



OFFICIAL VEHICLE REGISTRATION

City Stickers:

854399

NEW OR CURRENT TITLE NUMBER 84195608	TRANSACTION CODE 001	REGISTRATION ONLY NUMBER
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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) **5** MAO ☒ ILU ☒

LAST NAME BOWMAN SALES AND EQUIPMENT INC			FIRST NAME 			MIDDLE INITIAL 			LAST NAME 			FIRST NAME 			MIDDLE INITIAL 		
ADDRESS 1 (MAILING) PO BOX 433 % 10233 GOVERNOR LN BLVD									ADDRESS 2 (PHYSICAL) 								
CITY WILLIAMSPORT			STATE MD			ZIP CODE 21795			CITY 			STATE 			ZIP CODE 		
CITY OF RESIDENCE/PRINCIPAL BUS OR INCORP LOCATION HAMILTON 033			PURCHASE DATE 06/30/2011			*LEASED <input checked="" type="checkbox"/> *SERVICE OPTIONS <input type="checkbox"/> <small>SEE REVERSE SIDE FOR INSTRUCTIONS</small>			TELEPHONE # 301-582-1793			*PLACARD/HEARING IMPAIRED CLS/YR 			*INSURANCE POLICY # 		

VEHICLE INFORMATION

VIN 1DTP86Z24XG053016	MAKE DORS	MODEL 1DT	YEAR 1999	BODY SE	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 U	TYPE OF FUEL - list the appropriate code GAS (1) ELECTRIC/HYBRID (3) DIESEL (2) PROPANE (4)			CODE 9	
SURRENDERED TITLE # 80981954	STATE TN	PREVIOUS STATES TITLED FL	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 LOWER 	MOBILE HOME LGTH WIDTH 		# AXLES 	GROSS VEHICLE WEIGHT 			*VEHICLE TRADE-IN DESCRIPTION 			COMPANY VEHICLE # 854399			

PLATE INFORMATION *(required for Title and Registration and Registration Only Transactions) SEE REVERSE SIDE FOR COMPLETE INSTRUCTIONS

PLATE # (1) U334476	CLASS CODE/ISSUE YR (1)(3) 8020/1994	VALIDATION # (1) 	COUNTY STICKER # (1) 	CITY STICKER # (1)(2) 	*PLATE # (TRADE IN) (2) 	CLASS CODE/ISSUE YR (2) 	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 SUNTRUST BANK	LIEN DATE 06/30/2011
STREET 120 E BALTIMORE 25TH FL		
CITY BALTIMORE		
STATE MD		
ZIP CODE 21202		
LIEN CODE 	SECOND LIENHOLDER 	LIEN DATE
STREET 		
CITY 		
STATE 		
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 	SALE TAX 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
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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 12/16/2011
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INVOICE NUMBER 11350 @	COUNTY NAME HAMILTON	CO NUMBER 33	DATE OF APPLICATION 12/16/2011	BY AUTHORITY OF REGISTRAR OF MOTOR VEHICLES (COUNTY CLERK) W.F. (BILL) KNOWLES	VBS03
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OFFICE USE ONLY REGISTRATION FEE 79.75	EMISSION: Trailer		(total fees collected indicated certifies this form as a valid registration)					
COMPUTATION OF <input type="checkbox"/> SALES TAX <input type="checkbox"/> USE TAX	SALES OR USE TAX 	SA TAX 	LOCAL TAX 	ADDITIONAL TAX 	COLLECTED IN STATE OF 	COUNTY WHEEL TAX 12.00	CITY STICKER FEE 5.50	TOTAL TAX COLLECTED .00
*SERVICE OPT FEE 	ORGAN DONOR 	POSTAGE 	VER 	ID / RESIDENCY VERIFICATION 	*TOTAL FEES COLLECTED 97.25			