



TENNESSEE DEPARTMENT OF REVENUE
VEHICLE TAXPAYER SERVICES DIVISION
MULTI-PURPOSE APPLICATION

OFFICIAL VEHICLE REGISTRATION

675205

City Stickers:

VEHICLE OR CURRENT TITLE NUMBER 90490252		TRANSACTION CODE 001	REGISTRATION ONLY NUMBER	
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 ☒				
FIRST NAME BOWMAN TRAILER LEASING LLC		MIDDLE INITIAL	LAST NAME	
ADDRESS 1 (MAILING) 10233 GOVERNOR LN BLVD		ADDRESS 2 (PHYSICAL)		
CITY WILLIAMSPORT	STATE MD	ZIP CODE 21795	CITY	
ADDRESS OF RESIDENCE/PRINCIPAL BUS OR INCORP LOCATION HAMILTON 033		PURCHASE DATE 06/29/2012	TELEPHONE # 301 582 1793	*PLACARD/HEARING IMPAIRED CLS/YR 0
*LEASED ☒ *SERVICE OPTIONS ☐		SEE REVERSE SIDE FOR INSTRUCTIONS		

VEHICLE INFORMATION

VIN 1JJV532W74L876103		MAKE WABA	MODEL 1JJ	YEAR 2004	BODY SE	TITLE BRAND - translation USED	CODE U	TYPE OF FUEL - translation	CODE 9
PREVIOUS TITLED 76955436		STATE TN	PREVIOUS STATES TITLED TN	VEHICLE USE F	VEHICLE TYPE S	CURRENT MILEAGE	ODOMETER ACTUAL (8) NOT ACTUAL (8) INDICATOR OVER 10 YRS / 16,000 LBS (1) (List one) IN EXCESS OF MECHANICAL LIMITS (9)		CODE 1
*OR CODE (enter appropriate code) *LOWER A		MOBILE HOME LOTH	WOTH	# AXLES	GROSS VEHICLE WEIGHT	*VEHICLE TRADE-IN DESCRIPTION		COMPANY VEHICLE # 675205	

PLATE INFORMATION * (required for Title and Registration and Registration Only Transactions) SEE REVERSE SIDE FOR COMPLETE INSTRUCTIONS

PLATE # (1) U383989	CLASS CODE/ISSUE YR (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
PLATE 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
REET	CITY 120 E BALTIMORE ST 25 FL	STATE BALTIMORE
LIEN CODE	SECOND LIENHOLDER	LIEN DATE
REET	CITY	STATE
REET	CITY	STATE

REGISTRANT INFORMATION (OWNER OF PLATE)

NAME	NAME	MAO ☐	ILU ☐
ADDRESS	CITY	STATE	ZIP CODE

VEHICLE COST / TAX INFORMATION * (required for Title & Registration Transactions)

TRADE 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
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I, the undersigned, for penalties of perjury, 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.

NATURE OF CERTIFIER/OWNER	POWER OF ATTORNEY/AUTHORIZED SIGNATURE (IF APPLICABLE)	DATE 09/28/2012
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PLATE NUMBER 12272 @	COUNTY NAME HAMILTON	CO NUMBER 33	DATE OF APPLICATION 09/28/2012	BY AUTHORITY OF REGISTRAR OF MOTOR VEHICLES (COUNTY CLERK) W.F. (BILL) KNOWLES	HJC27
*FEES USE ONLY (total fees collected indicated certifies this form as a valid registration)					
REGISTRATION FEE 79.75	CREDIT	LEASE FEE	TRANS FEE	CLERK FEE 12.00	TITLE FEE 5.50
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