



OFFICIAL VEHICLE REGISTRATION

City Stickers:

599863

NEW OR CURRENT TITLE NUMBER 90477414	TRANSACTION CODE 001	REGISTRATION ONLY NUMBER
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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) 4 MAO ☒ ILU ☒		
LAST NAME BOWMAN TRAILER LEASING LLC	FIRST NAME 	MIDDLE INITIAL
ADDRESS 1 (MAILING) 10233 GOVERNOR LN BLVD		ADDRESS 2 (PHYSICAL)
CITY WILLIAMSPORT	STATE MD	ZIP CODE 21795
CITY OF RESIDENCE/PRINCIPAL BUS OR INCORP LOCATION HAMILTON 033	PURCHASE DATE 06/29/2012	*LEASED ☒ *SERVICE OPTIONS ☐ SEE REVERSE SIDE FOR INSTRUCTIONS
TELEPHONE # 301 582 1793		*PLACARD/HEARING IMPAIRED CLS/YR
*INSURANCE POLICY # 		

VIN 1JJV532W43L817475	MAKE WABA	MODEL DVC	YEAR 2003	BODY SE	TITLE BRAND - translation 	CODE U	TYPE OF FUEL - translation 	CODE 9
SURRENDERED TITLE # 64158317	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	
COLOR CODE (enter appropriate code)* UPPER O	MOBILE HOME LGTH 	WIDTH 	# AXLES 	GROSS VEHICLE WEIGHT 	*VEHICLE TRADE-IN DESCRIPTION 	COMPANY VEHICLE # 599863		

PLATE INFORMATION *(required for Title and Registration and Registration Only Transactions) SEE REVERSE SIDE FOR COMPLETE INSTRUCTIONS							
PLATE #(1) U380372	CLASSCODE/ISSUEYR(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
TDR 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 06/29/2012	
STREET 120 E BALTIMORE ST 25 FL	CITY BALTIMORE	STATE MD	ZIP CODE 21202
LIEN CODE 	SECOND LIENHOLDER 	LIEN DATE 	
STREET 	CITY 	STATE 	ZIP CODE

*LESSEE / 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)				
SALE 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	☐ RTN'D 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 or 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 08/20/2012
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INVOICE NUMBER 12233 @	COUNTY NAME HAMILTON	CO NUMBER 33	DATE OF APPLICATION 08/20/2012	BY AUTHORITY OF REGISTRAR OF MOTOR VEHICLES(COUNTY CLERK) W.F. (BILL) KNOWLES	HJC27
OFFICE USE ONLY REGISTRATION FEE 79.75					
EMISSION: Trailer					
COMPUTATION OF ☐ SALES TAX ☐ USE TAX	SALES OR USE TAX	SA TAX	LOCAL TAX	ADDITIONAL TAX	COLLECTED IN STATE OF
*SERVICE OPT FEE	ORGAN DONOR	POSTAGE	VER	ID / RESIDENCY VERIFICATION	*TOTAL FEES COLLECTED 97.25