



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

OFFICIAL VEHICLE REGISTRATION

Stickers:

NEW OR CURRENT TITLE NUMBER	TRANSACTION CODE*	REGISTRATION ONLY NUMBER
30482422	001	916256

OWNER INFORMATION *LEGAL STATUS: 1 (AND) 2 (OR) ☐ ENTER NAME CODE IN BOX 1 (SAME) 2 (DIFFERENT) 3 (MULTIPLE LAST NAMES) 4 (COMPANY) 5 (OVER 28 CHARACTERS) 4			MAO ☒ N	ILU ☒ N	
ST NAME	FIRST NAME	MIDDLE INITIAL	LAST NAME	FIRST NAME	MIDDLE INITIAL
BOWMAN TRAILER LEASING LLC					
ADDRESS 1 (MAILING)			ADDRESS 2 (PHYSICAL)		
10233 GOVERNOR LN BLVD					
CITY	STATE	ZIP CODE	CITY	STATE	ZIP CODE
WILLIAMSPORT	MD	21795			
OFFICE OF RESIDENCE/PRINCIPAL BUS OR INCORP LOCATION	PURCHASE DATE	*LEASED ☒ *SERVICE OPTIONS ☐	TELEPHONE #	*PLACARD/HEARING IMPAIRED CLS/YR	*INSURANCE POLICY #
HAMILTON 033	06/29/2012	SEE REVERSE SIDE FOR INSTRUCTIONS	301 582 1793		

VEHICLE INFORMATION		MAKE	MODEL	YEAR	BODY	TITLE BRAND - translation	CODE	TYPE OF FUEL - translation	CODE
IJJV532WX7L040628		WABA	1JJ	2007	SE		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	
73897916	TN	TN	F	S				1	
OR CODE (enter appropriate code)* LOWER	MOBILE HOME LGTH	WIDTH	# AXLES	GROSS VEHICLE WEIGHT	*VEHICLE TRADE-IN DESCRIPTION		COMPANY VEHICLE #		
3							916256		

*SEE REVERSE SIDE FOR COMPLETE INSTRUCTIONS							
VEHICLE # (1)	CLASS CODE/ISSUE YR (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)
J381887	8020/1994						PERMANENT
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 DATE
LIEN CODE	FIRST LIENHOLDER	06/29/2012
120 E BALTIMORE ST 25 FL		
CITY	BALTIMORE	
STATE	MD	
ZIP CODE	21202	
LIEN CODE	SECOND LIENHOLDER	LIEN DATE
CITY		
STATE		
ZIP CODE		

SSEE / REGISTRANT INFORMATION (OWNER OF PLATE)		LEGAL STATUS ☐	NAME CODE ☐	MAO ☐	ILU ☐
NAME		NAME			
CITY		STATE			
ZIP CODE		ZIP CODE			

*SEE REVERSE SIDE FOR COMPLETE INSTRUCTIONS				
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 if eligible or altered Certificate of Title)					
☐ LOST	☐ STOLEN	☐ MUTILATED	☐ RTN'D DUE TO NON DELIVERY	☐ ALTERED	☐ 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 determine the accuracy of the information provided by me or on my behalf.		DATE
SIGNATURE OF CERTIFIER/OWNER		09/05/2012
POWER OF ATTORNEY/AUTHORIZED SIGNATURE (IF APPLICABLE)		

COIN NUMBER	COUNTY NAME	CO NUMBER	DATE OF APPLICATION	BY AUTHORITY OF REGISTRAR OF MOTOR VEHICLES (COUNTY CLERK)		
12249 @	HAMILTON	33	09/05/2012	W.F. (BILL) KNOWLES		
EMISSION: Trailer			HJC27			
*TOTAL FEES COLLECTED INDICATES THIS FORM AS A VALID REGISTRATION						
REGISTRATION FEE	CREDIT	LEASE FEE	TRANS FEE	ISSUANCE FEE	TITLE FEE	TOTAL TAX COLLECTED
79.75				12.00	5.50	.00
SALES TAX	SALES OR USE TAX	SA TAX	LOCAL TAX	ADDITIONAL TAX	COLLECTED IN STATE OF	COUNTY WHEEL TAX
SERVICE OPT FEE	ORGAN DONOR	POSTAGE	VER	ID / RESIDENCY VERIFICATION	TOTAL FEES COLLECTED	
					97.25	