



OFFICIAL VEHICLE REGISTRATION

City Stickers:

399498

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| WORK OR CURRENT TITLE NUMBER 30482228 | TRANSACTION CODE 001 | 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 28 CHARACTERS) <input checked="" type="checkbox"/> 4 MAO <input checked="" type="checkbox"/> ILU <input checked="" type="checkbox"/> | | | | | |
| ST NAME 30WMAN TRAILER LEASING LLC | FIRST NAME 30WMAN TRAILER LEASING LLC | MIDDLE INITIAL | LAST NAME 30WMAN TRAILER LEASING LLC | FIRST NAME | MIDDLE INITIAL |

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| ADDRESS 1 (MAILING) 10233 GOVERNOR LN BLVD | ADDRESS 2 (PHYSICAL) | |
| CITY WILLIAMSPORT | STATE MD | ZIP CODE 21795 |

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| HOME ADDRESS (RESIDENCE/PRINCIPAL BUS OR INCORP LOCATION) HAMILTON 033 | PURCHASE DATE 06/29/2012 | *LEASED <input type="checkbox"/> *SERVICE OPTIONS <input type="checkbox"/> SEE REVERSE SIDE FOR INSTRUCTIONS | TELEPHONE # 301 582 1793 | *PLACARD/HEARING IMPAIRED CLS/YR | *INSURANCE POLICY # |
|--|------------------------------------|---|------------------------------------|----------------------------------|---------------------|

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| VEHICLE INFORMATION | | | | | | | | | | |
| VIN 1JJV532F3XF547062 | MAKE FRUE | MODEL FBH | YEAR 1999 | BODY SE | TITLE BRAND - translation | CODE U | TYPE OF FUEL - translation | CODE 9 | | |

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|--|--------------------------|------------------------|-------------------------|-------------------------------|-----------------|---|------------------|
| PREVIOUS TITLED 56711747 | STATE TN | 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) (List one) IN EXCESS OF MECHANICAL LIMITS (9) | CODE 1 |
| VEHICLE OR CODE (enter appropriate code) *LOWER 3 | MOBILE HOME LGTH WDTH | # OF AXLES | GROSS VEHICLE WEIGHT | *VEHICLE TRADE-IN DESCRIPTION | | COMPANY VEHICLE # 399498 | |

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| TITLE INFORMATION *(required for Title and Registration and Registration Only Transactions) SEE REVERSE SIDE FOR COMPLETE INSTRUCTIONS | | | | | | | |
| TITLE # (1) J381765 | CLASSCODE/ISSUEYR(1)(3) 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 |
| STICKER # (4) | TEMP OPERATOR PERMIT # (3) | # OF SEATS (5) | ZONE (COUNTY NAME) (6) | USDOT / REGISTRANT # (7) | MOTOR CARRIER # (8) | | |

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| LIEN INFORMATION (if lien present) | | | | |
| LIEN CODE | FIRST LIENHOLDER SUNTRUST BANK | LIEN DATE 06/29/2012 | | |
| REET | ADDRESS 120 E BALTIMORE ST 25 FL | CITY BALTIMORE | STATE MD | ZIP CODE 21202 |
| LIEN CODE | SECOND LIENHOLDER | LIEN DATE | | |
| REET | CITY | STATE | ZIP CODE | |

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|--|---------------------------------------|------------------------------------|------------------------------|------------------------------|
| REGISTRANT / 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 |

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| VEHICLE COST / TAX INFORMATION *(required for Title & Registration Transactions) | | | | |
| NET PRICE | TRADE IN ALLOWANCE | TAXABLE AMOUNT | SALES TAX PAID | *TAX EXEMPTION REASON / SALES TAX # |
| DEALER NAME | DEALER ADDRESS | | DEALER # | |

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|---|---------------------------------|------------------------------------|--|----------------------------------|------------------------------------|
| Title Information (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 |

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| I hereby certify that the 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 to determine the accuracy of the information provided by me or on my behalf. | |
| NATURE OF CERTIFIER/OWNER | POWER OF ATTORNEY/AUTHORIZED SIGNATURE (IF APPLICABLE) |
| | DATE 09/05/2012 |

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|--|--------------------------------|------------------------|--|--|--------------------------------------|
| COUNTY NUMBER 12249 @ | COUNTY NAME HAMILTON | CO NUMBER 33 | DATE OF APPLICATION 09/05/2012 | BY AUTHORITY OF REGISTRAR OF MOTOR VEHICLES (COUNTY CLERK) W.F. (BILL) KNOWLES | HJC27 |
| VEHICLE USE ONLY *EMISSION: Trailer (total fees collected indicated certifies this form as a valid registration) | | | | | |
| REGISTRATION FEE 79.75 | CREDIT | LEASE FEE | TRANS FEE | CLERK FEE | ISSUANCE FEE 12.00 |
| COMPUTATION OF SALES TAX <input type="checkbox"/> USE TAX | | SALES OR USE TAX | SA TAX | LOCAL TAX | ADDITIONAL TAX |
| SALES TAX OPT FEE | ORGAN DONOR | POSTAGE | VER | ID / RESIDENCY VERIFICATION | TOTAL TAX COLLECTED .00 |
| | | | | | TOTAL FEES COLLECTED 97.25 |