



# OFFICIAL VEHICLE REGISTRATION

## ity Stickers:

|                                                                                                                                                                                                                                                                                                                    |                                    |                                                                                                                            |                                           |                                              |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|----------------------------------------------------------------------------------------------------------------------------|-------------------------------------------|----------------------------------------------|
| N OR CURRENT TITLE NUMBER<br><b>0482420</b>                                                                                                                                                                                                                                                                        |                                    | TRANSACTION CODE<br><b>001</b>                                                                                             | REGISTRATION ONLY NUMBER<br><b>916252</b> |                                              |
| 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) <b>4</b> MAO <input checked="" type="checkbox"/> N <input checked="" type="checkbox"/> ILU <input checked="" type="checkbox"/> N |                                    |                                                                                                                            |                                           |                                              |
| FIRST NAME<br><b>BOWMAN TRAILER LEASING LLC</b>                                                                                                                                                                                                                                                                    |                                    | MIDDLE INITIAL                                                                                                             | LAST NAME<br><b>WILLIAMSPORT</b>          |                                              |
| ADDRESS 1 (MAILING)<br><b>0233 GOVERNOR LN BLVD</b>                                                                                                                                                                                                                                                                |                                    | ADDRESS 2 (PHYSICAL)                                                                                                       |                                           |                                              |
| STATE<br><b>MD</b>                                                                                                                                                                                                                                                                                                 |                                    | ZIP CODE<br><b>21795</b>                                                                                                   | CITY<br><b>WILLIAMSPORT</b>               |                                              |
| DATE OF RESIDENCE/PRINCIPAL BUS OR INCOMP LOCATION<br><b>HAMILTON 033</b>                                                                                                                                                                                                                                          | PURCHASE DATE<br><b>06/29/2012</b> | *LEASED <input checked="" type="checkbox"/> *SERVICE OPTIONS <input type="checkbox"/><br>SEE REVERSE SIDE FOR INSTRUCTIONS | TELEPHONE #<br><b>301 582 1793</b>        | *PLACARD/HEARING IMPAIRED CLS/YR<br><b>0</b> |

|                                                        |                                 |                     |                                     |                                  |                          |                               |                                                                                                                               |                                    |                  |
|--------------------------------------------------------|---------------------------------|---------------------|-------------------------------------|----------------------------------|--------------------------|-------------------------------|-------------------------------------------------------------------------------------------------------------------------------|------------------------------------|------------------|
| VEHICLE INFORMATION                                    |                                 | MAKE<br><b>WABA</b> | MODEL<br><b>1JJ</b>                 | YEAR<br><b>2007</b>              | BODY<br><b>SE</b>        | TITLE BRAND - translation     | CODE<br><b>U</b>                                                                                                              | TYPE OF FUEL - translation         | CODE<br><b>9</b> |
| PREVIOUS TITLE #<br><b>3897915</b>                     |                                 | STATE<br><b>TN</b>  | PREVIOUS STATES TITLED<br><b>TN</b> | VEHICLE USE<br><b>F</b>          | VEHICLE TYPE<br><b>S</b> | CURRENT MILEAGE               | ODOMETER ACTUAL (0) NOT ACTUAL (8)<br>INDICATOR OVER 10 YRS / 16,000 LBS (1)<br>(List one) IN EXCESS OF MECHANICAL LIMITS (9) |                                    | CODE<br><b>1</b> |
| OR CODE (enter appropriate code)*<br>LOWER<br><b>0</b> | MOBILE HOME<br>LGTH<br><b>0</b> | WDTH<br><b>0</b>    | # AXLES<br><b>0</b>                 | GROSS VEHICLE WEIGHT<br><b>0</b> |                          | *VEHICLE TRADE-IN DESCRIPTION |                                                                                                                               | COMPANY VEHICLE #<br><b>916252</b> |                  |

