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

## OFFICIAL VEHICLE REGISTRATION

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BOWMAN SALES AND EQUIPMENT INC   ACCRETE OF MARKED   POBOX 433 % 10233 GOVERNOR LN BLVD	OWNER INFORMATION *LEG	GAL STATUS: 1 (AND	2 (OR) ENT	ER NAME	CODE IN B	OX 1 (SAM	E) 2(DIFFERE	NT) 3(MI	ULTIPLE LAS	T NAMES) 4(COM	MPANY) 5(OVE	ER 28 CHARACT	rens) 5	MAON	<sub>ILU</sub> N
PO BOX 433 % 10233 GOVERNOR LN BLVD  TATE 2P CODE CITY STATE 2P CODE C		ES AND EC		T INC		DLE INITIA	Ĺ	LAST N	NAME			FIRST NAME		MIDDLE II	NITIAL
WILLIAMSPORT	ADDRESS 1 (MAILING)	7						ADDRE	ESS 2 (PHYSI	CAL)					
WILLIAMSPORT  MD  21795  TRESPROVE F ALCOHOMATON  MODISON OF THE STATE FROM THE S	PO BOX 433	% 1023	3 GOVER	NOR	LN BL	VD									
HAMILTON 033  06/30/2011  12-80800  06/30/2012  13-80800  14-80800  15-8082-1793  301-582-1793  301-		RT			2			CITY				S	TATE	ZIP CODE	
MANUEL  GRAAO6266D417205  GRAAO626607  TN T						O -SEF	RVICE OPTION	s			*PLACARD/H	EARING IMPAI	RED CLS/YR	*INSURANCE PO	DLICY#
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DOUGH CORD BRITE REPORT OF THE MAN PROMOTE AND					STATES TI	TLED			EHICLE TYPE	1		INDICATOR	OVER 10 YR	S / 16.000 LBS (1)	CODE
PLATE INFORMATION **CROMMENT OF THE WAY REGISTRANT BY ONLY TRUSHANDOWN STEER EVERSES SQUE FOR COMPLETE INSTRUCTIONS  PERMANE!  100 STOCKER 4(1) CLASS CODE/SSUE YRIZO  200 STOCKER 4(1) CLASS CODE/SSUE YRIZO	UPPER LOWER	code)* MOBILE	HOME		# AXLES	GRO		WEIGHT		*VEHICLE T	RADE-IN DES	CRIPTION		COMPANY VEHICL	E#
CASS CODERSSUE FRIED  WALDATION ATT  WALDATION  WALDATION ATT  WALDATION  WALDATION ATT  WALDATION  WALDATION ATT  WALDATION  WAL		NORTH CONTRACTOR OF THE PARTY O			ANGELO IN SE										829301
UEN INCOMENTION OF INCOMENTATION PROMOTED BALLEY OF SEATS OF THE PROMOTED BALLEY OF	PLATE INFORMATION *(requi	red for Title and Regis	stration and Regis	tration Only	Transactio	ns) SEE RE					E INIVO	CLASS CODE	ICCLIE VD(2)	EVENDATIONS	ATE (1)(2)(2)
TOR STICKER #4(4) TEMP OPERATOR PERMIT #(8) # OF SEATS(8) ZONE(COUNTY NAMEH(8) USDOT / REGISTRANT #(7) MOTOR CARRIER #(8)  LIEN INFORMATION OF Non-person  LIEN CODE  PRIST LIEN (CLIEN AND THE CODE)  SUNTRUST BANK  STREET  120 E BALTIMORE  STATE  PROCES  SECOND LIEN HOLDER  STATE  TOP CODE  SECOND LIEN HOLDER  LESAL STATUS  MANY  MANY  MANY  THE ZIP CODE  LESSE / REGISTRANT INFORMATION/OWNER OF PLATE)  LEGAL STATUS  MANY  M				11014 #(1)	000	WIT STICK	ER #(I)   CII	TSHC	(EH #(1)(2)	PLATE #(TRAD	E IN)(2)	CLASS CODE/	ISSUE YH(2)		
