



## OFFICIAL VEHICLE REGISTRATION

## ity Stickers:

N OR CURRENT TITLE NUMBER

0483629

TRANSACTION  
CODE  
N01

REGISTRATION ONLY NUMBER

779107

OWNER INFORMATION \*LEGAL STATUS: 1 (AND) 2 (OR) ☐ ENTER NAME CODE IN BOX 1 (SAME) 2 (DIFFERENT) 3 (MULTIPLE LAST NAMES) 4 (COMPANY) 5 (OVER 28 CHARACTERS) ☒ 4MAO ☒ N ILU ☒ NFIRST NAME MIDDLE INITIAL LAST NAME FIRST NAME MIDDLE INITIAL  
BOWMAN TRAILER LEASING LLC

ADDRESS 1 (MAILING)

10233 GOVERNOR LN BLVD

ADDRESS 2 (PHYSICAL)

STATE ZIP CODE CITY STATE ZIP CODE  
MILLIAMSPORT MD 21795

ADDRESS OF RESIDENCE/PRINCIPAL BUS OR INCORP LOCATION

HAMILTON 033

PURCHASE DATE

06/29/2012

\*LEASED ☒ \*SERVICE OPTIONS ☐  
SEE REVERSE SIDE FOR INSTRUCTIONS

TELEPHONE #

301 582 1793

\*PLACARD/HEARING IMPAIRED CLS/YR

\*INSURANCE POLICY #

## VEHICLE INFORMATION

MAKE MODEL YEAR BODY TITLE BRAND - translation CODE TYPE OF FUEL - translation CODE  
WABA 1JJ 2005 SE USED U 9PREVIOUS STATES TITLED VEHICLE USE VEHICLE TYPE CURRENT MILEAGE ODOMETER ACTUAL (0) NOT ACTUAL (8)  
INDICATOR OVER 10 YRS / 16,000 LBS (1)  
IN EXCESS OF MECHANICAL LIMITS (9) CODE  
WI F S 1OR CODE (enter appropriate code)\* LOWER MOBILE HOME LGTH WIDTH # AXLES GROSS VEHICLE WEIGHT \*VEHICLE TRADE-IN DESCRIPTION COMPANY VEHICLE #  
779107

## VEHICLE INFORMATION \* (required for Title and Registration and Registration Only Transactions) SEE REVERSE SIDE FOR COMPLETE INSTRUCTIONS

CLASSCODE/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)  
J381998 8020/1994 PERMANENT

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 06/29/2012FEET CITY STATE ZIP CODE  
120 E BALTIMORE ST 25 FL BALTIMORE MD 21202

LIEN CODE SECOND LIENHOLDER LIEN DATE

FEET CITY STATE ZIP CODE

## SSEE / REGISTRANT INFORMATION (OWNER OF PLATE)

LEGAL STATUS ☐ NAME CODE ☐ MAO ☐ ILU ☐

NAME

ADDRESS CITY STATE ZIP CODE

## VEHICLE COST / TAX INFORMATION \* (required for Title &amp; Registration Transactions)

BASE 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. 55-3-115 (submit illegible or altered Certificate of Title)

☐ LOST ☐ STOLEN ☐ MUTILATED ☐ RTN'D DUE TO NON DELIVERY ☐ ALTERED ☐ ILLEGIBLEor 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  
to assignees 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  
09/10/2012OFFICE NUMBER COUNTY NAME CO NUMBER DATE OF APPLICATION BY AUTHORITY OF REGISTRAR OF MOTOR VEHICLES (COUNTY CLERK)  
12254 @ HAMILTON 33 09/10/2012 W.F. (BILL) KNOWLES HJC27REGISTRATION FEE CREDIT LEASE FEE TRANS FEE CLERK FEE ISSUANCE FEE TITLE FEE TOTAL TAX COLLECTED  
79.75 12.00 5.50 .00  
SALES OR USE TAX SA TAX LOCAL TAX ADDITIONAL TAX COLLECTED IN STATE OF COUNTY WHEEL TAX CITY STICKER FEE  
SALES TAX ☐ USE TAX  
SERVICE OPT FEE ORGAN DONOR POSTAGE VER ID / RESIDENCY VERIFICATION TOTAL FEES COLLECTED  
97.25

Port: WK48/DR27/8020 Cash: 0.00 Check: 0.00 Check#: Credit: 0.00 Auth#: Change: 0.00 RDA-692