



OFFICIAL VEHICLE REGISTRATION

555520

City Stickers:

VEHICLE OR CURRENT TITLE NUMBER 84182345	TRANSACTION CODE 001	REGISTRATION ONLY NUMBER
--	--------------------------------	--------------------------

OWNER INFORMATION (LEGAL STATUS: 1 (AND) 2 (OR) 3 (ENTER NAME CODE IN BOX 1 (SAME) 2 (DIFFERENT) 3 (MULTIPLE LAST NAMES) 4 (COMPANY) 5 (OVER 28 CHARACTERS) 5)		MAO <input checked="" type="checkbox"/> N	ILU <input checked="" type="checkbox"/> N
ST NAME BOWMAN SALES AND EQUIPMENT INC	FIRST NAME BOWMAN	MIDDLE INITIAL	LAST NAME SALES AND EQUIPMENT INC

ADDRESS 1 (MAILING) PO BOX 433 % 10233 GOVENOR LN BLVD	ADDRESS 2 (PHYSICAL)
--	----------------------

CITY WILLIAMSPORT	STATE MD	ZIP CODE 21795	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 checked="" type="checkbox"/> <small>SEE REVERSE SIDE FOR INSTRUCTIONS</small>	TELEPHONE # 301 582 1793	*PLACARD/HEARING IMPAIRED CLS/YR	*INSURANCE POLICY #
---	------------------------------------	---	------------------------------------	----------------------------------	---------------------

VEHICLE INFORMATION	VEHICLE IDENTIFICATION NUMBER 1JVV532WXYL596570	MAKE WABA	MODEL DVC	YEAR 2000	BODY SE	TITLE BRAND - list the appropriate code (N) NEW (1) RECONSTRUCTED VEHICLE (U) USED (2) FLOOD DAMAGE (D) DEMO (3) SPECIALLY CONSTRUCTED (B) PARTS ONLY	CODE U	TYPE OF FUEL - list the appropriate code GAS (1) ELECTRIC/HYBRID (3) DIESEL (2) PROPANE (4)	CODE 9
---------------------	---	---------------------	---------------------	---------------------	-------------------	---	------------------	---	------------------

PREVIOUS TITLE # 63261133	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) IN EXCESS OF MECHANICAL LIMITS (9)	CODE 1
-------------------------------------	--------------------	-------------------------------------	-------------------------	--------------------------	-----------------	--	------------------

VEHICLE CLASSIFICATION CODE (enter appropriate code) PER LOWER O	MOBILE HOME L6TH WIDTH	# AXLES	GROSS VEHICLE WEIGHT	*VEHICLE TRADE-IN DESCRIPTION	COMPANY VEHICLE # 555520
---	---------------------------	---------	----------------------	-------------------------------	------------------------------------

DATE INFORMATION (required for Title and Registration and Registration Only Transactions) SEE REVERSE SIDE FOR COMPLETE INSTRUCTIONS							
DATE # (1) U331495	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

REGISTRATION 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

ADDRESS 120 E BALTIMORE 25TH FL	CITY BALTIMORE	STATE MD	ZIP CODE 21202
LIEN CODE	SECOND LIENHOLDER	LIEN DATE	

REGISTRATION CODE	CITY	STATE	ZIP CODE
-------------------	------	-------	----------

REGISTRANT INFORMATION (OWNER OF PLATE)	LEGAL STATUS	NAME CODE	MAO	ILU
NAME		NAME		
ADDRESS		CITY	STATE	ZIP CODE

VEHICLE COST/TAX INFORMATION (required for Title & Registration Transactions)				
VEHICLE 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"/> RTND DUE TO NON DELIVERY	<input type="checkbox"/> ALTERED	<input type="checkbox"/> ILLEGIBLE
-------------------------------	---------------------------------	------------------------------------	---	----------------------------------	------------------------------------

I, the undersigned, 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 its 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 11/07/2011
------------------------------	--	---------------------------

VOICE NUMBER 11311 @	COUNTY NAME HAMILTON	CO NUMBER 33	DATE OF APPLICATION 11/07/2011	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
COMPUTATION OF SALES TAX <input type="checkbox"/> SALES TAX <input type="checkbox"/> USE TAX	SALES OR USE TAX	SA TAX	LOCAL TAX	ADDITIONAL TAX	COLLECTED IN STATE OF	COUNTY WHEEL TAX	CITY STICKER FEE
SERVICE OPT FEE	ORGAN DONOR	POSTAGE	VER	ID / RESIDENCY VERIFICATION	*TOTAL FEES COLLECTED 97.25		