LIEN CODE  SUNTRUST BANK  STREET  120 E BALTIMORE 25TH FL  STATE  210 CODE  SECOND LIENHOLDER  STATE  CITY  STATE  210 CODE  SECOND LIENHOLDER  STATE  CITY  STATE  210 CODE  LIEN DATE  CITY  STATE  210 CODE  LIEN DATE  LESSEE / REGISTRANT INFORMATION/OWNER OF PLATE)  LESSEE / REGISTRANT INFORMATION/OWNER OF PLATE)  LESSEE / REGISTRANT INFORMATION **CROQUINT OF TRIA' & REGISTRANG TIANSACORE)  NAME  AND LIEN DATE  LESSEE / REGISTRANT INFORMATION **CROQUINT OF TRIA' & REGISTRANG TIANSACORE)  TRADE IN ALLOWANCE  TRADE IN ALL	TDR STICKER #(4)	TEMP OPERATOR P	ERMIT #(3)	# OF SE	ATS(5)	ZONE(CC	OUNTY NAME)	6)	U	SDOT / REGISTE	RANT #(7)		M		WAITEN
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LESSEE / REGISTRANT INFORMATION (OWNER OF PLATE)  LEGAL STATUS  NAME  NA														LIE	N DATE
ADDRESS  CITY  STATE  ZIP CODE  NAME  ADDRESS  CITY  STATE  ZIP CODE  TAX EXEMPTION REASON / SALES TAX #  PREMICIAL COST / TAX INFORMATION *(required for Title & Registration Transactions)  TAX EXEMPTION REASON / SALES TAX #  DEALER ADDRESS  DEALER #  Required for Duplicate Title - T.C.A. 55-3-115 (submit lilegable or altered Certificate of Title)  LOST  STOLEN  MUTILATED  RIND DUE TO NON DELIEVERY  ALTERED  ILLEGIBLE  ILLEGIBLE  ALTERED  ILLEGIBLE  TAX EXEMPTION REASON / SALES TAX #  DEALER #  Required for Duplicate Title - T.C.A. 55-3-115 (submit lilegable or altered Certificate of Title)  LOST  STOLEN  MUTILATED  RIND DUE TO NON DELIEVERY  ALTERED  ILLEGIBLE  ILLEGIBLE  TAX TO NON TO SELIEVERY  ALTERED  ILLEGIBLE  TAX TO NON TO SELIEVERY  TAX EXEMPTION REASON / SALES TAX #  DEALER #  POWER OF ATTORNEY/AUTHORIZED SIGNATURE(IF APPLICABLE)  DATE  12/15/2011  VOICE NUMBER  COUNTY NAME  CO NUMBER  CO NUMBER  DATE OF APPLICATION  BY AUTHORITY OF REGISTRAR OF MOTOR VEHICLES (COUNTY CLERK)  VERSON  TOTAL TAX COLLECTED  TOTAL TA	STREET				427			CITY				STA	TE	ZIP CODE	
ADDRESS  CITY  STATE  ZIP CODE  NAME  ADDRESS  CITY  STATE  ZIP CODE  TAX EXEMPTION REASON / SALES TAX #  PREMICIAL COST / TAX INFORMATION *(required for Title & Registration Transactions)  TAX EXEMPTION REASON / SALES TAX #  DEALER ADDRESS  DEALER #  Required for Duplicate Title - T.C.A. 55-3-115 (submit lilegable or altered Certificate of Title)  LOST  STOLEN  MUTILATED  RIND DUE TO NON DELIEVERY  ALTERED  ILLEGIBLE  ILLEGIBLE  ALTERED  ILLEGIBLE  TAX EXEMPTION REASON / SALES TAX #  DEALER #  Required for Duplicate Title - T.C.A. 55-3-115 (submit lilegable or altered Certificate of Title)  LOST  STOLEN  MUTILATED  RIND DUE TO NON DELIEVERY  ALTERED  ILLEGIBLE  ILLEGIBLE  TAX TO NON TO SELIEVERY  ALTERED  ILLEGIBLE  TAX TO NON TO SELIEVERY  TAX EXEMPTION REASON / SALES TAX #  DEALER #  POWER OF ATTORNEY/AUTHORIZED SIGNATURE(IF APPLICABLE)  DATE  12/15/2011  VOICE NUMBER  COUNTY NAME  CO NUMBER  CO NUMBER  DATE OF APPLICATION  BY AUTHORITY OF REGISTRAR OF MOTOR VEHICLES (COUNTY CLERK)  VERSON  TOTAL TAX COLLECTED  TOTAL TA	'LESSEE / REGISTRANT INFO	RMATION/OWNER	DE PLATE)		ECAL CTA	[]		Γ							
