



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



City Stickers:

NEW OR CURRENT TITLE NUMBER 84175657	TRANSACTION CODE* 004	REGISTRATION ONLY NUMBER 3354043	STATE
--	---------------------------------	--	-------

OWNER INFORMATION *LEGAL STATUS: 1 (AND) 2 (OR) <input type="checkbox"/> ENTER NAME CODE IN BOX 1 (SAME) 2(DIFFERENT) 3(MULTIPLE LAST NAMES) 4(COMPANY) 5(OVER 28 CHARACTERS) 5			MAO <input checked="" type="checkbox"/> N	ILU <input checked="" type="checkbox"/> N
LAST NAME BOWMAN SALES AND EQUIPMENT INC		FIRST NAME	MIDDLE INITIAL	
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 06/30/2011	*LEASED <input checked="" type="checkbox"/> 0 *SERVICE OPTIONS <input type="checkbox"/> <small>SEE REVERSE SIDE FOR INSTRUCTIONS</small>	TELEPHONE # 301 582 1793	*PLACARD/HEARING IMPAIRED CLS/YR *INSURANCE POLICY #

369888

VEHICLE INFORMATION										
VIN 1PT01JAH3W6009062	MAKE TRIM	MODEL 1PT	YEAR 1998	BODY SE	TITLE BRAND - translation USED	CODE U	TYPE OF FUEL - translation	CODE 9		
SURRENDERED TITLE #	STATE TN	PREVIOUS STATES TITLED TN	VEHICLE USE F	VEHICLE TYPE S	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 1			
COLOR CODE (enter appropriate code)* UPPER O	MOBILE HOME LGTH	WIDTH	# AXLES	GROSS VEHICLE WEIGHT	*VEHICLE TRADE-IN DESCRIPTION	COMPANY VEHICLE # 369888				

PLATE INFORMATION *(required for Title and Registration and Registration Only Transactions) SEE REVERSE SIDE FOR COMPLETE INSTRUCTIONS							
PLATE # (1) U588228	CLASSCODE/ISSUEYR(1)(3) 8020/1994	VALIDATION # (1)	COUNTY STICKER # (1)	CITY STICKER # (1)(2)	*PLATE # (TRADE IN)(2) U328381	CLASS CODE/ISSUE YR(2) 8020 1994	EXPIRATION DATE (1)(2)(3) PERMANENT
TDR 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
STREET	CITY	STATE	ZIP CODE
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"/>	ILU <input type="checkbox"/>
NAME		NAME		
ADDRESS	CITY	STATE	ZIP CODE	

VEHICLE COST / TAX INFORMATION *(required for Title & Registration Transactions)				
SALE 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)				
<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 assignees 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 04/29/2015
------------------------------	--	---------------------------

INVOICE NUMBER 15119 @	COUNTY NAME HAMILTON	CO NUMBER 33	DATE OF APPLICATION 04/29/2015	BY AUTHORITY OF REGISTRAR OF MOTOR VEHICLES (COUNTY CLERK) W.F. (BILL) KNOWLES	HCM27
OFFICE USE ONLY REGISTRATION FEE					
EMISSION: NOT APPLICABLE (total fees collected indicated certifies this form as a valid registration)					
CREDIT	LEASE FEE	TRANS FEE 11.75	CLERK FEE	ISSUANCE FEE 2.50	TITLE FEE
SALES OR USE TAX			SA TAX	LOCAL TAX	ADDITIONAL TAX
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
*SERVICE OPT FEE	ORGAN DONOR	POSTAGE	VER	ID / RESIDENCY VERIFICATION	*TOTAL FEES COLLECTED 14.25
					TOTAL TAX COLLECTED .00
					CITY STICKER FEE
					CITY STICKER FEE