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

## OFFICIAL VEHICLE REGISTRATION

| City Stickers:  |   |  |                               |                     |                                |                                |                         |   |   | 7                  | 6453                             | )                 |
|---|---|--|-------------------------------|---------------------|--------------------------------|--------------------------------|-------------------------|---|---|--------------------|----------------------------------|-------------------|
| NEW OR CURRENT TITLE NUMBER 91442018                                |   |  |                               |                     | RANSACTION<br>ODE              | REGISTRATION ONLY NUMBER       |                         |   |   |                    |                                  |                   |
| OWNER INFORMATION *LEI  | GAL STATUS: 1 (AND) 2   | (OR) ENTER                               | NAME CODE IN                  | BOX 1 (SAM          | E) 2(DIFFERE                   | NT) 3(MULTIPLE LA<br>LAST NAME | ST NAMES) 4(            | COMPANY) 5(OV   | ER 28 CHARACT                             | ERS) 4             | MAO N ILU                        |                   |
| BOWMAN TRA  | AILER LEASI   | NG LLC                                   |                               |                     |                                |                                |                         |   |   |                    |                                  |                   |
| PO BOX 433  | % 10233   | GOVERN                                   | OBINB                         | LVD                 |                                | ADDRESS 2 (PHYS                | SICAL)                  |   |   |                    |                                  |                   |
| CITY  | 70 10200  | STAT                                     |                               | ZIP CODE            |                                | CITY                           |                         |   | S   | TATE               | ZIP CODE                         |                   |
| WILLIAMSPO  | MD 217  |  |                               |                     |                                |                                | 1.00.1000               | HEARING IMPAIR  | orn ci cwn T                              | *INSURANCE POLIC   | V #                              |                   |
| HAMILTON 03   | PURCHASE DATE 12/14/2012 *LEASED SEE REVI                     |  | D SERVICE OPTION              |                     |                                |                                |                         | HEARING IMPAIR  | INSURANCE POLIC                           | A SECTION          |                                  |                   |
| VEHICLE INFORMATION VIN   |   | MAKE                                     | MODEL                         | YEAR                | BODY                           | TITLE BRAND - to               | ranslation              |   | CODE                                      | TYPE OF FUE        | L - translation                  | CODE              |
| 1DW1A532X4B704044   |   | STOU AVW                                 |                               | 2004                | SE                             | USED                           |                         |   |   | U                  |                                  | 9                 |
| SURRENDERED TITLE #   | STATE PREVIOUS STATES TITLE                                   |  | TITLED                        | VEHICLE USE VEHICLE |                                | CURRENT MILEAGE                |                         | ODOMETER ACTUAL (0) NOT ACTUAL (8) INDICATOR OVER 10 YRS / 16,000 LBS (1) |   | 16,000 LBS (1)     | CODE                             |                   |
| 11641754  | ME TN   |  |                               | F                   | S WEIGHT *VEHICLE TRADE-IN DES |                                |                         | (List one) IN EXCESS OF MECHANICAL LIMITS (9)  CRIPTION COMPANY VEHICLE # |   |                    | 1                                |                   |
| COLOR CODE (enter appropriat<br>UPPER LOWE                          | te code)* MOBILE H  | OME<br>WDTH                              | # AXLES                       | GRO                 | OSS VEHICLE                    | WEIGHT                         | VEHICL                  | LE THADE-IN DES   | ochir HUN                                 |                    |                                  | 64537             |
| PLATE INFORMATION *(required) PLATE #(1) CI                         | uired for Title and Registr                                   |  |                               | tions) SEE RE       |                                | FOR COMPLETE IN                | *PLATE #(TF             | RADE IN)(2)   | CLASS CODE/                               | ISSUE YR(2)        | EXPIRATION DATE                  | (1)(2)(3)         |
| U409529   | 8020/199  |  |                               |                     |                                |                                |                         |   |   |                    | PERM                             | ANEN <sup>-</sup> |
| TDR STICKER #(4)  | TEMP OPERATOR PE  | RMIT #(3)                                | # OF SEATS(5) ZONE(COUNTY NAM |                     |                                | (6)                            | USDOT / REGISTRANT #(7) |   |   | MOTOR CARRIER #(8) |                                  |                   |
|   | present)<br>ENHOLDER  | ANK                                      |                               |                     | Consti                         | 50.25.200.11                   |                         | 10.2  |   |                    | LIEN DA                          | ATE 4/2012        |
