



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

# OFFICIAL VEHICLE REGISTRATION

## City Stickers:

NEW OR CURRENT TITLE NUMBER

90483770

TRANSACTION  
CODE  
**N01**

REGISTRATION ONLY NUMBER

780920

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) <b>4</b>		MAO <input checked="" type="checkbox"/> ILU <input checked="" type="checkbox"/>
LAST NAME	FIRST NAME	MIDDLE INITIAL
<b>BOWMAN TRAILER LEASING LLC</b>		
ADDRESS 1 (MAILING)		ADDRESS 2 (PHYSICAL)
<b>10233 GOVERNOR LN BLVD</b>		
CITY	STATE	ZIP CODE
<b>WILLIAMSPORT</b>	<b>MD</b>	<b>21795</b>
TYPE OF RESIDENCE/PRINCIPAL BUS OR INCORP LOCATION	PURCHASE DATE	TELEPHONE #
<b>HAMILTON 033</b>	<b>06/29/2012</b>	<b>301 582 1793</b>
*LEASED <input checked="" type="checkbox"/> *SERVICE OPTIONS <input type="checkbox"/>		*PLACARD/HEARING IMPAIRED CLS/YR
SEE REVERSE SIDE FOR INSTRUCTIONS		*INSURANCE POLICY #

VEHICLE INFORMATION		MAKE		MODEL	YEAR	BODY	TITLE BRAND - translation	CODE	TYPE OF FUEL - translation	CODE
<b>1JJV532W25L932319</b>		<b>WABA</b>		<b>1JJ</b>	<b>2005</b>	<b>SE</b>	<b>USED</b>	<b>U</b>		<b>9</b>
PREVIOUS 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		
<b>042460F0404</b>		<b>WI</b>		<b>F</b>	<b>S</b>			<b>1</b>		
FOR CODE (enter appropriate code) *PER LOWER	MOBILE HOME LGTH WIDTH	# AXLES	GROSS VEHICLE WEIGHT		*VEHICLE TRADE-IN DESCRIPTION		COMPANY VEHICLE #			
<b>C</b>							<b>780920</b>			

TITLE INFORMATION *(required for Title and Registration and Registration Only Transactions) SEE REVERSE SIDE FOR COMPLETE INSTRUCTIONS							
STATE # (1)	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)
<b>J382246</b>	<b>8020/1994</b>						<b>PERMANENT</b>
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	
CODE	FIRST LIENHOLDER		
	<b>SUNTRUST BANK</b>	<b>06/29/2012</b>	
SECOND LIENHOLDER			
CITY		STATE	ZIP CODE
<b>120 E BALTIMORE ST 25 FL</b>		<b>MD</b>	<b>21202</b>
CITY		STATE	ZIP CODE
<b>BALTIMORE</b>			

SEE / REGISTRANT INFORMATION (OWNER OF PLATE)	LEGAL STATUS <input type="checkbox"/>	NAME CODE <input type="checkbox"/>	MAO <input type="checkbox"/>	ILU <input type="checkbox"/>
NAME				
CITY				
STATE				
ZIP CODE				

GROSS COST / TAX INFORMATION *(required for Title & Registration Transactions)				
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	<input type="checkbox"/>	STOLEN	<input type="checkbox"/>	MUTILATED	<input type="checkbox"/>	RTND DUE TO NON DELIVERY	<input type="checkbox"/>	ALTERED	<input type="checkbox"/>	ILLEGIBLE	<input type="checkbox"/>

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 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
			<b>09/10/2012</b>

FEES NUMBER	COUNTY NAME	CO NUMBER	DATE OF APPLICATION	BY AUTHORITY OF REGISTRAR OF MOTOR VEHICLES (COUNTY CLERK)		
<b>254 @</b>	<b>HAMILTON</b>	<b>33</b>	<b>09/10/2012</b>	<b>W.F. (BILL) KNOWLES</b>		
EMISSION: Trailer				<b>HJC27</b>		
(total fees collected indicated certifies this form as a valid registration)						
TRAFFIC FEE	CREDIT	LEASE FEE	TRANS FEE	CLERK FEE	ISSUANCE FEE	TITLE FEE
<b>.75</b>					<b>12.00</b>	<b>5.50</b>
SALES OR USE TAX		SA TAX	LOCAL TAX	ADDITIONAL TAX	COLLECTED IN STATE OF	COUNTY WHEEL TAX
SALES TAX <input type="checkbox"/> USE TAX		POSTAGE	VER	ID / RESIDENCY VERIFICATION	CITY STICKER FEE	
ICE OPT FEE		ORGAN DONOR	*TOTAL FEES COLLECTED			
			<b>97.25</b>			
Port: WK48/DR27/8020 Cash: 0.00 Check: 0.00 Check#: Credit: 0.00 Auth#: Change: 0.00						