



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

OFFICIAL VEHICLE REGISTRATION

City Stickers:

776063

NEW OR CURRENT TITLE NUMBER 84188823	TRANSACTION CODE N01	REGISTRATION ONLY NUMBER
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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) 5 MAO <input checked="" type="checkbox"/> ILU <input checked="" type="checkbox"/>		
LAST NAME FIRST NAME MIDDLE INITIAL BOWMAN SALES AND EQUIPMENT INC		
ADDRESS 1 (MAILING) PO BOX 433 % 10233 GOVENOR LN BLVD		
ADDRESS 2 (PHYSICAL)		
CITY STATE ZIP CODE WILLIAMSPORT MD 21795		
CITY STATE ZIP CODE		
CITY OF RESIDENCE/PRINCIPAL BUS OR INCORP LOCATION HAMILTON 033	PURCHASE DATE 06/30/2011	*LEASED <input checked="" type="checkbox"/> *SERVICE OPTIONS <input type="checkbox"/> SEE REVERSE SIDE FOR INSTRUCTIONS
TELEPHONE # 301 582 1793		*PLACARD/HEARING IMPAIRED CLS/YR 5
		*INSURANCE POLICY #

VEHICLE INFORMATION																			
VIN 1JJV532W85L926816	MAKE WABA	MODEL 1JJ	YEAR 2005	BODY SE	TITLE BRAND - list the appropriate code (N) NEW (1) RECONSTRUCTED VEHICLE (U) USED (2) FLOOD DAMAGE (D) DEMO (3) SPECIALLY CONSTRUCTED (8) PARTS ONLY			CODE U	TYPE OF FUEL - list the appropriate code GAS (1) ELECTRIC/HYBRID (3) DIESEL (2) PROPANE (4)			CODE 9							
SURRENDERED TITLE # 041111F2773		STATE WI	PREVIOUS STATES TITLED		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								
COLOR CODE (enter appropriate code)* UPPER LOWER O	MOBILE HOME LGTH WIDTH	# AXLES	GROSS VEHICLE WEIGHT		*VEHICLE TRADE-IN DESCRIPTION			COMPANY VEHICLE # 776063											

PLATE INFORMATION *(required for Title and Registration and Registration Only Transactions) SEE REVERSE SIDE FOR COMPLETE INSTRUCTIONS							
PLATE # (1) U333709	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
TDR 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 DATE 06/30/2011	
LIEN CODE	FIRST LIENHOLDER SUNTRUST BANK				
STREET 120 E BALTIMORE 25TH FL	CITY BALTIMORE	STATE MD	ZIP CODE 21202		
LIEN CODE	SECOND LIENHOLDER			LIEN DATE	
STREET	CITY	STATE	ZIP CODE		

*LESSEE / 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)									
SALE PRICE	TRADE IN ALLOWANCE	TAXABLE AMOUNT	SALESTAX PAID	*TAX EXEMPTION REASON / SALES TAX #					
DEALER NAME		DEALER ADDRESS			DEALER #				

*Required for Duplicate Title - T.C.A. 55-9-115 (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 DELIVERY	<input type="checkbox"/> ALTERED	<input type="checkbox"/> ILLEGIBLE

Under penalties of perjury, 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 or its assignees to determine the accuracy of the information provided by me or on my behalf.		SIGNATURE OF CERTIFIER/OWNER		POWER OF ATTORNEY/AUTHORIZED SIGNATURE (IF APPLICABLE)		DATE 11/28/2011	
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INVOICE NUMBER 11332 @		COUNTY NAME HAMILTON		CO NUMBER 33		DATE OF APPLICATION 11/28/2011		BY AUTHORITY OF REGISTRAR OF MOTOR VEHICLES (COUNTY CLERK) W.F. (BILL) KNOWLES		HJC27	
OFFICE USE ONLY REGISTRATION FEE 79.75		CREDIT		LEASE FEE		TRANS FEE		CLERK FEE 12.00		TITLE FEE 5.50	
COMPUTATION OF <input type="checkbox"/> SALES TAX <input type="checkbox"/> USE TAX		SALES OR USE TAX		SA TAX		LOCAL TAX		ADDITIONAL TAX		TOTAL TAX COLLECTED .00	
*SERVICE OPT FEE		ORGAN DONOR		POSTAGE		VER		ID / RESIDENCY VERIFICATION		*TOTAL FEES COLLECTED 97.25	