

OFFICIAL VEHICLE REGISTRATION

TRANSACTION ONLY NUMBER 90485737 OWNER INFORMATION "LEGAL STATUS: 1 (AND) 2 (ÓR) ENTER NAME CODE IN BOX 1 (SAME) 2(DIFFERENT) 3(MULTIPLE LAST NAMES) 4(COMPANY) 5(OVER 28 CHARACTERS) 4 MAO N LL LAST NAME FIRST NAME MIDDLE INITIAL LAST NAME FIRST NAME MIDDLE INITIAL BOWMAN TRAILER LEASING LLC ADDRESS 1 (MAILING) 10233 GOVERNOR LN BLVD CITY STATE ZIP CODE CITY STATE ZIP CODE WILLIAMSPORT MD 21795 DITY OF RESIDENCE PROBLEM BUS OR INCORP LOCATION PURCHASE DATE TELESHOOP CONTROL BUS OR INCORP LOCATION SEE REVERSE SIDE FOR INSTRUCTIONS VEHICLE INFORMATION MAKE MODEL YEAR BODY TITLE BRAND - translation CODE TYPE OF FUEL - translation	
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ADDRESS 1 (MAILING) 10233 GOVERNOR LN BLVD CITY STATE ZIP CODE CITY STATE ZIP CODE WILLIAMSPORT MD 21795 SHTY OF RESIDENCE/PRINCIPAL BUS OR INCORP LOCATION PURCHASE DATE 06/29/2012 LEASED 0 "SERVICE OPTIONS 301 582 1793 "PLACARD/HEARING IMPAIRED CLS/YR "INSURANCE POLICE INFORMATION"	Y#
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	CODE
1GRAA06268T546523	9
SURRENDERED TITLE # STATE PREVIOUS STATES TITLED VEHICLE USE VEHICLE TYPE CURRENT MILEAGE ODOMETER ACTUAL (6) NOT ACTUAL (6) INDICATOR OVER 10 YRS / 16,000 LBS (1)	CODE
74699848 TN TN F S	1 1
COLOR CODE (onter appropriate code)* UPPER LOWER MOBILE HOME LOTH WOTH # AXLES GROSS VEHICLE WEIGHT "VEHICLE TRADE-IN DESCRIPTION COMPANY VEHICLE 8	74866
	7000
PLATE #(1) CLASSCODE/SSUEYR(1)(3) VALIDATION #(1) COUNTY STICKER #(1) CITY STICKER #(1)(2) *PLATE #(TRADE IN)(2) CLASS CODE/SSUE YR(2) EXPIRATION DAT	
U382565 8020/1994 PERM	ANENT
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 STREET CITY STATE ZIP CODE	9/2012
120 E BALTIMORE ST 25 FL BALTIMORE MD 21202	
LIEN CODE SECOND LIENHOLDER LIEN CODE	AIE ·
STREET CITY STATE ZIP CODE	
*LESSEE / REGISTRANT INFORMATION (OWNER OF PLATE); LEGAL STATUS NAME CODE MAO ILU	
NAME NAME	
ADDRESS CITY STATE ZIP COD	
VEHICLE COST / TAX INFORMATION (required for Title & Registration Transactions)	
SALE PRICE TRADE IN ALLOWANCE TAXABLE AMOUNT SALESTAX PAID TAX EXEMPTION REASON / SALE	S TAX #
Part Parties - I and the second	
DEALER ADDRESS DEALER # *Required for Duplicate Title - T.C.A. 55-3-115 (submit Illegible or attered Cortificate of Title)	
*Required for Duplicate Title - T.C.A. 55-3-115 (submit Illegible or sitered Cortificate of Title) LOST STOLEN MUTILATED RTN'D DUE TO NON DELIEVERY ALTERED LLEGIBLE 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.	
*Required for Duplicate Title - T.C.A. 55-9-115 (submit Illegible or altered Certificate of Title) LOST STOLEN MUTILATED RTND DUE TO NON DELIEVERY ALTERED !!LLEGIBLE	2
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TRequired for Duplicate Title - T.C.A. 55-3-115 (submit illentible or altered Certificate of Title) LOST STOLEN MUTILATED RINTO DUE TO NON DELIEVERY 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 behall. SIGNATURE OF CERTIFIER/OWNER POWER OF ATTORNEY/AUTHORIZED SIGNATURE(IF APPLICABLE) DATE 09/14/201 INVOICE NUMBER COUNTY NAME CO NUMBER DATE OF APPLICATION BY AUTHORITY OF REGISTRAR OF MOTOR VEHICLES(COUNTY CLERK) 12258 HAMILTON 33 09/14/2012 W.F. (BILL) KNOWLES OFFICE USE ONLY EMISSION: Trailer	
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TREQUIRED TO DUDICATE TITLO - T.C.A. 55-9-115 (Submit! Illentible or siltered Cortificate of Title) LOST STOLEN MUTILATED STOLEN STOLEN STOLEN MUTILATED STOLEN STOLEN STOLEN MUTILATED STOLEN STOLEN MUTILATED STOLEN STOLEN STOLEN MUTILATED STOLEN STOLEN STOLEN STOLEN MUTILATED STOLEN STOLEN STOLEN MUTILATED STOLEN S	