



OFFICIAL VEHICLE REGISTRATION

562227

City Stickers:
 VIN OR CURRENT TITLE NUMBER: **04179537** TRANSACTION CODE: **N01** REGISTRATION ONLY NUMBER: **562227**

OWNER 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) **5** MAO N ILU N

OWNER NAME: **BOWMAN SALES AND EQUIPMENT INC**

ADDRESS 1 (MAILING): **PO BOX 433 % 10233 GOVERNOR LN BLVD**

CITY: **WILLIAMSPORT MD 21795**

TELEPHONE #: **301 582 1793**

VEHICLE INFORMATION

MAKE: **GDAN** MODEL: **1PN** YEAR: **1998** BODY: **SE** TITLE BRAND: **U** TYPE OF FUEL: **9**

REGISTERED TITLE #: **9810392531** STATE: **OR** VEHICLE USE: **F** VEHICLE TYPE: **S** CURRENT MILEAGE: **1**

COMPANY VEHICLE #: **562227**

PLATE INFORMATION

PLATE #: **U330408** CLASS CODE/ISSUE YR: **8020/1994** EXPIRATION DATE: **PERMANENT**

TEMP OPERATOR PERMIT: **3** # OF SEATS: **5** ZONE: **(COUNTY NAME) 6** USDOT / REGISTRANT: **7** MOTOR CARRIER: **8**

LIEN INFORMATION (if lien present)

FIRST LIENHOLDER: **SUNTRUST BANK** LIEN DATE: **06/30/2011**

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

SECOND LIENHOLDER: LIEN DATE:

CITY: STATE: ZIP CODE:

REGISTRANT INFORMATION (OWNER OF PLATE)

LEGAL STATUS: NAME CODE: MAO: ILU:

NAME: ADDRESS: CITY: STATE: ZIP CODE:

VEHICLE COST / TAX INFORMATION

TRADE IN ALLOWANCE: TAXABLE AMOUNT: SALES TAX PAID: TAX EXEMPTION REASON / SALES TAX #:

DEALER NAME: DEALER ADDRESS: DEALER #:

LOST: STOLEN: MUTILATED: RTND DUE TO NON DELIVERY: ALTERED: ILLEGIBLE:

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: **10/28/2011**

COUNTY NAME: **HAMILTON** CO NUMBER: **33** DATE OF APPLICATION: **10/28/2011** 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**

SERVICE OPT FEE: ORGAN DONOR: POSTAGE: VER: ID / RESIDENCY VERIFICATION: TOTAL FEES COLLECTED: **97.25**