



OFFICIAL VEHICLE REGISTRATION

764495

Vehicle Information

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|--|------------------------------------|---|
| VEHICLE OR CURRENT TITLE NUMBER 11440208 | TRANSACTION CODE 001 | REGISTRATION ONLY NUMBER |
| OWNER 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) 4 | | MAO <input checked="" type="checkbox"/> ILU <input checked="" type="checkbox"/> |
| OWNER NAME FIRST NAME BOWMAN TRAILER LEASING LLC | | LAST NAME FIRST NAME BOWMAN TRAILER LEASING LLC |
| ADDRESS 1 (MAILING) PO BOX 433 % 10233 GOVERNOR LN BLVD | | ADDRESS 2 (PHYSICAL) |
| CITY MILLIAMSPORT | STATE MD | ZIP CODE 21795 |
| DATE OF RESIDENCE/PRINCIPAL BUS OR INCOMP. LOCATION HAMILTON 033 | PURCHASE DATE 12/14/2012 | TELEPHONE # 301 582 1793 |
| *LEASED <input checked="" type="checkbox"/> *SERVICE OPTIONS <input type="checkbox"/> | | *PLACARD/HEARING IMPAIRED CLS/YR |
| SEE REVERSE SIDE FOR INSTRUCTIONS | | *INSURANCE POLICY # |

Vehicle Information

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|---|---------------------------------|-------------------------------------|-------------------------|--------------------------|--|---|------------------------------------|------------------|
| VEHICLE IDENTIFICATION NUMBER 1DW1A53254B704002 | MAKE STOU | MODEL AVW | YEAR 2004 | BODY SE | TITLE BRAND - translation USED | CODE U | TYPE OF FUEL - translation | CODE 9 |
| PREVIOUS TITLE # 1641736 | STATE ME | PREVIOUS STATES TITLED TN | VEHICLE USE F | VEHICLE TYPE S | CURRENT MILEAGE | ODOMETER ACTUAL (0) NOT ACTUAL (8) INDICATOR OVER 10 YRS / 16,000 LBS (1) (List one) IN EXCESS OF MECHANICAL LIMITS (9) | CODE 1 | |
| VEHICLE OR CODE (enter appropriate code) LOWER 0 | MOBILE HOME LGTH 0 | WIDTH 0 | # AXLES 0 | GROSS VEHICLE WEIGHT | *VEHICLE TRADE-IN DESCRIPTION | | COMPANY VEHICLE # 764495 | |

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

| | | | | | | | |
|---------------------------------|--|------------------|------------------------|--------------------------|-------------------------|-------------------------|---|
| VEHICLE # (1) J409210 | CLASSCODE/ISSUEYR (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 |
| 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 CODE 0 | FIRST LIENHOLDER SUNTRUST BANK | LIEN DATE 12/14/2012 |
| REET 120 E BALTIMORE ST 25 FL | CITY BALTIMORE | STATE MD |
| ZIP CODE 21202 | | |
| LIEN CODE 0 | SECOND LIENHOLDER | LIEN DATE |
| REET | CITY | STATE |
| ZIP CODE | | |

SEE / REGISTRANT INFORMATION (OWNER OF PLATE)

| | | | |
|---------------------------------------|------------------------------------|------------------------------|------------------------------|
| LEGAL STATUS <input type="checkbox"/> | NAME CODE <input type="checkbox"/> | MAO <input type="checkbox"/> | ILU <input type="checkbox"/> |
| NAME | | | |
| CITY | | | |
| STATE | | | |
| ZIP CODE | | | |

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 # | |

Vehicle Information * (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 DELIEVERY | <input type="checkbox"/> ALTERED | <input type="checkbox"/> ILLEGIBLE |
|-------------------------------|---------------------------------|------------------------------------|---|----------------------------------|------------------------------------|

I, the undersigned, 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 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 01/11/2013 |
|---------------------------|--|---------------------------|

| | | | | | |
|--|--------------------------------|------------------------|--|--|--------------------------|
| OFFICE NUMBER 13011 @ | COUNTY NAME HAMILTON | CO NUMBER 33 | DATE OF APPLICATION 01/11/2013 | BY AUTHORITY OF REGISTRAR OF MOTOR VEHICLES (COUNTY CLERK) W.F. (BILL) KNOWLES | HJC27 |
| VEHICLE USE ONLY EMISSION: Trailer | | | | | |
| REGISTRATION FEE 79.75 | CREDIT | LEASE FEE | TRANS FEE | CLERK FEE 12.00 | TITLE FEE 5.50 |
| SALES OR USE TAX | | | SA TAX | LOCAL TAX | ADDITIONAL TAX |
| SALES TAX <input type="checkbox"/> USE TAX | | | COLLECTED IN STATE OF | | |
| COUNTY WHEEL TAX | | | CITY STICKER FEE | | |
| SERVICE OPT FEE | | | ORGAN DONOR | POSTAGE | VER |
| ID / RESIDENCY VERIFICATION | | | TOTAL FEES COLLECTED 97.25 | | |