



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

OFFICIAL VEHICLE REGISTRATION

855664

City Stickers:

NEW OR CURRENT TITLE NUMBER	TRANSACTION CODE	REGISTRATION ONLY NUMBER
91448510	001	

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) <input type="checkbox"/> 4		MAO <input type="checkbox"/> N <input type="checkbox"/> ILU <input type="checkbox"/> N			
ST NAME	FIRST NAME	MIDDLE INITIAL	LAST NAME	FIRST NAME	MIDDLE INITIAL
BOWMAN TRAILER LEASING LLC					
ADDRESS 1 (MAILING)			ADDRESS 2 (PHYSICAL)		
PO BOX 433 % 10233 GOVERNOR LN BLVD					
CITY	STATE	ZIP CODE	CITY	STATE	ZIP CODE
WILLIAMSPORT	MD	21795			
7 OF RESIDENCE/PRINCIPAL BUS OR INCORP LOCATION		PURCHASE DATE	TELEPHONE #	*PLACARD/HEARING IMPAIRED CLS/YR	*INSURANCE POLICY #
HAMILTON 033		12/14/2012	301 582 1793		
		*LEASED <input type="checkbox"/> 0 *SERVICE OPTIONS <input type="checkbox"/>	SEE REVERSE SIDE FOR INSTRUCTIONS		

VEHICLE INFORMATION		MAKE	MODEL	YEAR	BODY	TITLE BRAND - translation	CODE	TYPE OF FUEL - translation	CODE
1JJV532W6WL432746		WABA	1JJ	1998	SE	USED	U		9
PREVIOUS TITLE #		STATE	PREVIOUS STATES TITLED	VEHICLE USE	VEHICLE TYPE	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
11641707		ME	ME	F	S				1
LOR CODE (enter appropriate code) PER LOWER		MOBILE HOME LGTH	WIDTH	# AXLES	GROSS VEHICLE WEIGHT	*VEHICLE TRADE-IN DESCRIPTION		COMPANY VEHICLE #	
O								855664	

STATE INFORMATION *(required for Title and Registration and Registration Only Transactions) SEE REVERSE SIDE FOR COMPLETE INSTRUCTIONS							
ATE # (1)	CLASSCODE/ISSUEYR (1)(3)	VALIDATION # (1)	COUNTY STICKER # (1)	CITY STICKER # (1)(2)	*PLATE # (TRADE IN) (2)	CLASS CODE/ISSUE YR (2)	EXPIRATION DATE (1)(2)(3)
U416325	8020/1994						PERMANENT
R STICKER # (4)	TEMP OPERATOR PERMIT # (3)	# OF SEATS (5)	ZONE (COUNTY NAME) (6)	USDOT / REGISTRANT # (7)	MOTOR CARRIER # (8)		

FIN INFORMATION (If lien present)				LIEN DATE
FIN CODE	FIRST LIENHOLDER			12/14/2012
SUNTRUST BANK				
REET	CITY	STATE	ZIP CODE	
120 E BALTIMORE ST 25 FL	BALTIMORE	MD	21202	
FIN CODE	SECOND LIENHOLDER			LIEN DATE
REET	CITY	STATE	ZIP CODE	

ISSUE / REGISTRANT INFORMATION (OWNER OF PLATE)		LEGAL STATUS <input type="checkbox"/>	NAME CODE <input type="checkbox"/>	MAO <input type="checkbox"/>	ILU <input type="checkbox"/>
NAME					
ADDRESS		CITY	STATE	ZIP CODE	

VEHICLE COST / TAX INFORMATION *(required for Title & Registration Transactions)				
VEHICLE 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"/> RTN'D 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 to 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
		01/25/2013

VOICE NUMBER	COUNTY NAME	CO NUMBER	DATE OF APPLICATION	BY AUTHORITY OF REGISTRAR OF MOTOR VEHICLES (COUNTY CLERK)				
13025 @	HAMILTON	33	01/25/2013	W.F. (BILL) KNOWLES HJC27				
OFFICE USE ONLY								
EMISSION: Trailer (total fees collected indicated certifies this form as a valid registration)								
REGISTRATION FEE	CREDIT	LEASE FEE	TRANS FEE	CLERK FEE	ISSUANCE FEE	TITLE FEE	TOTAL TAX COLLECTED	
79.75					12.00	5.50	.00	
COMPUTATION OF		SALES OR USE TAX	SA TAX	LOCAL TAX	ADDITIONAL TAX	COLLECTED IN STATE OF	COUNTY WHEEL TAX	CITY STICKER FEE
<input type="checkbox"/> SALES TAX <input type="checkbox"/> USE TAX								
SERVICE OPT FEE		ORGAN DONOR	POSTAGE	VER	ID / RESIDENCY VERIFICATION	*TOTAL FEES COLLECTED		
						97.25		