



OFFICIAL VEHICLE REGISTRATION

809884

Stickers:

REGISTRATION ONLY NUMBER	TRANSACTION CODE	REGISTRATION ONLY NUMBER
480891	001	

REGISTRATION 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		
JWMAN TRAILER LEASING LLC								
ADDRESS 1 (MAILING)		ADDRESS 2 (PHYSICAL)						
233 GOVERNOR LN BLVD								
STATE		ZIP CODE		CITY		STATE	ZIP CODE	
MD		21795						
RESIDENCE/PRINCIPAL BUS OR INCOMP LOCATION		PURCHASE DATE		TELEPHONE #		*PLACARD/HEARING IMPAIRED CLS/YR		*INSURANCE POLICY #
HAMILTON 033		06/29/2012		301 582 1793				

VEHICLE INFORMATION		MAKE	MODEL	YEAR	BODY	TITLE BRAND - translation		CODE	TYPE OF FUEL - translation	CODE
JYVS25375P501126		UTIL	1UY	2005	SE			U		9
VENDOR TITLE #		STATE	PREVIOUS STATES TITLED	VEHICLE USE	VEHICLE TYPE	CURRENT MILEAGE	ODOMETER ACTUAL (3) NOT ACTUAL (8) INDICATOR OVER 10 YRS / 16,000 LBS (1) (List one) IN EXCESS OF MECHANICAL LIMITS (9)		CODE	
3849083		TN	MS	F	S				1	
*R CODE (enter appropriate code) *R LOWER		MOBILE HOME LGTH WIDTH		# AXLES	GROSS VEHICLE WEIGHT		*VEHICLE TRADE-IN DESCRIPTION		COMPANY VEHICLE #	
									809884	

E INFORMATION *required for Title and Registration and Registration Only Transactions SEE REVERSE SIDE FOR COMPLETE INSTRUCTIONS										
E # (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)			
381146	8020/1994						PERMANENT			
STICKER # (4)	TEMP OPERATOR PERMIT # (3)	# OF SEATS (5)	ZONE (COUNTY NAME) (6)		USDOT / REGISTRANT # (7)	MOTOR CARRIER # (8)				

I INFORMATION (If lien present)		LIEN DATE	
I CODE	FIRST LIENHOLDER	06/29/2012	
SUNTRUST BANK			
CITY		STATE	ZIP CODE
BALTIMORE		MD	21202
120 E BALTIMORE ST 25 FL			
I CODE		SECOND LIENHOLDER	LIEN DATE
CITY		STATE	ZIP CODE

SSEE / REGISTRANT INFORMATION (OWNER OF PLATE)		LEGAL STATUS ☐	NAME CODE ☐	MAO ☐	ILU ☐
NAME		CITY			
		STATE			
ADDRESS		ZIP CODE			

VEHICLE COST / TAX INFORMATION *required for Title & Registration Transactions		TAXABLE AMOUNT	SALESTAX PAID	TAX EXEMPTION REASON / SALES TAX #
VEHICLE PRICE	TRADE IN ALLOWANCE			
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	☐ RTND DUE TO NON DELIVERY	☐ ALTERED	☐ ILLEGIBLE

Under 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 determine the accuracy of the information provided by me or on my behalf.		POWER OF ATTORNEY/AUTHORIZED SIGNATURE (IF APPLICABLE)	DATE
SIGNATURE OF CERTIFIER/OWNER			08/30/2012

VOICE NUMBER	COUNTY NAME	CO NUMBER	DATE OF APPLICATION	BY AUTHORITY OF REGISTRAR OF MOTOR VEHICLES (COUNTY CLERK)		
12243 @	HAMILTON	33	08/30/2012	W.F. (BILL) KNOWLES		
OFFICE USE ONLY				HJC27		
REGISTRATION FEE				(total fees collected indicated certifies this form as a valid registration)		
79.75				ISSUANCE FEE	TITLE FEE	TOTAL TAX COLLECTED
				12.00	5.50	.00
COMPUTATION OF				COLLECTED IN STATE OF		
SALES TAX ☐ USE TAX ☐				COUNTY WHEEL TAX		
CITY STICKER FEE						
SERVICE OPT FEE				TOTAL FEES COLLECTED		
				97.25		
ORGAN DONOR				POSTAGE		
VER				ID / RESIDENCY VERIFICATION		
Port: WK48/DR27/8020				Cash: 0.00 Check: 0.00 Check#: Credit: 0.00 Auth#: Change: 0.00		