



## OFFICIAL VEHICLE REGISTRATION

675080

## ty Stickers:

|                                                                                                                                                                                                                                                                            |  |                                                                                                                            |                          |                                    |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|----------------------------------------------------------------------------------------------------------------------------|--------------------------|------------------------------------|
| OR CURRENT TITLE NUMBER<br><b>0488364</b>                                                                                                                                                                                                                                  |  | TRANSACTION CODE<br><b>001</b>                                                                                             | REGISTRATION ONLY NUMBER |                                    |
| ENTER 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<br><b>LOWMAN TRAILER LEASING LLC</b>                                                                                                                                                                                                                                  |  | LAST NAME<br><b>LOWMAN</b>                                                                                                 |                          |                                    |
| FIRST NAME<br><b>LOWMAN</b>                                                                                                                                                                                                                                                |  | MIDDLE INITIAL<br><b>TRAILER</b>                                                                                           |                          |                                    |
| ADDRESS 1 (MAILING)<br><b>0233 GOVERNOR LN BLVD</b>                                                                                                                                                                                                                        |  | ADDRESS 2 (PHYSICAL)                                                                                                       |                          |                                    |
| STATE<br><b>MD</b>                                                                                                                                                                                                                                                         |  | ZIP CODE<br><b>21795</b>                                                                                                   |                          | CITY<br><b>VILLIAMSPORT</b>        |
| PURCHASE DATE<br><b>06/29/2012</b>                                                                                                                                                                                                                                         |  | *LEASED <input checked="" type="checkbox"/> *SERVICE OPTIONS <input type="checkbox"/><br>SEE REVERSE SIDE FOR INSTRUCTIONS |                          | TELEPHONE #<br><b>301 582 1793</b> |
| *RESIDENCE/PRINCIPAL BUS OR INCOMP LOCATION<br><b>HAMILTON 033</b>                                                                                                                                                                                                         |  | *PLACARD/HEARING IMPAIRED CLS/YR                                                                                           |                          | *INSURANCE POLICY #                |

|                                                    |  |                                 |                                     |                         |                          |                                          |                                                                                                                    |                                    |                  |
|----------------------------------------------------|--|---------------------------------|-------------------------------------|-------------------------|--------------------------|------------------------------------------|--------------------------------------------------------------------------------------------------------------------|------------------------------------|------------------|
| VEHICLE INFORMATION                                |  | MAKE<br><b>WABA</b>             | MODEL<br><b>1JJ</b>                 | YEAR<br><b>2004</b>     | BODY<br><b>SE</b>        | TITLE BRAND - translation<br><b>USED</b> | CODE<br><b>U</b>                                                                                                   | TYPE OF FUEL - translation         | CODE<br><b>9</b> |
| VENDOR TITLE #<br><b>6955535</b>                   |  | STATE<br><b>TN</b>              | PREVIOUS STATES TITLED<br><b>TN</b> | VEHICLE USE<br><b>F</b> | VEHICLE TYPE<br><b>S</b> | CURRENT MILEAGE                          | ODOMETER ACTUAL (0) NOT ACTUAL (8)<br>INDICATOR OVER 10 YRS / 16,000 LBS (1)<br>IN EXCESS OF MECHANICAL LIMITS (9) | CODE<br><b>1</b>                   |                  |
| OR CODE (enter appropriate code)<br>ER<br><b>0</b> |  | MOBILE HOME<br>LGTH<br><b>0</b> | WIDTH<br><b>0</b>                   | # AXLES<br><b>0</b>     | GROSS VEHICLE WEIGHT     | *VEHICLE TRADE-IN DESCRIPTION            |                                                                                                                    | COMPANY VEHICLE #<br><b>675080</b> |                  |

|                                                                                                                                          |                                              |                  |                        |                          |                         |                         |                                               |
|------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------|------------------|------------------------|--------------------------|-------------------------|-------------------------|-----------------------------------------------|
| VEHICLE INFORMATION *(required for Title and Registration and Registration Only Transactions) SEE REVERSE SIDE FOR COMPLETE INSTRUCTIONS |                                              |                  |                        |                          |                         |                         |                                               |
| TE # (1)<br><b>J383741</b>                                                                                                               | CLASSCODE/ISSUEYR (1)(3)<br><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)<br><b>PERMANENT</b> |
| STICKER # (4)                                                                                                                            | TEMP OPERATOR PERMIT # (3)                   | # OF SEATS (5)   | ZONE (COUNTY NAME) (6) | USDOT / REGISTRANT # (7) | MOTOR CARRIER # (8)     |                         |                                               |

