

## OFFICIAL VEHICLE REGISTRATION

City Stickers:										68100	2/_
NEW OR CURRENT TITLE NUM 90487001	BER			TR	ODE*	REGISTA	RATION ONLY NUMBE	R			
OWNER INFORMATION *LEGAL	_STATUS: 1 (AND) 2 (0R)	ENTER NA	ME CODE IN	BOX 1 (SAME	E) 2(DIFFEREN	NT) 3(MULTIPLE LAST	NAMES) 4(COMPANY	) 5(OVER 28 CHARACT	ERS) 4	MAO N ILU	N
BOWMAN TRAII		JI NAME	MII	DDLE INITIAL		LAST NAME		FIRST NAME		MIDDLE INITIA	L
ADDRESS 1 (MAILING)						ADDRESS 2 (PHYSIC	CAL)				
10233 GOVERN	OR LN BLVD									ZIP CODE	
WILLIAMSPORT  NITY OF RESIDENCE/PRINCIPAL BUS OR INCORP LOCATION   F		MD 21		ZIP CODE 21795		TELEPHONE # PLACARD/HE.		2/1	STATE  EARING IMPAIRED CLS/YR   *IN		4
HAMILTON 033	107010	6/29/2012	LEASED SEE REV	O SER	VICE OPTIONS		82 1793	AND/REANING IMP AIR	TED GEO/TI	*INSURANCE POLICY	-
VEHICLE INFORMATION VIN	Тм	AKE	MODEL	YEAR	BODY	TITLE BRAND - tran	nslation	CODE	TYPE OF I	FUEL - translation	CODE
1GRAP06219T552259		GDAN 1GR		2009	SE	USED		U			9
SURRENDERED TITLE #		STATE PREVIOUS STATES T		TITLED	VEHICLE US	SE VEHICLE TYPE	CURRENT MILE	INDICATOR	OVER 10 YE	) NOT ACTUAL (8) RS / 16,000 LBS (1) OF MECHANICAL LIMITS (9)	CODE 1
COLOR CODE (enter appropriate co UPPER LOWER				OSS VEHICLE		*VEHICLE TRADE-	IN DESCRIPTION		COMPANY VEHICLE #		
0										00	1021
	SSCODE/ISSUEYR(1)(3)	VALIDATION #		UNTY STICK			*PLATE #(TRADE IN)(2	) CLASS CODE/I	SSUE YR(2	expiration date	
U383282 TDR STICKER #(4)	8020/1994 EMP OPERATOR PERMIT	#(3) # OF	F SEATS(5)	ZONE(CO	OUNTY NAME)(	6) U	SDOT / REGISTRANT #	(7)	l N	MOTOR CARRIER #(8)	AINCINI
LIEN CODE FIRST LIENH	OLDER	_								LIEN DA	TE 9/2012
STREET	NTRUST BAN	·									9/2012
120 E DAI						CITY		STA	TE	ZIP CODE	
LIEN CODE SECOND LIE	TIMORE ST 2	.5 FL				BALTIN	IORE	STA	MD	ZIP CODE 21202 LIEN DA	TE
LIEN CODE SECOND LIE		25 FL					IORE	STA*	MD	21202	TE
		25 FL				BALTIN	IORE		MD	21202	TE
LIEN CODE SECOND LIE  STREET  *LESSEE / REGISTRANT INFOR	NHOLDER		LEGAL S	TATUS		BALTIM	MAO ILU		MD	21202	TE
LIEN CODE SECOND LIE  STREET  *LESSEE / REGISTRANT INFOR	NHOLDER		LEGAL S	TATUS		BALTIM CODE NAME		STA	MD	21202	
LIEN CODE SECOND LIE  STREET  *LESSEE / REGISTRANT INFOFMAME  ADDRESS  VEHICLE COST / TAX INFORMA	NHOLDER  .  SMATION(OWNER OF PL	ATE)			NAME (	BALTIM CODE NAME	MAO ILU	STA	MD	ZIP CODE  ZIP CODE	
STREET  *LESSEE / REGISTRANT INFORMA  ADDRESS  VEHICLE COST / TAX INFORMA  SALE PRICE	NHOLDER  .  SMATION(OWNER OF PL	ATE)	nsactions)	TAXA	NAME ( CIT BLE AMOUNT	BALTIM CODE NAME		STA	MD	ZIP CODE  ZIP CODE  ZIP CODE	
LIEN CODE SECOND LIE  STREET  *LESSEE / REGISTRANT INFORMAME  ADDRESS	NHOLDER  .  SMATION(OWNER OF PL	ATE)	nsactions)		NAME ( CIT BLE AMOUNT	BALTIM CODE NAME	MAO ILU	STA	MD	ZIP CODE  ZIP CODE	