|                                                                                                                                          |                                             |                  |                        |                       |                          |                         |                                               |
|------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------|------------------|------------------------|-----------------------|--------------------------|-------------------------|-----------------------------------------------|
| VEHICLE INFORMATION *(required for Title and Registration and Registration Only Transactions) SEE REVERSE SIDE FOR COMPLETE INSTRUCTIONS |                                             |                  |                        |                       |                          |                         |                                               |
| VEHICLE # (1)<br><b>J381886</b>                                                                                                          | CLASSCODE/ISSUEYR(1)(3)<br><b>8020/1994</b> | VALIDATION # (1) | COUNTY STICKER # (1)   | CITY STICKER # (1)(2) | *PLATE # (TRADE IN) (2)  | CLASS CODE/ISSUE YR (2) | EXPIRATION DATE (1)(2)(3)<br><b>PERMANENT</b> |
| STICKER # (4)                                                                                                                            | TEMP OPERATOR PERMIT # (3)                  | # OF SEATS (5)   | ZONE (COUNTY NAME) (6) |                       | USDOT / REGISTRANT # (7) | MOTOR CARRIER # (8)     |                                               |

|                                         |  |                                |  |                    |  |                                |  |
|-----------------------------------------|--|--------------------------------|--|--------------------|--|--------------------------------|--|
| N INFORMATION (If lien present)         |  | N CODE<br><b>SUNTRUST BANK</b> |  | FIRST LIENHOLDER   |  | LIEN DATE<br><b>06/29/2012</b> |  |
| REET<br><b>120 E BALTIMORE ST 25 FL</b> |  | CITY<br><b>BALTIMORE</b>       |  | STATE<br><b>MD</b> |  | ZIP CODE<br><b>21202</b>       |  |
| N CODE<br><b>0</b>                      |  | SECOND LIENHOLDER              |  | LIEN DATE          |  |                                |  |
| REET                                    |  | CITY                           |  | STATE              |  | ZIP CODE                       |  |

|                                                |  |                                       |                                    |                              |                              |
|------------------------------------------------|--|---------------------------------------|------------------------------------|------------------------------|------------------------------|
| SSEE / 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) |  | TRADE IN ALLOWANCE |  | TAXABLE AMOUNT | SALESTAX PAID | TAX EXEMPTION REASON / SALES TAX # |
| VEHICLE PRICE                                                                    |  |                    |  |                |               |                                    |
| 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 |

|                                                                                                                                                                                                                                                                      |  |                                                        |  |                           |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--------------------------------------------------------|--|---------------------------|
| 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. |  | POWER OF ATTORNEY/AUTHORIZED SIGNATURE (IF APPLICABLE) |  | DATE<br><b>09/05/2012</b> |
| NATURE OF CERTIFIER/OWNER                                                                                                                                                                                                                                            |  |                                                        |  |                           |

|                                                                              |                                |                        |                                          |                                                                                          |                                   |                                       |
|------------------------------------------------------------------------------|--------------------------------|------------------------|------------------------------------------|------------------------------------------------------------------------------------------|-----------------------------------|---------------------------------------|
| OFFICE NUMBER<br><b>12249 @</b>                                              | COUNTY NAME<br><b>HAMILTON</b> | CO NUMBER<br><b>33</b> | DATE OF APPLICATION<br><b>09/05/2012</b> | BY AUTHORITY OF REGISTRAR OF MOTOR VEHICLES (COUNTY CLERK)<br><b>W.F. (BILL) KNOWLES</b> |                                   | <b>HJC27</b>                          |
| *ICE USE ONLY                                                                |                                |                        |                                          |                                                                                          |                                   |                                       |
| EMISSION: Trailer                                                            |                                |                        |                                          |                                                                                          |                                   |                                       |
| (total fees collected indicated certifies this form as a valid registration) |                                |                        |                                          |                                                                                          |                                   |                                       |
| REGISTRATION FEE<br><b>79.75</b>                                             | CREDIT                         | LEASE FEE              | TRANS FEE                                | CLERK FEE                                                                                | ISSUANCE FEE<br><b>12.00</b>      | TITLE FEE<br><b>5.50</b>              |
|                                                                              |                                |                        |                                          |                                                                                          | TOTAL TAX COLLECTED<br><b>.00</b> |                                       |
| SALES OR USE TAX                                                             |                                | SA TAX                 | LOCAL TAX                                | ADDITIONAL TAX                                                                           | COLLECTED IN STATE OF             | COUNTY WHEEL TAX                      |
| SALES TAX <input type="checkbox"/> USE TAX                                   |                                |                        |                                          |                                                                                          |                                   |                                       |
| SERVICE OPT FEE                                                              |                                | ORGAN DONOR            | POSTAGE                                  | VER                                                                                      | ID / RESIDENCY VERIFICATION       | *TOTAL FEES COLLECTED<br><b>97.25</b> |