|                                            |                                          |                                |                          |
|--------------------------------------------|------------------------------------------|--------------------------------|--------------------------|
| VEHICLE INFORMATION (If lien present)      |                                          | LIEN DATE<br><b>06/29/2012</b> |                          |
| VEHICLE CODE<br><b>1</b>                   | FIRST LIENHOLDER<br><b>SUNTRUST BANK</b> |                                |                          |
| VEHICLE<br><b>120 E BALTIMORE ST 25 FL</b> | CITY<br><b>BALTIMORE</b>                 | STATE<br><b>MD</b>             | ZIP CODE<br><b>21202</b> |
| VEHICLE CODE<br><b>1</b>                   | SECOND LIENHOLDER                        | LIEN DATE                      |                          |
| VEHICLE<br><b>120 E BALTIMORE ST 25 FL</b> | CITY<br><b>BALTIMORE</b>                 | STATE<br><b>MD</b>             | ZIP CODE<br><b>21202</b> |

|                                                |  |                                       |                                    |                              |                              |
|------------------------------------------------|--|---------------------------------------|------------------------------------|------------------------------|------------------------------|
| SSEE / REGISTRANT INFORMATION (OWNER OF PLATE) |  | LEGAL STATUS <input type="checkbox"/> | NAME CODE <input type="checkbox"/> | MAO <input type="checkbox"/> | ILU <input type="checkbox"/> |
| NAME<br><b>LOWMAN TRAILER LEASING LLC</b>      |  | NAME<br><b>LOWMAN</b>                 |                                    |                              |                              |
| ADDRESS<br><b>0233 GOVERNOR LN BLVD</b>        |  | CITY<br><b>VILLIAMSPORT</b>           |                                    | STATE<br><b>MD</b>           | ZIP CODE<br><b>21795</b>     |

|                                                                                  |                    |                |               |                                    |
|----------------------------------------------------------------------------------|--------------------|----------------|---------------|------------------------------------|
| VEHICLE COST / TAX INFORMATION *(required for Title & Registration Transactions) |                    |                |               |                                    |
| VEHICLE 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) |                                 |                                    |                                                    |                                  |
| <input type="checkbox"/> LOST                                                                     | <input type="checkbox"/> STOLEN | <input type="checkbox"/> MUTILATED | <input type="checkbox"/> RTN'D DUE TO NON DELIVERY | <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. |  | POWER OF ATTORNEY/AUTHORIZED SIGNATURE (IF APPLICABLE) |  | DATE<br><b>09/24/2012</b> |
| NATURE OF CERTIFIER/OWNER                                                                                                                                                                                                                                                 |  |                                                        |  |                           |

|                                                                              |                                |                        |                                          |                                                                                          |                             |                                       |                          |                                   |
|------------------------------------------------------------------------------|--------------------------------|------------------------|------------------------------------------|------------------------------------------------------------------------------------------|-----------------------------|---------------------------------------|--------------------------|-----------------------------------|
| COUNTY NUMBER<br><b>12268 @</b>                                              | COUNTY NAME<br><b>HAMILTON</b> | CO NUMBER<br><b>33</b> | DATE OF APPLICATION<br><b>09/24/2012</b> | BY AUTHORITY OF REGISTRAR OF MOTOR VEHICLES (COUNTY CLERK)<br><b>W.F. (BILL) KNOWLES</b> |                             |                                       | <b>HJC27</b>             |                                   |
| (total fees collected indicated certifies this form as a valid registration) |                                |                        |                                          |                                                                                          |                             |                                       |                          |                                   |
| REGISTRATION FEE<br><b>79.75</b>                                             |                                | CREDIT                 | LEASE FEE                                | TRANS FEE                                                                                | CLERK FEE                   | ISSUANCE FEE<br><b>12.00</b>          | TITLE FEE<br><b>5.50</b> | TOTAL TAX COLLECTED<br><b>.00</b> |
| COMPUTATION OF<br>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<br><b>97.25</b> |                          |                                   |