



# OFFICIAL VEHICLE REGISTRATION

6010381

### ty Stickers:

OR CURRENT TITLE NUMBER <b>0468820</b>	TRANSACTION CODE <b>001</b>	REGISTRATION ONLY NUMBER
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VER 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) <b>4</b>		MAO <input checked="" type="checkbox"/> ILU <input checked="" type="checkbox"/>
NAME <b>HOWMAN TRAILER LEASING LLC</b>	FIRST NAME <b>HOWMAN</b>	MIDDLE INITIAL <b>TRAILER</b>
ADDRESS 1 (MAILING) <b>0233 GOVERNOR LN BLVD</b>		ADDRESS 2 (PHYSICAL)
STATE <b>VILLIAMSPORT MD</b>	ZIP CODE <b>21795</b>	CITY <b>VILLIAMSPORT</b>
OF RESIDENCE/PRINCIPAL BUS OR INCORP LOCATION <b>HAMILTON 033</b>	PURCHASE DATE <b>02/27/2012</b>	*LEASED <input checked="" type="checkbox"/> *SERVICE OPTIONS <input type="checkbox"/> SEE REVERSE SIDE FOR INSTRUCTIONS
TELEPHONE # <b>301 582 1793</b>	*PLACARD/HEARING IMPAIRED CLS/YR	*INSURANCE POLICY #

VEHICLE INFORMATION	MAKE <b>WABA</b>	MODEL <b>1JJ</b>	YEAR <b>2004</b>	BODY <b>SE</b>	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 <b>U</b>	TYPE OF FUEL - list the appropriate code GAS (1) ELECTRIC/HYBRID (3) DIESEL (2) PROPANE (4)	CODE <b>9</b>
TRANSFERRED TITLE # <b>17891785</b>	STATE <b>TN</b>	PREVIOUS STATES TITLED <b>MO</b>	VEHICLE USE <b>F</b>	VEHICLE TYPE <b>S</b>	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 <b>1</b>	COMPANY VEHICLE # <b>6010381</b>
OR CODE (enter appropriate code) ER LOWER <b>U</b>	MOBILE HOME LGTH WDTH	# AXLES	GROSS VEHICLE WEIGHT	*VEHICLE TRADE-IN DESCRIPTION				

VEHICLE INFORMATION *(required for Title and Registration and Registration Only Transactions) SEE REVERSE SIDE FOR COMPLETE INSTRUCTIONS							
PLATE # (1) <b>J360431</b>	CLASSCODE/ISSUEYR(1)(3) <b>8020/1994</b>	VALIDATION # (1)	COUNTY STICKER # (1)	CITY STICKER # (1)(2)	*PLATE # (TRADE IN) (2)	CLASS CODE/ISSUE YR (2)	EXPIRATION DATE (1)(2)(3) <b>PERMANENT</b>
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 DATE <b>02/27/2012</b>
LIEN CODE	FIRST LIENHOLDER <b>SUNTRUST BANK</b>	
REET	CITY <b>BALTIMORE</b>	STATE <b>MD</b>
ADDRESS <b>120 E BALTIMORE ST 25 FL</b>	ZIP CODE <b>21202</b>	
LIEN CODE	SECOND LIENHOLDER	LIEN DATE
REET	CITY	STATE
ADDRESS	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)			
VEHICLE PRICE	TRADE IN ALLOWANCE	TAXABLE AMOUNT	SALESTAX PAID
DEALER NAME		DEALER ADDRESS	DEALER #

Required for Duplicate Title - T.C.A. 55-3-115 (submit illegible or altered Certificate of Title)				
<input type="checkbox"/> LOST	<input type="checkbox"/> STOLEN	<input type="checkbox"/> MUTILATED	<input type="checkbox"/> RT'ND DUE TO NON DELIEVERY	<input type="checkbox"/> ALTERED
<input type="checkbox"/> ILLEGIBLE				

I hereby certify 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 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 <b>07/25/2012</b>
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COUNTY NUMBER <b>12207 @</b>	COUNTY NAME <b>HAMILTON</b>	CO NUMBER <b>33</b>	DATE OF APPLICATION <b>07/25/2012</b>	BY AUTHORITY OF REGISTRAR OF MOTOR VEHICLES (COUNTY CLERK) <b>W.F. (BILL) KNOWLES</b>	<b>HJC27</b>
VEHICLE USE ONLY EMISSION: Trailer (total fees collected Indicated certifies this form as a valid registration)					
REGISTRATION FEE <b>79.75</b>	CREDIT	LEASE FEE	TRANS FEE	CLERK FEE	ISSUANCE FEE <b>12.00</b>
IMPUTATION OF SALES TAX <input type="checkbox"/> USE TAX <input type="checkbox"/>		SA TAX	LOCAL TAX	ADDITIONAL TAX	TITLE FEE <b>5.50</b>
SERVICE OPT FEE		ORGAN DONOR	POSTAGE	VER	COLLECTED IN STATE OF COUNTY WHEEL TAX
ID / RESIDENCY VERIFICATION					TOTAL TAX COLLECTED <b>.00</b>
*TOTAL FEES COLLECTED <b>97.25</b>					