



OFFICIAL VEHICLE REGISTRATION

5387

Stickers:
OR CURRENT TITLE NUMBER: 1442762
TRANSACTION CODE: N01
REGISTRATION ONLY NUMBER: _____

ENTER INFORMATION *LEGAL STATUS: 1 (AND) 2 (OR) ENTER NAME CODE IN BOX 1 (SAME) 2(DIFFERENT) 3(MULTIPLE LAST NAMES) 4(COMPANY) 5(OVER 28 CHARACTERS) **4** MAO ILU
NAME: OWMAN TRAILER LEASING LLC
FIRST NAME: _____ MIDDLE INITIAL: _____ LAST NAME: _____ FIRST NAME: _____ MIDDLE INITIAL: _____

ADDRESS 1 (MAILING): O BOX 433 % 10233 GOVERNOR LN BLVD
ADDRESS 2 (PHYSICAL): _____
STATE: MD ZIP CODE: 21795 CITY: _____ STATE: _____ ZIP CODE: _____

IF RESIDENCE/PRINCIPAL BUS OR INCORP LOCATION: HAMILTON 033
PURCHASE DATE: 11/19/2012
*LEASED *SERVICE OPTIONS
TELEPHONE #: 301 582 1793
*PLACARD/HEARING IMPAIRED CLS/YR: _____ *INSURANCE POLICY #: _____

VEHICLE INFORMATION
MAKE: VACO MODEL: 1VV YEAR: 1996 BODY: SE TITLE BRAND - translation: USED CODE: U TYPE OF FUEL - translation: _____ CODE: 9

REGISTERED TITLE #: 1502100
STATE: ME 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) IN EXCESS OF MECHANICAL LIMITS (9): _____ CODE: 1

OR CODE (enter appropriate code) LOWER: _____ MOBILE HOME LGTH: _____ WIDTH: _____ # AXLES: _____ GROSS VEHICLE WEIGHT: _____ *VEHICLE TRADE-IN DESCRIPTION: _____ COMPANY VEHICLE #: 5387

PLATE INFORMATION *(required for Title and Registration and Registration Only Transactions) SEE REVERSE SIDE FOR COMPLETE INSTRUCTIONS
PLATE # (1): J409782 CLASSCODE/ISSUE YR(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): _____

LIEN INFORMATION (if lien present)
LIEN CODE: _____ FIRST LIENHOLDER: SUNTRUST BANK CITY: _____ STATE: MD ZIP CODE: 21202
LIEN DATE: 11/19/2012

ADDRESS: 120 E BALTIMORE ST 25 FL CITY: BALTIMORE STATE: MD ZIP CODE: 21202

SECOND LIENHOLDER: _____ CITY: _____ STATE: _____ ZIP CODE: _____

ISSUE / REGISTRANT INFORMATION (OWNER OF PLATE)
LEGAL STATUS: NAME CODE: MAO: ILU:
NAME: _____ CITY: _____ STATE: _____ ZIP CODE: _____

ADDRESS: _____ CITY: _____ STATE: _____ ZIP CODE: _____

VEHICLE COST / TAX INFORMATION *(required for Title & Registration Transactions)
VEHICLE 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)
 LOST STOLEN MUTILATED RT'ND DUE TO NON DELIVERY ALTERED 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 to 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: 01/16/2013

VOICE NUMBER: 13016 @ COUNTY NAME: HAMILTON CO NUMBER: 33 DATE OF APPLICATION: 01/16/2013 BY AUTHORITY OF REGISTRAR OF MOTOR VEHICLES (COUNTY CLERK): W.F. (BILL) KNOWLES HJC27

REGISTRATION FEE: 79.75 CREDIT: _____ LEASE FEE: _____ TRANS FEE: _____ CLERK FEE: _____ ISSUANCE FEE: 12.00 TITLE FEE: 5.50 TOTAL TAX COLLECTED: .00

SALES OR USE TAX: _____ SA TAX: _____ LOCAL TAX: _____ ADDITIONAL TAX: _____ COLLECTED IN STATE OF: _____ COUNTY WHEEL TAX: _____ CITY STICKER FEE: _____
SALES TAX USE TAX
SERVICE OPT FEE: _____ ORGAN DONOR: _____ POSTAGE: _____ VER: _____ ID / RESIDENCY VERIFICATION: _____ *TOTAL FEES COLLECTED: 97.25

Port: WK48/DR27/8020 Cash: 0.00 Check: 0.00 Credit: 0.00 Auth#: _____ Change: 0.00