LIEN CODE SECOND LIES STREET  *LESSEE / REGISTRANT INFORM ADDRESS  VEHICLE COST / TAX INFORM SALE PRICE	NHOLDER  RMATION(OWNER OF PL  ATION "frequired for Title &  TRADE IN ALLOW	ATE) S. Registration Tra ANCE	nsactions)  DEALE	TAXA R ADDRESS	NAME ( CIT	BALTIM CODE NAME	MAO ILU	STA	MD	ZIP CODE  ZIP CODE  ZIP CODE	
STREET  *LESSEE / REGISTRANT INFORMA  ADDRESS  VEHICLE COST / TAX INFORMA  SALE PRICE  DEALER NAME  *Required for Duplicate Title - T.6	ATION '(required for Title & TRADE IN ALLOW	Registration Tra	DEALER tifficate of Title	TAXA	NAME (	BALTIM  CODE	SALESTAX PAID	STA* STA*	MD  TE  ATE  *TAX EX	ZIP CODE  ZIP CODE  ZIP CODE	
LIEN CODE SECOND LIES  STREET  *LESSEE / REGISTRANT INFORMA  ADDRESS  VEHICLE COST / TAX INFORMA  SALE PRICE  DEALER NAME  *Required for Duplicate Title - T.G	ATION *(required for Title & TRADE IN ALLOW  C.A. 55-3-115 (submit Illeg  STOLEN  by certify all information practuracy of the information	Registration Tra	DEALEI  DEALEI  tificate of Title  MUTILATED  correct to the tor on my behal	TAXA	NAME (CIT	BALTIM  CODE	SALESTAX PAID  JEVERY  ot the responsibility of the	STA* STA*	MD  TE  ATE  *TAX EX	ZIP CODE  ZIP CODE  ZIP CODE  DEALER #	STAX#
LIEN CODE SECOND LIES  STREET  *LESSEE / REGISTRANT INFORM  ADDRESS  VEHICLE COST / TAX INFORM  SALE PRICE  DEALER NAME  *Required for Duplicate Title - T.6  LOST  Under penalties of perjury, I heret or its assignees to determine the SIGNATURE OF CERTIFIER/OV	ATION *(required for Title & TRADE IN ALLOW  C.A. 55-3-115 (submit Illeg  STOLEN  by certify all information practuracy of the information	Registration Tra	DEALEI ttificate of Title MUTILATED correct to the tor on my behal	TAXA	NAME (CIT	BALTIM  CODE NAME  Y  I'D DUE TO NON DEL  cknowledge that it is n  ORIZED SIGNATURE	SALESTAX PAID  SALESTAX PAID  Of the responsibility of the respons	STA* STA*	MD  TE  ATE  TAX EX	ZIP CODE  ZIP CODE  ZIP CODE  ZIP CODE  DEALER #  ILLEGIBLE  TE  09/19/2012	STAX#
LIEN CODE SECOND LIES  STREET  *LESSEE / REGISTRANT INFORM  NAME  ADDRESS  VEHICLE COST / TAX INFORM  SALE PRICE  DEALER NAME  *Required for Duplicate Title - T.3  LOST  Under penalties of perjury, I heretor its assignees to determine the ISIGNATURE OF CERTIFIER/OV  INVOICE NUMBER  12263 @	ATION '(required for Title & TRADE IN ALLOW  C.A. 55-3-115 (submit Illeg  STOLEN  by certify all information productoracy of the information WNER  COUNTY NAME  HAMILTON	ATE)  Registration Tra  ANCE  ble or altered Cer  wided is true and provided by me of	DEALEI ttificate of Title MUTILATED correct to the tor on my behal	TAXA	NAME ( CIT BLE AMOUNT  RTI  Owledge, and a FORNEY/AUTH  DATE OF AP	BALTIM  CODE NAME  Y  I'D DUE TO NON DEL  cknowledge that it is n  ORIZED SIGNATURE	SALESTAX PAID  SALESTAX PAID  Of the responsibility of the responsibility of the APPLICABLE)  BY AUTHORITY OF W.F. (BIL	ALTERED e Motor Vehicle Division F REGISTRAR OF MOT L) KNOWLES	MD  TE  ATE  TAX EX  TOR VEHICLE  S	ZIP CODE  ZIP CODE  ZIP CODE  ZIP CODE  ILLEGIBLE  TE  09/19/2012  LES(COUNTY CLERK)	STAX#
