



OFFICIAL VEHICLE REGISTRATION

City Stickers:

855203

NEW OR CURRENT TITLE NUMBER 84195725				TRANSACTION CODE N01		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) 5 MAO <input checked="" type="checkbox"/> ILU <input checked="" type="checkbox"/>										
LAST NAME BOWMAN SALES AND EQUIPMENT INC					FIRST NAME BOWMAN SALES AND EQUIPMENT INC					MIDDLE INITIAL
ADDRESS 1 (MAILING) PO BOX 433 % 10233 GOVERNOR LN BLVD					ADDRESS 2 (PHYSICAL)					
CITY WILLIAMSPORT			STATE MD		ZIP CODE 21795			CITY		STATE
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"/> SEE REVERSE SIDE FOR INSTRUCTIONS		TELEPHONE # 301-582-1793		*PLACARD/HEARING IMPAIRED CLS/YR	
VEHICLE INFORMATION										
VIN 1GRAA0629WB093761		MAKE GDAN	MODEL 1GR	YEAR 1998	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)	
SURRENDERED TITLE # 11466134		STATE ME	PREVIOUS STATES TITLED		VEHICLE USE F	VEHICLE TYPE S	CURRENT MILEAGE		ODOMETER ACTUAL (0) NOT ACTUAL (8) INDICATOR OVER 10 YRS / 15,000 LBS (1) (List one) IN EXCESS OF MECHANICAL LIMITS (9)	
COLOR CODE (enter appropriate code)* UPPER O LOWER		MOBILE HOME LGTH WIDTH		# AXLES	GROSS VEHICLE WEIGHT		*VEHICLE TRADE-IN DESCRIPTION		COMPANY VEHICLE # 855203	
PLATE INFORMATION *(required for Title and Registration and Registration Only Transactions) SEE REVERSE SIDE FOR COMPLETE INSTRUCTIONS										
PLATE # (1) U334493		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 LIEN HOLDER SUNTRUST BANK							LIEN DATE 06/30/2011	
STREET 120 E BALTIMORE 25TH FL		CITY BALTIMORE		STATE MD		ZIP CODE 21202		LIEN CODE		SECOND LIEN HOLDER
STREET		CITY		STATE		ZIP CODE		LIEN CODE		SECOND LIEN HOLDER
*LESSEE / REGISTRANT INFORMATION (OWNER OF PLATE) LEGAL STATUS <input type="checkbox"/> NAME CODE <input type="checkbox"/> MAO <input type="checkbox"/> ILU <input type="checkbox"/>										
NAME					NAME					
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 12/16/2011		
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
OFFICE USE ONLY REGISTRATION FEE 79.75		EMISSION: Trailer		LEASE FEE		TRANS FEE		CLERK FEE		ISSUANCE FEE 12.00
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
*SERVICE OPT FEE		ORGAN DONOR		POSTAGE		VER		ID / RESIDENCY VERIFICATION		*TOTAL FEES COLLECTED 97.25