRANT INFORMATION OWNER NAME  ADDRESS  VEHICLE COST / TAX INFORMATION **Cregulted for SALE PRICE**  DEALER NAME  **Regulard for Displicate Title - T.C.A. 55-3-115 (subsport of the satisfaces to betermine the accuracy of the info SIGNATURE OF CERTIFIER/OWNER  INVOICE NUMBER COUNTY NAME  13338	it lifegible or affers  it lifegible or affers  it lifegible or affers  N  Con provided is trumation provided by  Trailer  LEAS	on Transactions)  DE/ ad Certificate of 1  MUTILAT  Be and correct to by me or on my be	TAXAI  ALER ADDRESS  Title)  TED  Line best of my knochair.  POWER OF ATTI  CO NUMBER  33	RTN DATE OF APF	NAME  TO DUE TO NON DELIE  TO	SALESTAX PAID  EVERY  The responsibility of	ALTERED TO Motor Vehicle Division THE REGISTRAR OF MOTO  L) KNOWLES To didicated certifies the	DATE DATE DATE DRIVENIGLES(CC) DATE TOTAL TA .00	ZIP CODE  ZIP CODE  ZIP CODE  ALER \$  (LLEGIBLE  12/04/2013  DUNTY CLERK)  HO  (registration)	AX#	

Port: wk48/DR27/8020

SF-1357

Cash: 0.00

Check: 0.00

Check#:

Credit: 0.00

Auth#: