



OFFICIAL VEHICLE REGISTRATION

780799

/ Stickers:

OR CURRENT TITLE NUMBER	TRANSACTION CODE	REGISTRATION ONLY NUMBER
483665	N01	

OR 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) ☒ 4 MAO ☒ N ILU ☒ N

NAME	FIRST NAME	MIDDLE INITIAL	LAST NAME	FIRST NAME	MIDDLE INITIAL
OWMAN TRAILER LEASING LLC					

ESS 1 (MAILING)

233 GOVERNOR LN BLVD

STATE	ZIP CODE	CITY	STATE	ZIP CODE
ILLIAMSPORT	MD	21795		

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 #
AMILTON 033	06/29/2012	301 582 1793		

VEHICLE INFORMATION

MAKE	MODEL	YEAR	BODY	TITLE BRAND - translation	CODE	TYPE OF FUEL - translation	CODE
JJV532W55L932198	WABA	1JJ	2005	SE USED	U		9

RENDERED TITLE #	STATE	PREVIOUS STATES TITLED	VEHICLE USE	VEHICLE TYPE	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
1245941517	WI		F	S			1

OR CODE (enter appropriate code) LOWER	MOBILE HOME LGTH	WIDTH	# AXLES	GROSS VEHICLE WEIGHT	*VEHICLE TRADE-IN DESCRIPTION	COMPANY VEHICLE #
						780799

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

CLASSCODE/ISSUEYR(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)
382219	8020/1994					PERMANENT

STICKER # (4)	TEMP OPERATOR PERMIT # (3)	# OF SEATS (5)	ZONE (COUNTY NAME) (6)	USDOT / REGISTRANT # (7)	MOTOR CARRIER # (8)

VEHICLE INFORMATION (If lien present)

CODE	FIRST LIENHOLDER	LIEN DATE
	SUNTRUST BANK	06/29/2012

REET	CITY	STATE	ZIP CODE
120 E BALTIMORE ST 25 FL	BALTIMORE	MD	21202

CODE	SECOND LIENHOLDER	LIEN DATE

REET	CITY	STATE	ZIP CODE

SSSEE / REGISTRANT INFORMATION (OWNER OF PLATE)

LEGAL STATUS <input type="checkbox"/>	NAME CODE <input type="checkbox"/>	MAO <input type="checkbox"/>	ILU <input type="checkbox"/>
NAME			

RESS

CITY	STATE	ZIP CODE

VEHICLE COST / TAX INFORMATION * (required for Title & Registration Transactions)

VE PRICE	TRADE IN ALLOWANCE	TAXABLE AMOUNT	SALESTAX PAID	*TAX EXEMPTION REASON / SALES TAX #

ALER NAME	DEALER ADDRESS	DEALER #

required for Duplicate Title - T.C.A. 55-3-115 (submit illegible or altered Certificate of Title)

<input type="checkbox"/> LOST	<input type="checkbox"/> STOLEN	<input type="checkbox"/> MUTILATED	<input type="checkbox"/> RTND'D DUE TO NON DELIVERY	<input type="checkbox"/> ALTERED	<input type="checkbox"/> ILLEGIBLE
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For penalties of perjury, I hereby certify that 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

Signature of Certifier/Owner

POWER OF ATTORNEY/AUTHORIZED SIGNATURE (IF APPLICABLE)	DATE
	09/10/2012

VOICE 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

ICE 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	TITLE FEE	TOTAL TAX COLLECTED
12.00	5.50	.00

COMPUTATION OF	SALES OR USE TAX	SA TAX	LOCAL TAX	ADDITIONAL TAX	COLLECTED IN STATE OF	COUNTY WHEEL TAX	CITY STICKER FEE
<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

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