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

OFFICIAL VEHICLE REGISTRATION

City Stickers:										85688	0
NEW OR CURRENT TITLE N 84196131	UMBER			TR	NO1	REGIS	STRATION ONLY NUMBE	R			
OWNER INFORMATION *LEG	GAL STATUS: 1 (AND):	2 (OR) ENTER	NAME CODE IN	BOX 1 (SAME	2(DIFFERE	NT) 3(MULTIPLE LA	ST NAMES) 4(COMPANY) 5(OVER 28 CHARACT	TERS) 5	MAO N ILU	N
BOWMAN SAL	ES AND EQ	PINOTIVAME	PVIII	DDLE INITIAL		LAST NAME	,	FIRST NAME		MIDDLE INITIA	
ADDRESS 1 (MAILING)						ADDRESS 2 (PHY	SICAL)				
PO BOX 433	% 10233	GOVENO	R LN BLV	/D							
WILLIAMSPORT			STATE ZIF MD 217			CITY			TATE	ZIP CODE	
HAMILTON 03		06/30/20	11 LEASEI SEE REV	O SERV	VICE OPTIONS	301	582 1793	CARD/HEARING IMPAI	RED CLS/YH	INSUHANCE POLICY	*
VEHICLE INFORMATION VIN		MAKE	MODEL	YEAR	ВОДУ	TITLE BRAND II	st the appropriate code	CODE	Type of FL	JEL - list the appropriate	CODE
1GRAA06224T507955		GDAN 1GR		2004	SE	(N)NEW (1)RI (U)USED (2)FI (D)DEMO (3)S (8)PARTS ONLY	st the appropriate code ECONSTRUCTED VEHICI LOOD DAMAGE PECIALLY CONSTRUCTE	ED U	code GAS (1) E	e S(1) ELECTRIC/HYBRID (3) SEL (2) PROPANE (4)	
SURRENDERED TITLE # 0816404120592		STATE PREVIOUS STATES TO		TITLED	VEHICLE US	SE VEHICLE TY	PE CURRENT MILE.	INDICATOR	OVER 10 YRS	NOT ACTUAL (8) 5 / 16,000 LBS (1) F MECHANICAL LIMITS (9)	CODE 1
COLOR CODE (enter appropriate LOWE	OME # AXLES			SS VEHICLE	WEIGHT	HT *VEHICLE TRADE-IN DES			COMPANY VEHICLE # 856880		
PLATE INFORMATION *(requ	ired for Title and Regist ASSCODE/ISSUEYR(1			ions) SEE REV UNTY STICKE		FOR COMPLETE IN TY STICKER #(1)(2)	STRUCTIONS *PLATE #(TRADE IN)(2	2) CLASS CODE/	ISSUE YR(2)	EXPIRATION DATE	
U334309	8020/199	14								PERMA	MENT
TDR STICKER #(4)	TEMP OPERATOR PE	ERMIT #(3) #	OF SEATS(5)	ZONE(COL	UNTY NAME)(6)	USDOT / REGISTRANT	#(7)	MC	OTOR CARRIER #(8)	
SUNTRUST BANK STREET 120 E BALTIMORE 25TH FL LIEN CODE SECOND LIENHOLDER				BALTIMORE					06/30/2011 STATE ZIP CODE		
STREET						CITY		STA	ATE	ZIP CODE	. 11 - 1
*LESSEE / REGISTRANT INF	ORMATION(OWNER O	OF PLATE)	LEGAL S	TATUS	NAME		MAO ILU				
NAME						NAME					
ADDRESS					CI	TY		ST	TATE	ZIP CODE	
VEHICLE COST / TAX INFOR	RMATION *(required for TRADE IN A		Transactions)	TAXA	BLE AMOUNT		SALESTAX PAID		*TAX EXE	EMPTION REASON / SALE	S TAX #
DEALER NAME				R ADDRESS					DEALER #		
*Required for Duplicate Title -	T.C.A. 55-3-115 (subm	it Illegible or altered	Certificate of Title)							
LOST	STOLEN		MUTILATED			N'D DUE TO NON [ALTERED		ILLEGIBLE	
Under penalties of perjury, I he or its assignees to determine to SIGNATURE OF CERTIFIER		ion provided is true a mation provided by r	and correct to the ne or on my beha PO	best of my knowlf. WER OF ATT	ORNEY/AUT	acknowledge that it	s not the responsibility of t	ne motor vehicle Divisio	DAT	12/19/201	1
INVOICE NUMBER	COUNTY NAME		co	NUMBER	DATE OF A	PPLICATION		OF REGISTRAR OF MO		ES(COUNTY CLERK)	
11353 @	HAMILT			33	12	/19/2011	W.F. (BIL	L) KNOWLE	S this form so		HJC27
OFFICE USE ONLY REGISTRATION FEE 79.75	EMISSION:	LEASE		33320	ANS FEE	CLERK FEE	12.00	TITLE FEE 5.50 COUNTY WHEEL TA	10	OTAL TAX COLLECTED OUTAL TAX COLLECTED OUTAL TAX COLLECTED	
COMPUTATION OF	SALES OR USE TO	AX SA TAX	LOCAL	TAX A	DDITIONAL T	AX CO	LLECTED IN STATE OF	COUNTY WHEEL TA	- CII	TI OTIONETI PEE	
*SERVICE OPT FEE	ORGAN DONOR	POST	AGE	VER		ID / RESIDEN	CY VERIFICATION	Auth#:	9	97.25	692