



OFFICIAL VEHICLE REGISTRATION

550371

City Stickers:

VEHICLE OR CURRENT TITLE NUMBER 84176523	TRANSACTION CODE 001	REGISTRATION ONLY NUMBER
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 type="checkbox"/> ILU <input type="checkbox"/>		
OWNER NAME BOWMAN SALES AND EQUIPMENT INC	FIRST NAME BOWMAN	MIDDLE INITIAL S
LAST NAME SALES AND EQUIPMENT INC	FIRST NAME	MIDDLE INITIAL
ADDRESS 1 (MAILING) PO BOX 433 % 10233 GOVENOR LN BLVD		ADDRESS 2 (PHYSICAL)
CITY WILLIAMSPORT	STATE MD	ZIP CODE 21795
TYPE OF RESIDENCE/PRINCIPAL BUS OR INCORP LOCATION HAMILTON 033	PURCHASE DATE 06/30/2011	*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 #

VEHICLE INFORMATION	VEHICLE IDENTIFICATION NUMBER 1JJV532W4XL509888	MAKE WABA	MODEL DVC	YEAR 1999	BODY SE	TITLE BRAND - list the appropriate code (N) NEW (1) RECONSTRUCTED VEHICLE (U) USED (2) FLOOD DAMAGE (D) DEMO (3) SPECIALLY CONSTRUCTED (8) PARTS ONLY	CODE U	TYPE OF FUEL - list the appropriate code GAS (1) ELECTRIC/HYBRID (3) DIESEL (2) PROPANE (4)	CODE 9
PREVIOUSLY REGISTERED TITLE # 63260480	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	COMPANY VEHICLE # 550371	
VEHICLE COLOR CODE (enter appropriate code)* PER LOWER O	MOBILE HOME LGTH WDTH	# AXLES	GROSS VEHICLE WEIGHT	*VEHICLE TRADE-IN DESCRIPTION			COMPANY VEHICLE # 550371		

PLATE INFORMATION *(required for Title and Registration and Registration Only Transactions) SEE REVERSE SIDE FOR COMPLETE INSTRUCTIONS							
PLATE # (1) U328626	CLASS CODE/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
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 CODE	FIRST LIENHOLDER SUNTRUST BANK	LIEN DATE 06/30/2011	
STREET 120 E BALTIMORE 25TH FL	CITY BALTIMORE	STATE MD	ZIP CODE 21202
LIEN CODE	SECOND LIENHOLDER	LIEN DATE	
STREET	CITY	STATE	ZIP CODE

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	SALES TAX 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, the undersigned, in consideration of the sum of _____ Dollars, to me in hand paid by the above named party, the receipt of which is hereby acknowledged, do hereby certify that the above named party is the owner of the vehicle described herein, and 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.

SIGNATURE OF CERTIFIER/OWNER _____ POWER OF ATTORNEY/AUTHORIZED SIGNATURE (IF APPLICABLE) _____ DATE **10/19/2011**

VOICE NUMBER 11292 @	COUNTY NAME HAMILTON	CO NUMBER 33	DATE OF APPLICATION 10/19/2011	BY AUTHORITY OF REGISTRAR OF MOTOR VEHICLES (COUNTY CLERK) W.F. (BILL) KNOWLES	HJC27
*OFFICE 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	TOTAL TAX COLLECTED
ISSUANCE FEE 12.00	TITLE FEE 5.50	SALES TAX .00			
COMPUTATION OF SALES OR USE TAX	SA TAX	LOCAL TAX	ADDITIONAL TAX	COLLECTED IN STATE OF	COUNTY WHEEL TAX
SERVICE OPT FEE	ORGAN DONOR	POSTAGE	VER	ID / RESIDENCY VERIFICATION	*TOTAL FEES COLLECTED 97.25