| STREET 120 F B  | ALTIMORE S  | T 25 FI                                  |                               |                     |                                | BALTI                          | MORE                    |   | STA                                       | TE<br>MD           | ZIP CODE<br>21202                |                   |
|   | LIENHOLDER  | 12012                                    |                               |                     |                                | DALI                           |                         |   |   |                    | LIEN DA                          | ATE               |
|   |   |  |                               |                     |                                | 0.704                          |                         |   | STA                                       | 75                 | ZIP CODE                         |                   |
| STREET  |   |  |                               |                     |                                | CITY                           |                         |   | 318                                       |                    | ZIF CODE                         |                   |
| *LESSEE / REGISTRANT INF  | FORMATION(OWNER C   | F PLATE)                                 | LEGAL S                       | STATUS              | NAME                           | CODE NAME                      | мао 🗌                   | ILU 🗌   |   |                    |                                  |                   |
| ADDRESS   |   |  |                               |                     | CITY                           |                                |                         |   | ST  | ATE                | ZIP CODE                         |                   |
| Ú.,   |   |  |                               |                     |                                |                                |                         |   | . 4 7 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 |                    |                                  | 10 713977         |
| VEHICLE COST / TAX INFOR  | RMATION *(required for TRADE IN AL                            |  | Transactions)                 | TAXA                | BLE AMOUNT                     |                                | SALESTA                 | X PAID  |   | *TAX EXEMP         | PTION REASON / SALE              | S TAX #           |
| DEALER NAME   |   |  | DEALE                         | R ADDRESS           |                                |                                |                         |   |   |                    | DEALER #                         |                   |
| *Required for Duplicate Title                                       | - T.C.A. 55-3-115 (submi                                      | Illegible or altered                     | Certificate of Title          | e)                  |                                |                                |                         |   |   |                    |                                  |                   |
| LOST  | STOLEN  |  | MUTILATE                      | D [                 | RT                             | N'D DUE TO NON D               | ELIEVERY                | ALT   | ERED                                      |                    | ILLEGIBLE                        |                   |
| Under penalties of perjury, I he<br>or its assignees to determine t | ereby certify all information the accuracy of the information | on provided is true and alon provided by | and correct to the            | best of my kn       | owledge, and                   | acknowledge that it is         | not the respon          | sibility of the Moto  | r Vehicle Division                        |                    |                                  |                   |
| SIGNATURE OF CERTIFIER  | VOWNER  |  | PC                            | OWER OF ATT         | TORNEY/AUTH                    | HORIZED SIGNATUR               | RE(IF APPLICA           | BLE)  |   | DATE               | 01/16/201                        | 3                 |
| NVOICE NUMBER   | HAMILT(   | אר                                       | co                            | NUMBER<br>33        |                                | /16/2013                       |                         | HORITY OF REG   |   | 2.0                | COUNTY CLERK)                    | HJC27             |
| OFFICE USE ONLY REGISTRATION FEE                                    | EMISSION:   |  | FEE                           |                     | ANS FEE                        | TCLERK FEE                     |                         | ees collected Ind   |   | his form as a va   | alid registration) TAX COLLECTED | 110021            |
| 79.75   |   |  |                               | 5350000             |                                |                                | 12.                     | .00   | 5.50                                      | .00                | )                                |                   |
| COMPUTATION OF  SALES TAX USE T                                     | SALES OR USE TA   | X SA TAX                                 | LOCAL                         | L TAX A             | DDITIONAL T                    | AX COL                         | LECTED IN ST            | ATE OF COU  | NTY WHEEL TA                              | CITYS              | TICKER FEE                       |                   |
| *SERVICE OPT FEE  | ORGAN DONOR   | POST                                     | AGE                           | VER                 |                                | ID / RESIDENC                  | CY VERIFICATI           | ON  |   |                    | .25                              |                   |
| 97-1357 Port: Wh  | K48/DR27/8020   | Cash:                                    | 0.00 0                        | heck: 0             | 00.0                           | heck#:                         | Credit:                 | 0.00 /  | \uth#:                                    | Change             | : 0.00 PDA                       | 692               |