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VEHICLE COST / TAX INFORMATION *frequired for Title & Registration Transactions)  SALE PRICE  TRADE IN ALLOWANCE  TAXABLE AMOUNT  SALESTAX PAID  *TAX EXEMPTION REASON / SALES TAX #  DEALER ADDRESS  DEALER #  Required for Duplicate Title - T.C.A. 55-3-115 (submit illegible or altered Certificate of Title)  LOST  STOLEN  MUTILATED  REDUPTION TO NON DELIEVERY  ALTERED  ILLEGIBLE  ILLEGIBLE  INDICE PUMP To 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  SIGNATURE OF CERTIFIER/OWNER  POWER OF ATTORNEY/AUTHORIZED SIGNATURE(IF APPLICABLE)  DATE  12/15/2011  13/49  HAMILTON  33  12/15/2011  W.F. (BILL) KNOWLES  VBSO  SERVICE OPT FEE  ORGAN DONOR  POSTAGE  VER  ID / RESIDENCY VERIFICATION  **TOTAL TEXA COLLECTED  97.25	ADDRESS														
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LOST STOLEN MUTILATED RTND DUE TO NON DELIEVERY ALTERED ILLEGIBLE  Index 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  INDICATURE OF CERTIFIER/OWNER  POWER OF ATTORNEY/AUTHORIZED SIGNATURE(IF APPLICABLE)  DATE  12/15/2011  12/15/2011  12/15/2011  POWER OF ATTORNEY/AUTHORIZED SIGNATURE(IF APPLICABLE)  DATE  12/15/2011  W.F. (BILL) KNOWLES  VBS0  EGISTRATION FEE  CREDIT  LEASE FEE  TRANS FEE  CLERK FEE  ISSUANCE FEE  TITLE FEE  TOTAL TAX COLLECTED  3.00  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  97.25	EALER NAME				DEALER A	ADDRESS				1				DEALER#	
ILLEGIBLE  INDITION OF 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 HIGH best of my knowledge, and acknowledge that it is not the responsibility of the Motor Vehicle Division  ILLEGIBLE  RIND DUE TO NON DELIEVERY  ALTERED  ILLEGIBLE  RIND DUE TO NON DELIEVERY  ALTERED  ILLEGIBLE  ILLEGIBLE  ALTERED  ILLEGIBLE  ILLEG	Required for Duplicate Title - T.	.C.A. 55-3-115 (submi	t Illegible or altere	ed Certifica	te of Title)			3100							
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FFICE USE ONLY  EMISSION: Trailer  COLERK FEE  COMPUTATION OF  SALES OR USE TAX  SERVICE OPT FEE  ORGAN DONOR  SALES OR USE TAX  SERVICE OPT FEE  ORGAN DONOR  SALES OR USE TAX  SERVICE OPT FEE  ORGAN DONOR  SALES OR USE TAX  SA TA			ON		CONU									S(COUNTY CLERK)	
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Port: WK46/DR3/8020 Cash: 0.00 Check: 0.00 Check#: Credit: 0.00 Auth#: Change: 0.00 BDA-692	-1357 Port: WK4	6/DR3/8020	Cash: (	0.00	Chec	k: 0.0	0 05	10k#		adit- 0.55		1.4.			