



# OFFICIAL VEHICLE REGISTRATION

## City Stickers:

829216

NEW OR CURRENT TITLE NUMBER <b>84195250</b>		TRANSACTION CODE <b>001</b>	REGISTRATION ONLY NUMBER	
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>5</b> MAO <input checked="" type="checkbox"/> ILU <input checked="" type="checkbox"/>				
LAST NAME <b>BOWMAN SALES AND EQUIPMENT INC</b>		FIRST NAME <b>BOWMAN SALES AND EQUIPMENT INC</b>	MIDDLE INITIAL <b>BOWMAN SALES AND EQUIPMENT INC</b>	MIDDLE INITIAL <b>BOWMAN SALES AND EQUIPMENT INC</b>
ADDRESS 1 (MAILING) <b>PO BOX 433 % 10233 GOVERNOR LN BLVD</b>		ADDRESS 2 (PHYSICAL)		
CITY <b>WILLIAMSPORT</b>		STATE <b>MD</b>	ZIP CODE <b>21795</b>	ZIP CODE
CITY OF RESIDENCE/PRINCIPAL BUS OR INCORP LOCATION <b>HAMILTON 033</b>	PURCHASE DATE <b>06/30/2011</b>	*LEASED <input checked="" type="checkbox"/> *SERVICE OPTIONS <input type="checkbox"/> SEE REVERSE SIDE FOR INSTRUCTIONS	TELEPHONE # <b>301-582-1793</b>	*PLACARD/HEARING IMPAIRED CLS/YR <b>301-582-1793</b>
*INSURANCE POLICY #				
VEHICLE INFORMATION				
VIN <b>1GRAA06296D417120</b>	MAKE <b>GDAN</b>	MODEL <b>741</b>	YEAR <b>2006</b>	BODY <b>SE</b>
TITLE BRAND - list the appropriate code (N) NEW (1) RECONSTRUCTED VEHICLE (U) USED (2) FLOOD DAMAGE (D) DEMO (3) SPECIALLY CONSTRUCTED (8) PARTS ONLY		CODE <b>U</b>	TYPE OF FUEL - list the appropriate code GAS (1) ELECTRIC/HYBRID (3) DIESEL (2) PROPANE (4)	
SURRENDERED TITLE # <b>71692794</b>		STATE <b>TN</b>	PREVIOUS STATES TITLED <b>TN</b>	VEHICLE USE <b>F</b>
VEHICLE TYPE <b>S</b>		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>1</b>
COLOR CODE (enter appropriate code)* UPPER <b>O</b>	MOBILE HOME LGTH	WIDTH	# AXLES	GROSS VEHICLE WEIGHT
*VEHICLE TRADE-IN DESCRIPTION		COMPANY VEHICLE # <b>829216</b>		
PLATE INFORMATION *(required for Title and Registration and Registration Only Transactions) SEE REVERSE SIDE FOR COMPLETE INSTRUCTIONS				
PLATE # (1) <b>U334406</b>	CLASSCODE/ISSUEYR(1)(3) <b>8020/1994</b>	VALIDATION # (1)	COUNTY STICKER # (1)	CITY STICKER # (1)(2)
*PLATE # (TRADE IN) (2)		CLASS CODE/ISSUE YR (2)		EXPIRATION DATE (1)(2)(3) <b>PERMANENT</b>
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 <b>SUNTRUST BANK</b>			LIEN DATE <b>06/30/2011</b>
STREET <b>120 E BALTIMORE 25TH FL</b>	CITY <b>BALTIMORE</b>			STATE <b>MD</b>
ZIP CODE <b>21202</b>		ZIP CODE		
LIEN CODE	SECOND LIENHOLDER			LIEN DATE
STREET	CITY			STATE
ZIP CODE		ZIP CODE		
*LESSEE / REGISTRANT INFORMATION (OWNER OF PLATE)				
NAME		LEGAL STATUS <input type="checkbox"/>	NAME CODE <input type="checkbox"/>	MAO <input type="checkbox"/> ILU <input type="checkbox"/>
ADDRESS		CITY		
STATE		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)				
<input type="checkbox"/> 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				
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 <b>12/15/2011</b>
INVOICE NUMBER <b>11349 @</b>	COUNTY NAME <b>HAMILTON</b>	CO NUMBER <b>33</b>	DATE OF APPLICATION <b>12/15/2011</b>	BY AUTHORITY OF REGISTRAR OF MOTOR VEHICLES (COUNTY CLERK) <b>W.F. (BILL) KNOWLES</b>
OFFICE USE ONLY REGISTRATION FEE <b>79.75</b>		CREDIT	LEASE FEE	TRANS FEE
COMPUTATION OF <input type="checkbox"/> SALES TAX <input type="checkbox"/> USE TAX		SALES OR USE TAX	SA TAX	LOCAL TAX
*SERVICE OPT FEE		ORGAN DONOR	POSTAGE	VER
ID / RESIDENCY VERIFICATION		*TOTAL FEES COLLECTED <b>97.25</b>		
Port: WK46/DR3/8020 Cash: 0.00 Check: 0.00 Check#: Credit: 0.00 Auth#: Change: 0.00				