

TRANSFER

8.00

STATE OF MAINE

LONG TERM SEMI-TRAILER REGISTRATION

MAINE RE-REGISTRATION? YES NO

MAKE GDAN	YEAR 1990	UNIT # 48104	COLOR	TLR 18-8336A
STYLE SE	Vehicle Identification No. (Serial No.) 1GRAA9621LS098016		TITLE NO.	NET WGT.
NAME	BOWMAN TRAILER LEASING LLC			
MAILING ADDRESS	P.O. BOX 433			
	WILLIAMSPORT MD		ZIP CODE 21795	
LEGAL RESIDENCE	NMTA SERVICES INC. 44004			
R 02/21/2014	CR	FEE	TRANSFER	

- TO APPLICANT -
ANSWER ALL
QUESTIONS ON BACK
OF THIS
APPLICATION

MAIL TO THE
SECRETARY OF STATE
AUGUSTA, MAINE
04333

Start Year: 2013

Expires 02/28/2018

OFFICE COPY

STATE OF MASSACHUSETTS

DEPARTMENT OF REVENUE

RETURN TO THE STATE

NAME	ADDRESS	CITY	COUNTY	STATE	ZIP
FIRST NAME	STREET	TOWN	COUNTY	STATE	ZIP
LAST NAME	CITY	COUNTY	STATE	ZIP	ZIP
FIRST NAME	STREET	TOWN	COUNTY	STATE	ZIP
LAST NAME	CITY	COUNTY	STATE	ZIP	ZIP
FIRST NAME	STREET	TOWN	COUNTY	STATE	ZIP
LAST NAME	CITY	COUNTY	STATE	ZIP	ZIP

48107

STATE OF MASSACHUSETTS

DEPARTMENT OF REVENUE

X

02/21/2014 04:05 PM 44004#616154 WAB

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REGISTRATION COPY

UPON THE TRANSFER OF OWNERSHIP OF THE VEHICLE DESCRIBED HEREIN, THIS REGISTRATION EXPIRES, AND THE PERSON TO WHOM THIS CERTIFICATE WAS ISSUED MUST REMOVE THE PLATES AND FILL IN THE BLANKS BELOW AND PRESENT TO THE REGISTRATION OFFICE UPON MAKING TRANSFER OR FORWARD THIS CERTIFICATE TO THE SECRETARY OF STATE, AUGUSTA, MAINE.

SECRETARY OF STATE, AUGUSTA, MAINE 04333

DEAR SIR: I HEREBY REPORT THAT THE OWNERSHIP OF THE VEHICLE DESCRIBED IN THIS CERTIFICATE HAS BEEN:

RETAINED **TRANSFERRED** **JUNKED** **ABANDONED** **LOST BY FIRE, THEFT OR ACCIDENT**

TRANSFERRED TO:

NAME _____

STREET AND NUMBER _____

CITY OR TOWN _____ **STATE** _____

DATE TRANSFERRED _____

SIGNATURE _____

ADDRESS _____