TENNESSEE DEPARTMENT OF REVENUE VEHICLE TAXPAYER SERVICES DIVISION MULTI-PURPOSE APPLICATION

OFFICIAL VEHICLE REGISTRATION

City Stickers:											5519	173
EW OR CURRENT TITLE N	UMBER	T I		TR	ANSACTION ODE	REGISTI	RATION ONLY NUM	MBER				
90510792				"	O01							
OWNER INFORMATION *LEGAL STATUS: 1 (AND) 2 (OR) ENTER NAME CO				CODE IN BOX 1 (SAME) 2(DIFFERENT) 3(MULTIPLE LAST NAMES) 4(COMPANY) 5(OVER 28 CHARACTERS) 4 MAO N ILU			ILU N
AST NAME	SAL STATUS: 1 (AND)	FIRST NAME	NAME CODE II	MIDDLE INITIAL	- Z(DIFFERE	LAST NAME	NAMES) 4(COMP.	ANT) S(UV	FIRST NAME	Eno)		E INITIAL
BOWMAN TRA	AILER LEAS	ING LLC										
DDRESS 1 (MAILING)		-				ADDRESS 2 (PHYSIC	CAL)	_				
10233 GOVER	NOR LN BL	VD										
TY		STATE		ZIP CODE		CITY			ST	ATE	ZIP COD	E
WILLIAMSPOR	RT	MD)	21795								
TY OF RESIDENCE/PRINCIPAL BUS O	IR INCORP LOCATION	PURCHASE DATE			VICE OPTIONS	TELEPHONE	# *F	PLACARD/	HEARING IMPAIR	RED CLS/YR	*INSURANCE	POLICY #
HAMILTON 03	33	12/14/201	2 LEASE SEE RE	EVERSE SIDE FOR		301-5	82-1793					
EHICLE INFORMATION												
IN		MAKE	MODEL	YEAR	BODY	TITLE BRAND - tran	slation		CODE	TYPE OF F	UEL - translation	CODE
1JJV532U3VL	426402	WABA	1JJ	1997	SE	USED			U			9
JRRENDERED TITLE #		STATE PREV	IOUS STATES	TITLED	VEHICLE US	SE VEHICLE TYPE	CURRENT M	MILEAGE	ODOMETER	ACTUAL (0)	NOT ACTUAL (8) S / 16,000 LBS (1)	COL
11624441		ME TN	ME TN		F	s			INDICATOR OVER 10 YRS (List one) IN EXCESS OF		F MECHANICAL LIMITS (9)	
DLOR CODE (enter appropriate			# AXLES	GRC	SS VEHICLE		*VEHICLE TRA	ADE-IN DES	SCRIPTION		COMPANY VEHI	CLE#
O LOWE	H LGIH	WUIH									16.5	551973
LATE INFORMATION *(requ	ired for Title and Regie	tration and Registration	on Only Transar	ctions) SEE RE	VERSE SIDE F	OR COMPLETE INST	RUCTIONS					
	ASSCODE/ISSUEYR(OUNTY STICK	ER #(1) CIT	Y STICKER #(1)(2)	*PLATE #(TRADE I	IN)(2)	CLASS CODE/	SSUE YR(2)		N DATE (1)(2)(3)
U401850	8020/199	94										RMANE
R STICKER #(4)	TEMP OPERATOR P	ERMIT #(3) #	OF SEATS(5)	ZONE(CO	UNTY NAME)(6) U	SDOT / REGISTRA	NT #(7)		M	OTOR CARRIER #(B)
EN INFORMATION (If lien p	resent)											
EN CODE FIRST LIE		de la companya de la										JEN DATE
SI	UNTRUST B	ANK										12/14/201
TREET TOO E D	AL TIMODE	OT 05 51	1			BALTIN	IORE		STA	MD	ZIP COI 21202	
	ALTIMORE	51 25 FL				DALTIN	IOIL					LIEN DATE
SECOND.	DEW IOLDER											
TREET			-			CITY			STA	TE	ZIP CO	DE
												84084 N. S.
. ====	TO DIVISION OF THE PROPERTY OF	OF BLATE)	LEGAL	STATUS	NAME	CODE	MAO ILU					
LESSEE / REGISTRANT INI IAME	-OHMATION(OWNER	OF PLATE)	LEGAL	SIAIOS L	J. HAMILE	NAME						
						D'			ST	ATE	ZI	P CODE
DDRESS					CI	11			_			
EHICLE COST / TAX INFO	DIATION You arrived to	r Title & Degletration	Transactions)									
SALE PRICE	TRADE IN	ALLOWANCE	Turbustiono	TAXA	ABLE AMOUNT		SALESTAX PAII	D		*TAX EX	EMPTION REASON	I/SALES TAX #
			DEAL	ER ADDRESS							DEALER #	
DEALER NAME			DEAL	LITADONESC								
Required for Duplicate Title	- T.C.A. 55-3-115 (subi	nit Illegible or altered	Certificate of Ti	tle)					A THE PARTY OF THE			
			MUTILATI		П	N'D DUE TO NON DE	LIEVERY	AL	TERED		ILLEGI	BLE
LOST	STOLE		72.20.000.0000.0000						or Vohiala Divisia	n	,	
nder penalties of perjury, I h r its assignees to determine	ereby certify all informathe accuracy of the info	ation provided is true a ormation provided by r	and correct to the ne or on my be	ne best of my ki half.	nowledge, and	acknowledge that it is	not the responsibilit	y or the Mo	o verticle Divisio	I DA	TE.	
SIGNATURE OF CERTIFIER	R/OWNER		,	POWER OF AT	TOHNEY/AUT	HORIZED SIGNATUR	L(IF AFFLICABLE)				12/20	/2012
				O NUMBER	DATE OF A	PPLICATION	BY AUTHOR	ITY OF RE	GISTRAR OF MO	TOR VEHIC	LES(COUNTY CLE	
12255 @	HAMIL	ΓON		33		2/20/2012	W.F. (I	BILL)	KNOWLE	S		KAF
12355 @ OFFICE USE ONLY	EMISSION	: Trailer					(total fees of	collected Ir	dicated certifies	this form a	s a valid registratio	n) TED
REGISTRATION FEE 79.75	CREDIT	LEASI	E FEE	TF	RANS FEE	CLERK FEE	12.00	1000	5.50	"	.00	
COMPUTATION OF	SALES OR USE	TAX SA TAX	LOC	AL TAX	ADDITIONAL 7	TAX COL	ECTED IN STATE		UNTY WHEEL TA	XX C	ITY STICKER FEE	
SALES TAX USE						Listen	VVEDIE				TOTAL FEED COLL	CTED
*SERVICE OPT FEE	ORGAN DONOR	POST	AGE	VER		ID / RESIDENC	YVERIFICATION			- 1	OTAL FEES COLLE 97.25	CIED
SF-1357 Port: W	K51/DR46/802	20 Cash:	0.00	Check:	0.00	Check#:	Credit: 0.0	00	Auth#:		nge: 0.00	RDA-692