



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

OFFICIAL VEHICLE REGISTRATION

ty Stickers:

| | | |
|---|--------------------------------|--|
| OR CURRENT TITLE NUMBER 1481244 | TRANSACTION CODE N01 | REGISTRATION ONLY NUMBER 80795 |
|---|--------------------------------|--|

| | | | |
|--|--|--|--|
| VER 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) 4 | | MAO <input checked="" type="checkbox"/> N | ILU <input checked="" type="checkbox"/> N |
| T NAME LOWMAN TRAILER LEASING LLC | | FIRST NAME LOWMAN | |
| ADDRESS 1 (MAILING) PO BOX 433 % 10233 GOVERNOR LN BLVD | | ADDRESS 2 (PHYSICAL) | |
| STATE MD | | ZIP CODE 21795 | |
| CITY VILLIAMSPORT | | STATE MD | |
| ZIP CODE 21795 | | CITY VILLIAMSPORT | |
| DATE OF RESIDENCE/PRINCIPAL BUS OR INCORP LOCATION HAMILTON 033 | | PURCHASE DATE 03/18/2013 | |
| *LEASED <input checked="" type="checkbox"/> *SERVICE OPTIONS <input type="checkbox"/> SEE REVERSE SIDE FOR INSTRUCTIONS | | TELEPHONE # 301 582 1793 | |
| *PLACARD/HEARING IMPAIRED CLS/YR | | *INSURANCE POLICY # | |

| | | | | | | | | | | | | | | | | | |
|---|--|---------------------------|--|------------------------|--|-------------------------|--|-------------------------------|--|--|--|---|--|----------------------------|--|------------------|--|
| VEHICLE INFORMATION | | MAKE WABA | | MODEL 1JJ | | YEAR 2005 | | BODY SE | | TITLE BRAND - translation USED | | CODE U | | TYPE OF FUEL - translation | | CODE 9 | |
| TRANSFERRED TITLE # 8982562 | | STATE ME | | PREVIOUS STATES TITLED | | VEHICLE USE F | | VEHICLE TYPE S | | 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 1 | | | |
| OR CODE (enter appropriate code)* ER LOWER | | MOBILE HOME LGTH WIDTH | | # AXLES | | GROSS VEHICLE WEIGHT | | *VEHICLE TRADE-IN DESCRIPTION | | COMPANY VEHICLE # 80795 | | | | | | | |

| | | | | | | | | | | | | | | | |
|--|--|--|--|------------------|--|------------------------|--|--------------------------|--|-------------------------|--|-------------------------|--|---|--|
| VEHICLE INFORMATION *(required for Title and Registration and Registration Only Transactions) SEE REVERSE SIDE FOR COMPLETE INSTRUCTIONS | | | | | | | | | | | | | | | |
| TE # (1) U435613 | | CLASS CODE/ISSUE YR (1)(3) 8020/1994 | | VALIDATION # (1) | | COUNTY STICKER # (1) | | CITY STICKER # (1)(2) | | *PLATE # (TRADE IN) (2) | | CLASS CODE/ISSUE YR (2) | | EXPIRATION DATE (1)(2)(3) 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) | | LIEN DATE 03/18/2013 | |
| FIRST LIENHOLDER SUNTRUST BANK | | CITY BALTIMORE | |
| ADDRESS 120 E BALTIMORE ST 25 FL | | STATE MD | |
| SECOND LIENHOLDER | | ZIP CODE 21202 | |
| CITY BALTIMORE | | STATE MD | |
| ZIP CODE | | CITY BALTIMORE | |

| | | | | | | | | | |
|---|--|---------------------------------------|--|------------------------------------|--|------------------------------|--|------------------------------|--|
| 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 | | NAME | | NAME | | NAME | | NAME | |
| ADDRESS | | CITY | | STATE | | ZIP CODE | | | |

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

| | | | | | | | | | | | |
|---|--|---------------------------------|--|------------------------------------|--|---|--|----------------------------------|--|------------------------------------|--|
| Required for Duplicate Title - T.C.A. 55-9-115 (submit if lien or altered Certificate of Title) | | | | | | | | | | | |
| <input type="checkbox"/> LOST | | <input type="checkbox"/> STOLEN | | <input type="checkbox"/> MUTILATED | | <input type="checkbox"/> RTN'D DUE TO NON DELIEVERY | | <input type="checkbox"/> ALTERED | | <input type="checkbox"/> ILLEGIBLE | |

| | | | | | | | |
|--|--|---------------------------|--|--|--|---------------------------|--|
| 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. | | NATURE OF CERTIFIER/OWNER | | POWER OF ATTORNEY/AUTHORIZED SIGNATURE (IF APPLICABLE) | | DATE 04/12/2013 | |
|--|--|---------------------------|--|--|--|---------------------------|--|

| | | | | | | | | | | | |
|--|--|--------------------------------------|--|------------------------|--|--|--|--|--|--|--|
| COUNTY NUMBER 3102 @ | | COUNTY NAME HAMILTON | | CO NUMBER 33 | | DATE OF APPLICATION 04/12/2013 | | BY AUTHORITY OF REGISTRAR OF MOTOR VEHICLES (COUNTY CLERK) W.F. (BILL) KNOWLES | | HJC27 | |
| VEHICLE USE ONLY EMISSION: Trailer | | CREDIT | | LEASE FEE | | TRANS FEE | | CLERK FEE | | (total fees collected indicated certifies this form as a valid registration) | |
| REGISTRATION FEE 9.75 | | SALES OR USE TAX | | SA TAX | | LOCAL TAX | | ADDITIONAL TAX | | COLLECTED IN STATE OF | |
| SALES TAX <input type="checkbox"/> USE TAX | | ORGAN DONOR | | POSTAGE | | VER | | ID / RESIDENCY VERIFICATION | | TOTAL TAX COLLECTED .00 | |
| SERVICE OPT FEE | | TOTAL FEES COLLECTED 97.25 | | | | | | | | | |