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

OFFICIAL VEHICLE REGISTRATION

City Stickers:												829	292
NEW OR CURRENT TITLE NU	JMBER				TR	ANSACTION DDE*	REGIS	STRATION ON	LY NUMBER				
84195372						001							
OWNER INFORMATION *LEG	AL STATUS: 1 (AND) 2	(OR) E	NTER NAM	E CODE IN E	OX 1 (SAME	2(DIFFEREN	IT) 3(MULTIPLE LA	AST NAMES) 4(COMPANY) 5(OV				_{ILU} N
LAST NAME	50 AND 501	FIRST NAM			DLE INITIAL		LAST NAME			FIRST NAME		MIDDLE IN	IITIAL
BOWMAN SAL	ES AND EQU	JIPINE	IN I IIV	<i>-</i>			ADDRESS 2 (PHY	SICAL)					
PO BOX 433	% 10233	GOVE	RNOR	LN BL	VD		ADDRESS 2 (PHY	SICAL)					
CITY	70 10200		STATE		ZIP CODE		CITY			ST	TATE	ZIP CODE	
WILLIAMSPORT		MD 21			1795								
CNTY OF RESIDENCE/PRINCIPAL BUS OF HAMILTON 03		URCHASE 06/30	DATE 0/2011	*LEASED	O-SER	VICE OPTIONS	301	-582-17		HEARING IMPAIR	RED CLS/Y	R *INSURANCE PO	LICY#
VEHICLE INFORMATION													laas-
VIN		MAKE MODEL		YEAR	AR BODY TITLE BE (N)NEW (U)USED		EBRAND -list the appropriate code EW (1)RECONSTRUCTED VEHICLE ED (2)FLOOD DAMAGE EMO (3)SPECIALLY CONSTRUCTED RTS ONLY		code GAS (1)		FUEL - list the appropriate CODE ELECTRIC/HYBRID (3)		
1GRAA06296D417196				2006	SE				U DIESEL (2) PROPANE (4)		9		
SURRENDERED TITLE #		STATE PREVIOUS STATES TITL		ITLED	VEHICLE US		PE CURF			ER ACTUAL (0) NOT ACTUAL (8) OR OVER 10 YRS / 16,000 LBS (1) IN EXCESS OF MECHANICAL LIMITS (9)		COD	
71692870 COLOR CODE (enter appropriate	TN TN HOME # AXLES			CDC	F	S	***************************************	*VEHICLE TRADE-IN DESCRIPTION			COMPANY VEHICLE #		
UPPER LOWER		WDTH		# AXLES	GHC	SS VEHICLE	WEIGHT	VEHIC	LE THADE-IN DE	SCHIPTION			829292
	and for Title and Deciste			ak Taranak	\ 05F DE	VEDOE OIDE	-00 001101 === 11	IOTOLIOTIONIO					023232
PLATE #(1) CLA	ASSCODE/ISSUEYR(1)		DATION #(1		INTY STICK		Y STICKER #(1)(2)	1	RADE IN)(2)	CLASS CODE/	ISSUE YR(2	2) EXPIRATION D	ATE (1)(2)(3)
U334428	8020/199	4										PER	MANEN
TDR STICKER #(4)	TEMP OPERATOR PER	RMIT #(3)	# OF	SEATS(5)	ZONE(CO	UNTY NAME)(6)	USDOT / REG	SISTRANT #(7)		,	MOTOR CARRIER #(8)	
												All the second s	
LIEN INFORMATION (If lien pr LIEN CODE FIRST LIEN												LIE	N DATE
su	INTRUST BA	NK											3/30/201
STREET							CITY			STA	TE	ZIP CODE	,,00,201
	LTIMORE 25	THF					BALTI	MORE			MD	21202	N DATE
												Lic	NDATE
STREET							CITY			STA	TE	ZIP CODE	
*LESSEE / REGISTRANT INFO	ORMATION(OWNER OF	PLATE)		LEGAL ST	ATUS L	NAME (мао	ILU 🗌				
NAME							NAME						
ADDRESS						CIT	Y			STA	ATE	ZIP C	ODE
VEHICLE COST / TAX INFORM	MATION */required for T	itle & Desis	rolina Tanan			C5347 11%	BN 1872 1872 1		500 300 300 500				
SALE PRICE	TRADE IN ALL	OWANCE.	auon irans	acuons)	TAXA	BLE AMOUNT		SALESTA	X PAID		*TAX EX	XEMPTION REASON / S	ALES TAX #
DEALER NAME			DEALER ADDRESS							DEALER#			
												DEALER #	
*Required for Duplicate Title - T		TO THE	Itered Certif	icate of Title)									
	r.C.A. 55-3-115 (submit	Illegible or a											
LOST	STOLEN	Illegible or a		MUTILATED	[RTN	D DUE TO NON D	ELIEVERY	ALT	ERED		ILLEGIBLE	
	STOLEN				est of my kno						1	ILLEGIBLE	
Under penalties of perjury, I here or its assignees to determine the	STOLEN eby certify all information			rrect to the be		wledge, and a		s not the respon	nsibility of the Moto) DA		
Under penalties of perjury, I here or its assignees to determine the SIGNATURE OF CERTIFIER/O	STOLEN eby certify all information accuracy of the information			rrect to the be		wledge, and a	cknowledge that it is	s not the respon	nsibility of the Moto				
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Under penalties of perjury, I here or its assignees to determine the SIGNATURE OF CERTIFIER/C NVOICE NUMBER 11349 @ DEFICE USE ONLY	stolen eby certify all information e accuracy of the information with t	n provided in attornion provided	s true and co	POW	UMBER 33	ORNEY/AUTH DATE OF AP	cknowledge that it is ordered to the control of the	BY AUT W.F	SINGLE) THORITY OF REG	or Vehicle Division	TOR VEHIC	12/15/20	011
Under penalties of perjury, I here or its assignees to determine the SIGNATURE OF CERTIFIER/O	stolen eby certify all information accuracy of the informs WNER COUNTY NAME HAMILTO	n provided in attornion provided		POW	UMBER 33	ORNEY/AUTH	cknowledge that it is ORIZED SIGNATU	BY AUT W.F (total	THORITY OF REG F. (BILL) Frees collected Inc. CE FEE TITLE	OF Vehicle Division SISTRAR OF MOT (NOWLE: dicated certifies t E FEE	TOR VEHIC	12/15/20 ELES(COUNTY CLERK) S a valid registration) OTAL TAX COLLECTED	011
Under penalties of perjury, I here or its assignees to determine the SIGNATURE OF CERTIFIER/C NVOICE NUMBER 11349 @ DEFICE USE ONLY REGISTRATION FEE 79.75 COMPUTATION OF	eby certify all informations accuracy of the informs WNER COUNTY NAME HAMILTO EMISSION: T CREDIT SALES OR USE TAX	n provided in alion provided i	s true and co	POW	UMBER 33	ORNEY/AUTH DATE OF AP	cknowledge that it is ORIZED SIGNATULE PLICATION 15/2011	BY AUT W.F (total	THORITY OF REG	or Vehicle Division SISTRAR OF MOT (NOWLES dicated certifies t	TOR VEHIC S this form as	12/15/20 ELES(COUNTY CLERK) s a valid registration)	011
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