



# OFFICIAL VEHICLE REGISTRATION

387786

**City Stickers:**

NEW OR CURRENT TITLE NUMBER <b>84176336</b>	TRANSACTION CODE <b>001</b>	REGISTRATION ONLY NUMBER
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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 29 CHARACTERS) <b>5</b> MAO <input checked="" type="checkbox"/> ILU <input checked="" type="checkbox"/>	
ST NAME <b>BOWMAN SALES AND EQUIPMENT INC</b>	LAST NAME FIRST NAME MIDDLE INITIAL
ADDRESS 1 (MAILING) <b>PO BOX 433 % 10233 GOVENOR LN BLVD</b>	ADDRESS 2 (PHYSICAL)
CITY STATE ZIP CODE <b>WILLIAMSPORT MD 21795</b>	CITY STATE ZIP CODE
TYPE OF RESIDENCE/PRINCIPAL BUS OR INCORP LOCATION <b>HAMILTON 033</b>	PURCHASE DATE <b>06/30/2011</b>
*LEASED <input type="checkbox"/> *SERVICE OPTIONS <input type="checkbox"/> SEE REVERSE SIDE FOR INSTRUCTIONS	TELEPHONE # <b>301 582 1793</b>
*PLACARD/HEARING IMPAIRED CLS/YR *INSURANCE POLICY #	

VEHICLE INFORMATION	MAKE <b>FRUE</b>	MODEL <b>FBH</b>	YEAR <b>1998</b>	BODY <b>SE</b>	TITLE BRAND - list the appropriate code (N)NEW (1)RECONSTRUCTED VEHICLE (U)USED (2)FLOOD DAMAGE (D)DEMO (3)SPECIALLY CONSTRUCTED (B)PARTS ONLY	CODE <b>U</b>	TYPE OF FUEL - list the appropriate code GAS (1) ELECTRIC/HYBRID (3) DIESEL (2) PROPANE (4)	CODE <b>9</b>
PREVIOUS TITLE # <b>55997572</b>	STATE <b>TN</b>	PREVIOUS STATES TITLED	VEHICLE USE <b>F</b>	VEHICLE TYPE <b>S</b>	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 <b>1</b>	
FLOR CODE (enter appropriate code)* *PER LOWER <b>0</b>	MOBILE HOME LGTH WIDTH	# OF AXLES	GROSS VEHICLE WEIGHT	*VEHICLE TRADE-IN DESCRIPTION		COMPANY VEHICLE # <b>387786</b>		

PLATE INFORMATION *(required for Title and Registration and Registration Only Transactions) SEE REVERSE SIDE FOR COMPLETE INSTRUCTIONS							
PLATE # (1) <b>U328553</b>	CLASSCODE/ISSUEYR(1)(3) <b>8020/1994</b>	VALIDATION # (1)	COUNTY STICKER # (1)	CITY STICKER # (1)(2)	*PLATE # (TRADE IN)(2)	CLASS CODE/ISSUE YR(2)	EXPIRATION DATE (1)(2)(3) <b>PERMANENT</b>
DR 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 DATE <b>06/30/2011</b>
LIEN CODE <b>0</b>	FIRST LIENHOLDER <b>SUNTRUST BANK</b>	
STREET <b>120 E BALTIMORE 25TH FL</b>	CITY <b>BALTIMORE</b>	STATE ZIP CODE <b>MD 21202</b>
LIEN CODE <b>0</b>	SECOND LIENHOLDER	LIEN DATE
STREET	CITY	STATE ZIP CODE

ESSEE / REGISTRANT INFORMATION (OWNER OF PLATE)	LEGAL STATUS <input type="checkbox"/>	NAME CODE <input type="checkbox"/>	MAO <input type="checkbox"/>	ILU <input type="checkbox"/>
NAME	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 #

<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
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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.		POWER OF ATTORNEY/AUTHORIZED SIGNATURE(IF APPLICABLE)	DATE <b>10/19/2011</b>
SIGNATURE OF CERTIFIER/OWNER			

VOICE NUMBER <b>11292 @</b>	COUNTY NAME <b>HAMILTON</b>	CO NUMBER <b>33</b>	DATE OF APPLICATION <b>10/19/2011</b>	BY AUTHORITY OF REGISTRAR OF MOTOR VEHICLES(COUNTY CLERK) <b>W.F. (BILL) KNOWLES</b>	<b>HJC27</b>
*OFFICE USE ONLY EMISSION: Trailer (total fees collected indicated certifies this form as a valid registration)					
REGISTRATION FEE <b>79.75</b>	CREDIT	LEASE FEE	TRANS FEE	CLERK FEE	ISSUANCE FEE <b>12.00</b>
COMPUTATION OF	SALES OR USE TAX	SA TAX	LOCAL TAX	ADDITIONAL TAX	COLLECTED IN STATE OF
<input type="checkbox"/> SALES TAX <input type="checkbox"/> USE TAX	POSTAGE		VER	ID / RESIDENCY VERIFICATION	TOTAL TAX COLLECTED <b>.00</b>
SERVICE OPT FEE	ORGAN DONOR	TOTAL FEES COLLECTED <b>97.25</b>			