



780294

|                                              |                                   |                          |
|----------------------------------------------|-----------------------------------|--------------------------|
| N OR CURRENT TITLE NUMBER<br><b>00485128</b> | TRANSACTION<br>CODE<br><b>N01</b> | REGISTRATION ONLY NUMBER |
|----------------------------------------------|-----------------------------------|--------------------------|

|                                                                                                                                                                                                                   |  |                                         |  |                                         |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-----------------------------------------|--|-----------------------------------------|--|
| 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"/> |  | MAO <input checked="" type="checkbox"/> |  | ILU <input checked="" type="checkbox"/> |  |
| FIRST NAME                                                                                                                                                                                                        |  | MIDDLE INITIAL                          |  | LAST NAME                               |  |
| BOWMAN TRAILER LEASING LLC                                                                                                                                                                                        |  |                                         |  |                                         |  |
| DRESS 1 (MAILING)                                                                                                                                                                                                 |  | ADDRESS 2 (PHYSICAL)                    |  |                                         |  |
| 10233 GOVERNOR LN BLVD                                                                                                                                                                                            |  |                                         |  |                                         |  |
| STATE                                                                                                                                                                                                             |  | ZIP CODE                                |  | CITY                                    |  |
| MD                                                                                                                                                                                                                |  | 21795                                   |  |                                         |  |
| OF RESIDENCE/PRINCIPAL BUS OR INCOMP LOCATION                                                                                                                                                                     |  | PURCHASE DATE                           |  | TELEPHONE #                             |  |
| HAMILTON 033                                                                                                                                                                                                      |  | 06/29/2012                              |  | 301 582 1793                            |  |
| *LEASED <input checked="" type="checkbox"/> *SERVICE OPTIONS <input type="checkbox"/>                                                                                                                             |  | SEE REVERSE SIDE FOR INSTRUCTIONS       |  | *PLACARD/HEARING IMPAIRED CLS/YR        |  |
|                                                                                                                                                                                                                   |  |                                         |  | *INSURANCE POLICY #                     |  |

|                                                    |  |                           |                        |              |                      |                                   |                               |  |                                                                                                                               |                             |           |           |
|----------------------------------------------------|--|---------------------------|------------------------|--------------|----------------------|-----------------------------------|-------------------------------|--|-------------------------------------------------------------------------------------------------------------------------------|-----------------------------|-----------|-----------|
| TITLE INFORMATION                                  |  |                           |                        |              |                      |                                   |                               |  |                                                                                                                               |                             |           |           |
| IJJV532WX5L931693                                  |  | MAKE<br>WABA              | MODEL<br>1JJ           | YEAR<br>2005 | BODY<br>SE           | TITLE BRAND - translation<br>USED |                               |  | CODE<br>U                                                                                                                     | TYPE OF FUEL - translation  |           | CODE<br>9 |
| RENDERED TITLE #<br>J4201010106                    |  | STATE<br>WI               | PREVIOUS STATES TITLED |              | VEHICLE USE<br>F     | VEHICLE TYPE<br>S                 | CURRENT MILEAGE               |  | ODOMETER ACTUAL (9) NOT ACTUAL (8)<br>INDICATOR OVER 10 YRS / 16,000 LBS (1)<br>(List one) IN EXCESS OF MECHANICAL LIMITS (9) |                             | CODE<br>1 |           |
| OR CODE (enter appropriate code)*<br>ER LOWER<br>5 |  | MOBILE HOME<br>LGTH WIDTH |                        | # AXLES      | GROSS VEHICLE WEIGHT |                                   | *VEHICLE TRADE-IN DESCRIPTION |  |                                                                                                                               | COMPANY VEHICLE #<br>780294 |           |           |

|                                                                                                                                      |                                              |                  |                        |                          |                         |                         |                                               |
|--------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------|------------------|------------------------|--------------------------|-------------------------|-------------------------|-----------------------------------------------|
| *SEE INFORMATION *required for Title and Registration and Registration Only Transactions) SEE REVERSE SIDE FOR COMPLETE INSTRUCTIONS |                                              |                  |                        |                          |                         |                         |                                               |
| *ITE # (1)<br><b>J382683</b>                                                                                                         | CLASSCODE/ISSUEYR (1)(3)<br><b>8020/1994</b> | VALIDATION # (1) | COUNTY STICKER # (1)   | CITY STICKER # (1)(2)    | *PLATE # (TRADE IN) (2) | CLASS CODE/ISSUE YR (2) | EXPIRATION DATE (1)(2)(3)<br><b>PERMANENT</b> |
| # STICKER # (4)                                                                                                                      | TEMP OPERATOR PERMIT # (3)                   | # OF SEATS (5)   | ZONE (COUNTY NAME) (6) | USDOT / REGISTRANT # (7) | MOTOR CARRIER # (8)     |                         |                                               |

