

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

## OFFICIAL VEHICLE REGISTRATION

City Stickers:										857047		
NEW OR CURRENT TITLE NO. 84196179	UMBER			TE	RANSACTION CODE:	REGIS	TRATION ONLY NUMBE	R				
OWNER INFORMATION *LEGAL STATUS: 1 (AND) 2 (OR) ENTER NAME CODE IN BOX 1 (SAME) 2 LAST NAME FIRST NAME MIDDLE INITIAL BOWMAN SALES AND EQUIPMENT INC						IT) 3(MULTIPLE LAS LAST NAME	ST NAMES) 4(COMPANY	) 5(OVER 28 CHARACTE FIRST NAME	(RS) 5	MAO N ILU		
PO BOX 433	% 10233	GOVENO	R LN BL	VD		ADDRESS 2 (PHYS	ICAL)					
WILLIAMSPORT  ONLY OF RESIDENCE/PRINCIPAL BUS OR INCORP LOCATION P		MD 21		ZIP CODE 21795		СІТУ		STA		ZIP CODE		
HAMILTON 03		06/30/20	111 LEASE	D SER	IVICE OPTIONS	301	582 1793	CARD/HEARING IMPAIRE	D CLS/YR	*INSURANCE POLICY	#	
VEHICLE INFORMATION VIN		MAKE	MODEL	YEAR	BODY	TITLE BRAND -lis (N)NEW (1)RE	the appropriate code	.E CODE	code	EL - list the appropriate	CODE	
1GRAA06294T507788		GDAN 1GR		2004	SE VEHICLE US	(B)PARTS ONLT			U GÁS (1) ELECTRICAHYBRID (3) DIESEL (2) PROPANE (4)  ODOMETER ACTUAL (0) NOT ACTUAL (8)		9 CODE	
0816404121076		wi			F S		INDICATOR OVE (List one) IN E		OVER 10 YRS / N EXCESS OF M	/ER 10 YRS / 16,000 LBS (1) EXCESS OF MECHANICAL LIMITS (9)		
ODLOR CODE (enter appropriate code)* UPPER LOWER  O  MOBILE HO LGTH		OME # AXLES		GRO	OSS VEHICLE V	VEIGHT	*VEHICLE TRADE-	TRADE-IN DESCRIPTION		**************************************		
U334325 8020/1994				tions) SEE REDUNTY STICK		FOR COMPLETE INSTRUCTIONS  ITY STICKER #(1)(2) PLATE #(TRADE IN)(2) CLASS CODE/ISSL				PERMANENT		
TDR STICKER #(4)	TEMP OPERATOR PER	RMIT #(3)	# OF SEATS(5)	ZONE(CC	OUNTY NAME)(6	3)	USDOT / REGISTRANT	(7)	мот	OR CARRIER #(8)		
120 E BA	JNTRUST BA					BALTII	MORE	STAT	e MD	ZIP CODE 21202 LIEN DA	<b>)/2011</b>	
STREET						CITY		STAT	E	ZIP CODE	ved size	
*LESSEE / REGISTRANT INF NAME	ORMATION(OWNER O	F PLATE)	LEGAL S	STATUS _	NAME C	NAME	MAO ILU					
ADDRESS					CIT	Y		STA	TE	ZIP CODE		
VEHICLE COST / TAX INFOR	MATION *(required for T		n Transactions)	TAXA	ABLE AMOUNT		SALESTAX PAID		*TAX EXEM	MPTION REASON / SALES	STAX#	
DEALER NAME DEALER AI				ER ADDRESS	DDRESS					DEALER #		
*Required for Duplicate Title -				A COUNTY OF THE PARTY OF THE PA			And the second of the second of		DECEMBER OF STREET		Mary Mary Cons.	
LOST	STOLEN		MUTILATE	D		O'D DUE TO NON D		ALTERED		ILLEGIBLE		
LOST  Under penalties of perjury, I he or its assignees to determine the SIGNATURE OF CERTIFIER/	STOLEN sreby certify all informations accuracy of the inform		and correct to the me or on my beh	best of my kr alf. DWER OF AT	nowledge, and a	cknowledge that it is	not the responsibility of t	ne Motor Vehicle Division	DATE	12/19/201	1	
Under penalties of perjury, I he or its assignees to determine the SIGNATURE OF CERTIFIER/	stolen seby certify all informations accuracy of the informount of the inform	on provided is true attion provided by	and correct to the me or on my beh	D best of my kralf.	TORNEY/AUTH	cknowledge that it is	not the responsibility of the responsibility	The Motor Vehicle Division  OF REGISTRAR OF MOTO  L) KNOWLES	OR VEHICLE	12/19/201 S(COUNTY CLERK)	1 HJC27	
LOST Under penalties of perjury, I he or its assignees to determine the SIGNATURE OF CERTIFIER/	STOLEN sreby certify all informatic se accuracy of the inform OWNER COUNTY NAME	on provided is true ation provided by  DN  Frailer	MUTILATE  e and correct to the me or on my beh  CC  CC  SE FEE	D best of my kralf. DWER OF AT DNUMBER 33	TORNEY/AUTH	cknowledge that it is ORIZED SIGNATURE PLICATION /19/2011	not the responsibility of the responsibility	he Motor Vehicle Division  OF REGISTRAR OF MOT	OR VEHICLE  Shis form as a	12/19/201 S(COUNTY CLERK)		
LOST  Under penalties of perjury, I he or its assignees to determine the SIGNATURE OF CERTIFIER/  INVOICE NUMBER  11353 @  OFFICE USE ONLY REGISTRATION FEE  79.75	STOLEN  reby certify all informatic le accuracy of the inform OWNER  COUNTY NAME  HAMILTO  EMISSION: 1  CREDIT  SALES OR USE TA	on provided is true ation provided by  DN  Frailer  LEA:  X SATA	MUTILATE  e and correct to the me or on my beh  CC  CC  SE FEE	D best of my kralf. DWER OF AT DNUMBER 33	DATE OF AP	CKNOWLEDGE THAT IT	BY AUTHORITY OF USE OF THE STREET OF THE STR	DF REGISTRAR OF MOTO  LL) KNOWLES  ted Indicated certifies the TITLE FEE  5.50	OR VEHICLE Shis form as a TOT. CITY	12/19/201 S(COUNTY CLERK)  valid registration) AL TAX COLLECTED		