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

OFFICIAL VEHICLE REGISTRATION

City Stickers:										6773	95
NEW OR CURRENT TITLE NUM 90486859	MBER			TR	ODE OD1	REGIS	STRATION ONLY NUME	BER			
OWNER INFORMATION *LEGAL LAST NAME BOWMAN TRAI		FIRST NAME	R NAME CODE IN	N BOX 1 (SAME	E) 2(DIFFERE	NT) 3(MULTIPLE LA LAST NAME	ST NAMES) 4(COMPA	NY) 5(OVER 28 CHARAC FIRST NAME	TERS) 4	MAO N ILU MIDDLE INITIA	
ADDRESS 1 (MAILING)		ADDRESS 2 (PHYS	SICAL)								
10233 GOVERN	ZIP CODE		CITY		S	TATE	ZIP CODE				
WILLIAMSPORT Entry of residence/Principal Bus on incorp location PURCHASE DA			MD 21795								
		06/29/20	06/29/2012 LEASED 0 SEE REVERSE SIDE		VICE OPTION			ACARD/HEARING IMPAI	RED CLS/YR	*INSURANCE POLICY #	
VEHICLE INFORMATION VIN		MAKE	MODEL	YEAR	BODY	TITLE BRAND - tr	ranslation	CODE	TYPE OF FU	EL - translation	CODE
1GRAA06278T547146		GDAN	1GR	2008	SE	USED		U			9
SURRENDERED TITLE #	STATE PREVIOUS STATES TITLED			VEHICLE U	INDICATOR O			OVER 10 YRS	ACTUAL (0) NOT ACTUAL (8) CODE OVER 10 YRS / 16,000 LBS (1) N EXCESS OF MECHANICAL LIMITS (9)		
76936188 COLOR CODE (enter appropriate c UPPER LOWER O	TN TI	# AXLES GROSS VE			S VEHICLE TRADE-IN DESCRIPTION				COMPANY VEHICLE # 677395		
PLATE INFORMATION *(require PLATE #(1) CLA	ed for Title and Registr SSCODE/ISSUEYR(1)	(3) VALIDATI		ctions) SEE RE		FOR COMPLETE IN TY STICKER #(1)(2)	STRUCTIONS *PLATE #(TRADE IN)(2) CLASS CODE	/ISSUE YR(2)	EXPIRATION DATE PERMA	
TDR STICKER #(4)		ERMIT #(3) # OF SEATS(5) ZON		ZONE(CO	UNTY NAME)	(6)	USDOT / REGISTRANT #(7)		MOTOR CARRIER #(8)		
STREET	NTRUST BA					BALTI	MORE		MD ATE	ZIP CODE ZIP CODE ZIP CODE	9/2012 ATE
*LESSEE / REGISTRANT INFO	RMATION(OWNER O	F PLATE)	LEGAL S	STATUS	NAME	CODE	MAO LIU				
ADDRESS					CITY				STATE ZIP CODE		
VEHICLE COST / TAX INFORM			n Transactions)	Tava	BLE AMOUNT		SALESTAX PAID		T+TAV EVEN	IPTION REASON / SALES	# VATS
SALE PRICE TRADE IN ALLOWANCE DEALER NAME DEALE				ER ADDRESS			SALESTAX PAID	-	DEALER #		
*Required for Duplicate Title - T	STOLEN		MUTILATE	D [N'D DUE TO NON D		ALTERED		ILLEGIBLE	
Under penalties of perjury, I here or its assignees to determine the SIGNATURE OF CERTIFIER/O		on provided is true nation provided by	me or on my beha	OWER OF ATT	FORNEY/AUTH	HORIZED SIGNATUR	RE(IF APPLICABLE)		DATE	09/19/2012	2
NVOICE NUMBER COUNTY NAME CO. 12263 @ HAMILTON			NUMBER 33				OF REGISTRAR OF MO	KNOWLES HJC2			
OFFICE USE ONLY REGISTRATION FEE 79.75	EMISSION: 7	railer LEAS	SE FEE	TRA	ANS FEE	CLERK FEE	(total fees coll ISSUANCE FEE 12.00	TITLE FEE 5.50	this form as a		
COMPUTATION OF	SALES OR USE TA	X SA TAX		LTAX A	DDITIONAL T		LECTED IN STATE OF	COUNTY WHEEL TA		STICKER FEE	