



OFFICIAL VEHICLE REGISTRATION

City Stickers:

819008

NEW OR CURRENT TITLE NUMBER 84187802		TRANSACTION CODE 004	REGISTRATION ONLY NUMBER 1086955	
OWNER 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 ☒ ILU ☒				
LAST NAME BOWMAN TRAILER LEASING INC		FIRST NAME	MIDDLE INITIAL	LAST NAME BOWMAN TRAILER LEASING INC
ADDRESS 1 (MAILING) 10233 GOVERNOR LN BLVD		ADDRESS 2 (PHYSICAL)		
CITY WILLIAMSPORT		STATE MD	ZIP CODE 21795	CITY WILLIAMSPORT
COUNTY OF RESIDENCE/PRINCIPAL BUS OR INCORP LOCATION HAMILTON 033		PURCHASE DATE 06/30/2011	*LEASED ☒ *SERVICE OPTIONS ☐ SEE REVERSE SIDE FOR INSTRUCTIONS	TELEPHONE # 301 582 1793
		*PLACARD/HEARING IMPAIRED CLS/YR		*INSURANCE POLICY #

VEHICLE INFORMATION		VIN 1JJV532W1XL520413		MAKE WABA	MODEL 1JJ	YEAR 1999	BODY SE	TITLE BRAND - translation USED	CODE U	TYPE OF FUEL - translation	CODE 9
SURRENDERED TITLE #		STATE TN	PREVIOUS STATE WI	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		
COLOR CODE (enter appropriate code)* UPPER O	MOBILE HOME LGTH	WIDTH	# AXES	GROSS VEHICLE WEIGHT		*VEHICLE TRADE-IN DESCRIPTION			COMPANY VEHICLE # 819008		

PLATE INFORMATION *(required for Title and Registration and Registration Only Transactions) SEE REVERSE SIDE FOR COMPLETE INSTRUCTIONS							
PLATE #(1) U466507	CLASSCODE/ISSUEYR(1)(3) 8020/1994	VALIDATION #(1)	COUNTY STICKER #(1)	CITY STICKER #(1)(2)	*PLATE #(TRADE IN)(2) U333494	CLASS CODE/ISSUE YR(2) 8020 1994	EXPIRATION DATE (1)(2)(3) PERMANENT
TDR 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 CODE		FIRST LIENHOLDER	CITY		STATE	ZIP CODE	LIEN DATE
STREET		CITY		STATE	ZIP CODE	LIEN DATE			
LIEN CODE		SECOND LIENHOLDER		CITY		STATE	ZIP CODE	LIEN DATE	
STREET		CITY		STATE	ZIP CODE	LIEN DATE			

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

VEHICLE COST / TAX INFORMATION *(required for Title & Registration Transactions)		SALE 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	☐ STOLEN	☐ MUTILATED	☐ RTN'D 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 or its assignees 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 09/03/2013
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INVOICE NUMBER 13246 @	COUNTY NAME HAMILTON	CO NUMBER 33	DATE OF APPLICATION 09/03/2013	BY AUTHORITY OF REGISTRAR OF MOTOR VEHICLES(COUNTY CLERK) W.F. (BILL) KNOWLES			HJC27
OFFICE USE ONLY EMISSION: NOT APPLICABLE (total fees collected indicated certifies this form as a valid registration)							
REGISTRATION FEE	CREDIT	LEASE FEE	TRANS FEE 2.25	CLERK FEE	ISSUANCE FEE 12.00	TITLE FEE	TOTAL TAX COLLECTED .00
COMPUTATION OF ☐ SALES TAX ☐ USE TAX	SALES OR USE TAX	SA TAX	LOCAL TAX	ADDITIONAL TAX	COLLECTED IN STATE OF	COUNTY WHEEL TAX	CITY STICKER FEE
*SERVICE OPT FEE	ORGAN DONOR	POSTAGE	VER	ID / RESIDENCY VERIFICATION	*TOTAL FEES COLLECTED 14.25		