



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

OFFICIAL VEHICLE REGISTRATION

919325

ity Stickers:

W OR CURRENT TITLE NUMBER	TRANSACTION CODE	REGISTRATION ONLY NUMBER
0482964	001	

ENTER NAME CODE IN BOX 1 (SAME) 2(DIFFERENT) 3(MULTIPLE LAST NAMES) 4(COMPANY) 5(OVER 28 CHARACTERS)	MAO	ILU
4	N	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	

Y	STATE	ZIP CODE	CITY	STATE	ZIP CODE
	MD	21795			
WILLIAMSPORT					

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	0		301 582 1793		

ICLE INFORMATION

MAKE	MODEL	YEAR	BODY	TITLE BRAND - translation	CODE	TYPE OF FUEL - translation	CODE
STOU	ZGP	2007	SE		U		9
IDW1A53237B993207							

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
TN	F	S			1
73917988					

OR CODE (enter appropriate code)* ER LOWER	MOBILE HOME LGTH WIDTH	# AXLES	GROSS VEHICLE WEIGHT	*VEHICLE TRADE-IN DESCRIPTION	COMPANY VEHICLE #
0					919325

ITE INFORMATION \*(required for Title and Registration and Registration Only Transactions) SEE REVERSE SIDE FOR COMPLETE INSTRUCTIONS

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)
J381955	8020/1994					PERMANENT

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	FIRST LIENHOLDER	LIEN DATE
	SUNTRUST BANK	06/29/2012

REET	CITY	STATE	ZIP CODE
120 E BALTIMORE ST 25 FL	BALTIMORE	MD	21202

N CODE	SECOND LIENHOLDER	LIEN DATE

REET	CITY	STATE	ZIP CODE

SSSEE / REGISTRANT INFORMATION(OWNER OF PLATE)	LEGAL STATUS	NAME CODE	MAO	ILU

ME	NAME		
DRESS	CITY	STATE	ZIP CODE

ICLE COST / TAX INFORMATION \*(required for Title & Registration Transactions)

LE PRICE	TRADE IN ALLOWANCE	TAXABLE AMOUNT	SALESTAX PAID	*TAX EXEMPTION REASON / SALES TAX #

ALER NAME	DEALER ADDRESS	DEALER #

quired for Duplicate Title - T.C.A. 55-3-115 (submit illegible or altered Certificate of Title)

LOST	STOLEN	MUTILATED	RTND DUE TO NON DELIVERY	ALTERED	ILLEGIBLE

I, the undersigned, being duly sworn, depose and say that the foregoing is a true and correct copy of the information provided by me or on my behalf, and 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.

NATURE OF CERTIFIER/OWNER	POWER OF ATTORNEY/AUTHORIZED SIGNATURE(IF APPLICABLE)	DATE
		09/06/2012

ICE NUMBER	COUNTY NAME	CO NUMBER	DATE OF APPLICATION	BY AUTHORITY OF REGISTRAR OF MOTOR VEHICLES(COUNTY CLERK)
12250 @	HAMILTON	33	09/06/2012	W.F. (BILL) KNOWLES

ICE USE ONLY	(total fees collected indicated certifies this form as a valid registration)						
GISTRATION FEE	CREDIT	LEASE FEE	TRANS FEE	CLERK FEE	ISSUANCE FEE	TITLE FEE	TOTAL TAX COLLECTED
79.75					12.00	5.50	.00

PUTATION OF	SALES OR USE TAX	SA TAX	LOCAL TAX	ADDITIONAL TAX	COLLECTED IN STATE OF	COUNTY WHEEL TAX	CITY STICKER FEE
SALES TAX	USE TAX						
SERVICE OPT FEE	ORGAN DONOR	POSTAGE	VER	ID / RESIDENCY VERIFICATION	*TOTAL FEES COLLECTED		
					97.25		