

## VEHICLE TAXPAYER SERVICES DIVISION MULTI-PURPOSE APPLICATION

## OFFICIAL VEHICLE REGISTRATION

City Stickers:											77865	
NEW OR CURRENT TITLE N	IUMBER			TR	ANSACTION ODE	REGIS	TRATION ONL	Y NUMBER				
91448199					N01						E .	
OWNER INFORMATION "LE LAST NAME BOWMAN TRA		FIRST NAME	NAME CODE I	N BOX 1 (SAM	E) 2(DIFFEREN	NT) 3(MULTIPLE LA LAST NAME	ST NAMES) 4(C	COMPANY) 5(O	VER 28 CHARACT FIRST NAME	ERS) 4	MAO N ILU	
ADDRESS 1 (MAILING)	AILEN LEASI	NG LLC				ADDRESS 2 (PHY	SICAL)					
PO BOX 433	% 10233	GOVERN	OR LN E	BLVD								
WILLIAMSPORT		STATE MD 2		ZIP CODE 21795		CITY			STATE		ZIP CODE	
CHTY OF RESIDENCE/PRINCIPAL BUS OR INCORP LOCATION  HAMILTON 033		PURCHASE DATE 12/14/2012 LEASE SEE RE		SERVICE OPTIONS					HEARING IMPAIR	IED CLS/YR	*INSURANCE POLICY	*
VEHICLE INFORMATION		MAKE	MODEL	YEAR	BODY	TITLE BRAND -	ranslation		CODE	TYPE OF FUE	L - translation	CODE
1JJV532W05L928804			WABA 1JJ		SE	uam.			U			9
SURRENDERED TITLE #					0025		E TYPE CURRENT MILE		ODOMETER ACTUAL (0) NOT ACTUAL (8) INDICATOR OVER 10 YRS / 16,000 LBS (1)		OT ACTUAL (8)	CODE
11632388	ME			F	s			(List one) IN EXCESS (		G OF MECHANICAL LIMITS (9)		
COLOR CODE (enter appropriate code)* UPPER LOWER  MOBILE HOME WOTH			# AXLE	S GRO	OSS VEHICLE		*VEHICL	E TRADE-IN DI	DESCRIPTION		COMPANY VEHICLE # 778651	
PLATE INFORMATION *(reg	guired for Title and Regist	ration and Registral	tion Only Transa	actions) SEE RE	EVERSE SIDE	FOR COMPLETE IN	STRUCTIONS PLATE #(TF	SADE INVO	CLASS CODE/	SSUF YR/2)	EXPIRATION DATE	(1)(2)(3)
U416209	8020/199		N #(1) (	COUNTY STICK	(I) CI	TY STICKER #(1)(2)	FLATE #(IF	IAUC INJ(Z)	OLASS GODE/	JUL 111(2)	PERMA	
TDR STICKER #(4) TEMP OPERATOR PERMIT #(3)			# OF SEATS(5)	ZONE(CO	OUNTY NAME)	(6)	USDOT / REG	ISTRANT #(7)	) MOTOR CAR		OR CARRIER #(8)	
LIEN INFORMATION (If lien	present) ENHOLDER		12000				1000				LIEN DA	TE
	UNTRUST B	ANK				CITY			STA	TE	12/14 ZIP CODE	4/201
120 E B	ALTIMORE S	T 25 FL					MORE			MD	21202	
LIEN CODE SECOND	LIENHOLDER										LIEN DA	TE
STREET	CITY						STATE ZIP CODE					
*LESSEE / REGISTRANT IN	NFORMATION(OWNER O	OF PLATE)	LEGAL	STATUS	NAME	CODE	мао 🗌	ILU 🔲			ing Street will	
NAME						NAME						
ADDRESS		CITY						STATE ZIP CODE				
VEHICLE COST / TAX INFO	DRMATION *(required for TRADE IN A		Transactions)	TAXA	ABLE AMOUNT	T	SALESTA	X PAID		*TAX EXEM	PTION REASON / SALES	S TAX #
DEALER NAME			DEA	LER ADDRESS	5					DEALER #		
*Required for Duplicate Title	- T.C.A. 55-3-115 (subm	it Illegible or altered	Certificate of T	itle)				36597 L	- ( E. 25 6)			E PET
LOST	STOLEN		MUTILAT			IN'D DUE TO NON I			TERED		ILLEGIBLE	
Under penalties of perjury, I or its assignees to determine SIGNATURE OF CERTIFIE		ion provided is true mation provided by	and correct to ti me or on my be	he best of my kehalf. POWER OF AT	TORNEY/AUT	acknowledge that it HORIZED SIGNATU	RE(IF APPLICA	ABLE)	otor Vehicle Division	DATE	01/25/2013	3
INVOICE NUMBER	COUNTY NAME			ONUMBER		PPLICATION					S(COUNTY CLERK)	
13025 @ OFFICE USE ONLY	HAMILT EMISSION:			33	01	/25/2013	(total	fees collected I		this form as a	valid registration)	HJC2
REGISTRATION FEE	CREDIT	LEAS	E FEE	TF	RANS FEE	CLERK FEE	ISSUAN		5.50	TOTA	L TAX COLLECTED	
COMPUTATION OF	SALES OR USE T	AX SA TAX	LOC	CAL TAX	ADDITIONAL T	rax co	LLECTED IN S		O.OO UNTY WHEEL TA		STICKER FEE	
SALES TAX USE *SERVICE OPT FEE	ORGAN DONOR	POST	TAGE	VER		ID / RESIDEN	CY VERIFICAT	MOI			AL FEES COLLECTED	
Post: M	K48/DB27/8020	) Cash:	0.00	Check:	0.00	Check#:	Credit:	0.00	Auth#:		e: 0.00 RDA-	692