|                                 |                                       |            |          |
|---------------------------------|---------------------------------------|------------|----------|
| N INFORMATION (if lien present) |                                       |            |          |
| N CODE                          | FIRST LIENHOLDER                      | LIEN DATE  |          |
|                                 | SUNTRUST BANK                         | 06/29/2012 |          |
| REET                            | CITY                                  | STATE      | ZIP CODE |
|                                 | 120 E BALTIMORE ST 25 FL<br>BALTIMORE | MD         | 21202    |
| N CODE                          | SECOND LIENHOLDER                     | LIEN DATE  |          |
| REET                            | CITY                                  | STATE      | ZIP CODE |

|                                                |  |              |           |     |          |
|------------------------------------------------|--|--------------|-----------|-----|----------|
| SSEE / REGISTRANT INFORMATION (OWNER OF PLATE) |  | LEGAL STATUS | NAME CODE | MAO | ILU      |
| ME                                             |  | NAME         |           |     |          |
| DRESS                                          |  | CITY         | STATE     |     | ZIP CODE |

| *CICLE COST / TAX INFORMATION *(required for Title & Registration Transactions) |                    |                |               |                                     |
|---------------------------------------------------------------------------------|--------------------|----------------|---------------|-------------------------------------|
| LE PRICE                                                                        | TRADE IN ALLOWANCE | TAXABLE AMOUNT | SALESTAX PAID | *TAX EXEMPTION REASON / SALES TAX # |
| ALER NAME                                                                       |                    | DEALER ADDRESS |               |                                     |
|                                                                                 |                    | DEALER #       |               |                                     |

|                                                                                                                                                                                                                        |  |  |  |  |  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|--|--|
| <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, the undersigned, declare under penalty 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<br>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<br><br><b>09/13/2012</b> |

|                                                                     |  |                   |  |                                                                              |  |                     |  |                                                           |  |
|---------------------------------------------------------------------|--|-------------------|--|------------------------------------------------------------------------------|--|---------------------|--|-----------------------------------------------------------|--|
| OFFICE NUMBER                                                       |  | COUNTY NAME       |  | CO NUMBER                                                                    |  | DATE OF APPLICATION |  | BY AUTHORITY OF REGISTRAR OF MOTOR VEHICLES(COUNTY CLERK) |  |
| 12257 @                                                             |  | HAMILTON          |  | 33                                                                           |  | 09/13/2012          |  | W.F. (BILL) KNOWLES                                       |  |
| 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                                                 |  |
| 79.75                                                               |  |                   |  |                                                                              |  |                     |  | ISSUANCE FEE                                              |  |
|                                                                     |  |                   |  |                                                                              |  |                     |  | 12.00                                                     |  |
|                                                                     |  |                   |  |                                                                              |  |                     |  | TITLE FEE                                                 |  |
|                                                                     |  |                   |  |                                                                              |  |                     |  | 5.50                                                      |  |
|                                                                     |  |                   |  |                                                                              |  |                     |  | TOTAL TAX COLLECTED                                       |  |
|                                                                     |  |                   |  |                                                                              |  |                     |  | .00                                                       |  |
| IMPUTATION OF                                                       |  | SALES OR USE TAX  |  | SA TAX                                                                       |  | LOCAL TAX           |  | ADDITIONAL TAX                                            |  |
| <input type="checkbox"/> SALES TAX <input type="checkbox"/> USE TAX |  |                   |  |                                                                              |  |                     |  | COLLECTED IN STATE OF                                     |  |
|                                                                     |  |                   |  |                                                                              |  |                     |  | COUNTY WHEEL TAX                                          |  |
|                                                                     |  |                   |  |                                                                              |  |                     |  | CITY STICKER FEE                                          |  |
| SERVICE OPT FEE                                                     |  | ORGAN DONOR       |  | POSTAGE                                                                      |  | VER                 |  | ID / RESIDENCY VERIFICATION                               |  |
|                                                                     |  |                   |  |                                                                              |  |                     |  | TOTAL FEES COLLECTED                                      |  |
|                                                                     |  |                   |  |                                                                              |  |                     |  | 97.25                                                     |  |