LIEN CODE SECOND LIES  STREET  *LESSEE / REGISTRANT INFORMA  ADDRESS  VEHICLE COST / TAX INFORMA  SALE PRICE  DEALER NAME  *Required for Duplicate Title - T.6  LOST  Under penalties of perjury, I heretor its assignees to defermine the SIGNATURE OF CERTIFIER/OV  INVOICE NUMBER	ATION '(required for Title & TRADE IN ALLOW  C.A. 55-3-115 (submit Illeg  STOLEN  by certify all information practuracy of the information WNER	ATE)  Registration Tra  ANCE  ble or altered Cer  wided is true and provided by me of	DEALEI  Ittificate of Title  MUTILATED  correct to the lor on my behal  PO'	TAXAI R ADDRESS ) best of my known WER OF ATT NUMBER 33	NAME ( CIT BLE AMOUNT  RTI  Owledge, and a FORNEY/AUTH  DATE OF AP	BALTIM  CODE M  NAME  Y  TO DUE TO NON DEL  cknowledge that it is n  ORIZED SIGNATURE	SALESTAX PAID  SALESTAX PAID  Of the responsibility of the responsibility of the APPLICABLE)  BY AUTHORITY OF W.F. (BIL	ALTERED  e Motor Vehicle Division  F REGISTRAR OF MOT  L) KNOWLES  ted Indicated certifies to  TITLE FEE  5.50	MD  TE  TAX EX  TOR VEHICLES  TO TO	ZIP CODE  ZIP CODE  ZIP CODE  ZIP CODE  ZIP CODE  ZIP CODE  LESSON / SALES  DEALER #  LLEGIBLE  TE  09/19/2012  LES(COUNTY CLERK)  LA valid registration)  DTAL TAX COLLECTED  .00	STAX#
LIEN CODE SECOND LIEN  STREET  *LESSEE / REGISTRANT INFORMATE  ADDRESS  VEHICLE COST / TAX INFORMATE  ADDRESS  DEALER NAME  *Required for Duplicate Title - T.(  LOST  Under penalties of perjury, I heret or its assignees to determine the SIGNATURE OF CERTIFIER/OV  INVOICE NUMBER  12263 @  OFFICE USE ONLY  REGISTRATION FEE	ATION "(required for Title & TRADE IN ALLOW  C.A. 55-3-115 (submit Illeg  STOLEN  STOLEN  Dy certify all information praccuracy of the information NNER  COUNTY NAME  HAMILTON  EMISSION: Trail  CREDIT	ATE)  Registration Tra  ANCE  ble or altered Cer  wided is true and provided by me of	DEALEI  Ittificate of Title  MUTILATED  correct to the lor on my behal  PO'	TAXAI R ADDRESS ) best of my known WER OF ATT NUMBER 33	NAME (CIT BLE AMOUNT RTIN Owledge, and a FORNEY/AUTHDATE OF AP 09)	BALTIM  CODE NAME  NAME  Y  I'D DUE TO NON DEL  Cknowledge that it is n  ORIZED SIGNATURE  PLICATION  /19/2012  CLERK FEE	SALESTAX PAID  SALESTAX PAID  Of the responsibility of the second of the	ALTERED  e Motor Vehicle Division  F REGISTRAR OF MOT  L) KNOWLES  ted Indicated certifies to	MD  TE  TAX EX  TOR VEHICLES  TO TO	ZIP CODE  ZIP CODE  ZIP CODE  ZIP CODE  ZIP CODE  ZIP CODE  LEMPTION REASON / SALES  DEALER #  ILLEGIBLE  TE  09/19/2012  LES(COUNTY CLERK)  LIA VAIId registration)  DTAL TAX COLLECTED	STAX#