



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

OFFICIAL VEHICLE REGISTRATION

770963

City Stickers:

WORK OR CURRENT TITLE NUMBER	TRANSACTION CODE	REGISTRATION ONLY NUMBER
84186432	N01	

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) <input checked="" type="checkbox"/> 5			MAO <input checked="" type="checkbox"/> N	ILU <input checked="" type="checkbox"/> N	
ST NAME	FIRST NAME	MIDDLE INITIAL	LAST NAME	FIRST NAME	MIDDLE INITIAL
BOWMAN SALES AND EQUIPMENT INC					
ADDRESS 1 (MAILING)			ADDRESS 2 (PHYSICAL)		
PO BOX 433 % 10233 GOVERNOR LN BLVD					
CITY	STATE	ZIP CODE	CITY	STATE	ZIP CODE
WILLIAMSPORT		MD	21795		
HOME OF RESIDENCE/PRINCIPAL BUS OR INCORP LOCATION	PURCHASE DATE	*LEASED <input checked="" type="checkbox"/> *SERVICE OPTIONS <input type="checkbox"/>	TELEPHONE #	*PLACARD/HEARING IMPAIRED CLS/YR	*INSURANCE POLICY #
HAMILTON 033	06/30/2011	SEE REVERSE SIDE FOR INSTRUCTIONS	301 582 1793		

VEHICLE INFORMATION								
VIN	MAKE	MODEL	YEAR	BODY	TITLE BRAND - list the appropriate code (N) NEW (U) USED (D) DEMO (S) SPECIALLY CONSTRUCTED (8) PARTS ONLY	CODE	TYPE OF FUEL - list the appropriate code (G) GAS (1) DIESEL (2) ELECTRIC/HYBRID (3) PROPANE (4)	CODE
1JJV532W94L838677	WABA	1JJ	2004	SE		U		9
PREVIOUS TITLE #	STATE	PREVIOUS STATES TITLED	VEHICLE USE	VEHICLE TYPE	CURRENT MILEAGE	ODOMETER ACTUAL (8) NOT ACTUAL (8) INDICATOR OVER 10 YRS / 16,000 LBS (1) IN EXCESS OF MECHANICAL LIMITS (9)	CODE	
723003314131	OK		F	S			1	
FOR CODE (enter appropriate code) * LOWER	MOBILE HOME LGTH	WDTH	# AXLES	GROSS VEHICLE WEIGHT	*VEHICLE TRADE-IN DESCRIPTION	COMPANY VEHICLE #		
0						770963		

STATE INFORMATION *required for Title and Registration and Registration Only Transactions SEE REVERSE SIDE FOR COMPLETE INSTRUCTIONS							
ATE # (1)	CLASS CODE/ISSUE YR (1)(3)	VALIDATION # (1)	COUNTY STICKER # (1)	CITY STICKER # (1)(2)	*PLATE # (TRADE IN) (2)	CLASS CODE/ISSUE YR (2)	EXPIRATION DATE (1)(2)(3)
U332510	8020/1994						PERMANENT
R 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	LIEN DATE	
	SUNTRUST BANK	06/30/2011	
REET	CITY	STATE	ZIP CODE
120 E BALTIMORE 25TH FL	BALTIMORE	MD	21202
SECOND LIENHOLDER	LIEN DATE		
REET	CITY	STATE	ZIP CODE

REGISTRANT INFORMATION (OWNER OF PLATE)		LEGAL STATUS <input type="checkbox"/>	NAME CODE <input type="checkbox"/>	MAO <input type="checkbox"/>	ILU <input type="checkbox"/>
NAME		NAME			
ADDRESS		CITY		STATE	ZIP CODE

VEHICLE COST / TAX INFORMATION *required for Title & Registration Transactions				
VEHICLE PRICE	TRADE IN ALLOWANCE	TAXABLE AMOUNT	SALES TAX PAID	TAX EXEMPTION REASON / SALES TAX #
DEALER NAME	DEALER ADDRESS	DEALER #		

required for Duplicate Title - T.C.A. 55-3-115 (submit if Renale or altered Certificate of Title)					
<input type="checkbox"/> LOST	<input type="checkbox"/> STOLEN	<input type="checkbox"/> MUTILATED	<input type="checkbox"/> RTND DUE TO NON DELIVERY	<input type="checkbox"/> ALTERED	<input type="checkbox"/> ILLEGIBLE

I 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.		POWER OF ATTORNEY/AUTHORIZED SIGNATURE (IF APPLICABLE)	DATE
SIGNATURE OF CERTIFIER/OWNER			11/18/2011

VOICE NUMBER	COUNTY NAME	CO NUMBER	DATE OF APPLICATION	BY AUTHORITY OF REGISTRAR OF MOTOR VEHICLES (COUNTY CLERK)		
11322 @	HAMILTON	33	11/18/2011	W.F. (BILL) KNOWLES HJC27		
FEE USE ONLY EMISSION: Trailer (total fees collected indicated certifies this form as a valid registration)						
REGISTRATION FEE	CREDIT	LEASE FEE	TRANS FEE	CLERK FEE	ISSUANCE FEE	TITLE FEE
79.75					12.00	5.50
COMPUTATION OF	SALES OR USE TAX	SA TAX	LOCAL TAX	ADDITIONAL TAX	COLLECTED IN STATE OF	COUNTY WHEEL TAX
<input type="checkbox"/> SALES TAX <input type="checkbox"/> USE TAX						
SERVICE OPT FEE	ORGAN DONOR	POSTAGE	VER	ID / RESIDENCY VERIFICATION	TOTAL FEES COLLECTED	
					97.25	