



OFFICIAL VEHICLE REGISTRATION

927108

City Stickers:

NEW OR CURRENT TITLE NUMBER 84199397	TRANSACTION CODE N01	REGISTRATION ONLY NUMBER
--	--------------------------------	--------------------------

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) 5 MAO <input checked="" type="checkbox"/> ILU <input checked="" type="checkbox"/>		
LAST NAME BOWMAN SALES AND EQUIPMENT INC	FIRST NAME BOWMAN SALES AND EQUIPMENT INC	MIDDLE INITIAL BOWMAN SALES AND EQUIPMENT INC
ADDRESS 1 (MAILING) PO BOX 433 % 10233 GOVENOR LN BLVD		ADDRESS 2 (PHYSICAL)
CITY WILLIAMSPORT	STATE MD	ZIP CODE 21795
CITY OF RESIDENCE/PRINCIPAL BUS OR INCORP LOCATION HAMILTON 033	PURCHASE DATE 06/30/2011	*LEASED <input checked="" type="checkbox"/> *SERVICE OPTIONS <input type="checkbox"/> <small>SEE REVERSE SIDE FOR INSTRUCTIONS</small>
TELEPHONE # 301 582 1793		*PLACARD/HEARING IMPAIRED CLS/YR 301 582 1793
*INSURANCE POLICY #		

VIN 1JJV532W3YL594353	MAKE WABA	MODEL 1JJ	YEAR 2000	BODY SE	TITLE BRAND - list the appropriate code (N)NEW (U)USED (1)RECONSTRUCTED VEHICLE (2)FLOOD DAMAGE (D)DEMO (3)SPECIALLY CONSTRUCTED (8)PARTS ONLY	CODE U	TYPE OF FUEL - list the appropriate code GAS (1) ELECTRIC/HYBRID (3) DIESEL (2) PROPANE (4)	CODE 9
SURRENDERED TITLE # 0631704120712	STATE WI	PREVIOUS STATES TITLED	VEHICLE USE F	VEHICLE TYPE S	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 1	
COLOR CODE (enter appropriate code)* UPPER LOWER O	MOBILE HOME LGTH WIDTH	# AXLES	GROSS VEHICLE WEIGHT	*VEHICLE TRADE-IN DESCRIPTION		COMPANY VEHICLE # 927108		

PLATE INFORMATION *(required for Title and Registration and Registration Only Transactions) SEE REVERSE SIDE FOR COMPLETE INSTRUCTIONS							
PLATE #(1) U334918	CLASSCODE/ISSUEYR(1)(3) 8020/1994	VALIDATION #(1)	COUNTY STICKER #(1)	CITY STICKER #(1)(2)	*PLATE #(TRADE IN)(2)	CLASS CODE/ISSUE YR(2)	EXPIRATION DATE (1)(2)(3) PERMANENT
TDR 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 CODE	FIRST LIENHOLDER SUNTRUST BANK	LIEN DATE 06/30/2011	
STREET 120 E BALTIMORE 25TH FL		CITY BALTIMORE	STATE ZIP CODE MD 21202
LIEN CODE	SECOND LIENHOLDER	LIEN DATE	
STREET		CITY	STATE ZIP CODE

*LESSEE / 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)			
SALE PRICE	TRADE IN ALLOWANCE	TAXABLE AMOUNT	SALESTAX PAID
DEALER NAME		DEALER ADDRESS	DEALER #
TAX EXEMPTION REASON / SALES TAX #			

*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

Under penalties of perjury, 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 or its assignees to determine the accuracy of the information provided by me or on my behalf.

SIGNATURE OF CERTIFIER/OWNER	POWER OF ATTORNEY/AUTHORIZED SIGNATURE(IF APPLICABLE)	DATE 12/30/2011
------------------------------	---	---------------------------

INVOICE NUMBER 11364 @	COUNTY NAME HAMILTON	CO NUMBER 33	DATE OF APPLICATION 12/30/2011	BY AUTHORITY OF REGISTRAR OF MOTOR VEHICLES(COUNTY CLERK) W.F. (BILL) KNOWLES	HJC27
OFFICE USE ONLY REGISTRATION FEE 79.75	CREDIT	LEASE FEE	TRANS FEE	CLERK FEE	ISSUANCE FEE 12.00
COMPUTATION OF <input type="checkbox"/> SALES TAX <input type="checkbox"/> USE TAX	SALES OR USE TAX	SA TAX	LOCAL TAX	ADDITIONAL TAX	TITLE FEE 5.50
*SERVICE OPT FEE	ORGAN DONOR	POSTAGE	VER	ID / RESIDENCY VERIFICATION	TOTAL TAX COLLECTED .00
					TOTAL FEES COLLECTED 97.25