



OFFICIAL VEHICLE REGISTRATION

929100

ty Stickers:

OR CURRENT TITLE NUMBER 0480257	TRANSACTION CODE 001	REGISTRATION ONLY NUMBER
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VEHICLE 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) MAO ILU

OWNER NAME LOWMAN TRAILER LEASING LLC	FIRST NAME MIDDLE INITIAL LAST NAME
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ADDRESS 1 (MAILING) 0233 GOVERNOR LN BLVD	ADDRESS 2 (PHYSICAL)
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STATE MD	ZIP CODE 21795	CITY	STATE	ZIP CODE
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OFFICE OF RESIDENCE/PRINCIPAL BUS OR INCORP LOCATION HAMILTON 033	PURCHASE DATE 06/29/2012	*LEASED <input checked="" type="checkbox"/> *SERVICE OPTIONS <input type="checkbox"/> SEE REVERSE SIDE FOR INSTRUCTIONS	TELEPHONE # 301 582 1793	*PLACARD/HEARING IMPAIRED CLS/YR	*INSURANCE POLICY #
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VEHICLE INFORMATION

VEHICLE IDENTIFICATION NUMBER GRAA06257T538993	MAKE GDAN	MODEL 1GR	YEAR 2007	BODY SE	TITLE BRAND - translation	CODE U	TYPE OF FUEL - translation	CODE 9
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REGISTERED TITLE # 4681131	STATE TN	PREVIOUS STATES TITLED TN	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
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VEHICLE OR CODE (enter appropriate code) OR LOWER	MOBILE HOME LGTH WIDTH	# AXLES	GROSS VEHICLE WEIGHT	*VEHICLE TRADE-IN DESCRIPTION	COMPANY VEHICLE # 929100
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VEHICLE INFORMATION (required for Title and Registration and Registration Only Transactions) SEE REVERSE SIDE FOR COMPLETE INSTRUCTIONS

VEHICLE # (1) J380905	CLASSCODE/ISSUE YR(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
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*STICKER # (4)	TEMP OPERATOR PERMIT # (3)	# OF SEATS (5)	ZONE(COUNTY NAME)(6)	USDOT / REGISTRANT # (7)	MOTOR CARRIER # (8)
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LIEN INFORMATION (if lien present)

LIEN CODE	FIRST LIENHOLDER SUNTRUST BANK	LIEN DATE 06/29/2012
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STREET 120 E BALTIMORE ST 25 FL	CITY BALTIMORE	STATE MD	ZIP CODE 21202
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LIEN CODE	SECOND LIENHOLDER	LIEN DATE
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STREET	CITY	STATE	ZIP CODE
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REGISTRANT / REGISTRANT INFORMATION (OWNER OF PLATE)

REGISTRANT NAME	LEGAL STATUS <input type="checkbox"/>	NAME CODE <input type="checkbox"/>	MAO <input type="checkbox"/>	ILU <input type="checkbox"/>
REGISTRANT NAME	CITY	STATE	ZIP CODE	

VEHICLE COST / TAX INFORMATION (required for Title & Registration Transactions)

VEHICLE PRICE	TRADE IN ALLOWANCE	TAXABLE AMOUNT	SALES TAX PAID	*TAX EXEMPTION REASON / SALES TAX #
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DEALER NAME	DEALER ADDRESS	DEALER #
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<input type="checkbox"/> LOST	<input type="checkbox"/> STOLEN	<input type="checkbox"/> MUTILATED	<input type="checkbox"/> RTN'D DUE TO NON DELIVERY	<input type="checkbox"/> ALTERED	<input type="checkbox"/> ILLEGIBLE
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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 to 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 08/29/2012
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OFFICE NUMBER 12242 @	COUNTY NAME HAMILTON	CO NUMBER 33	DATE OF APPLICATION 08/29/2012	BY AUTHORITY OF REGISTRAR OF MOTOR VEHICLES (COUNTY CLERK) W.F. (BILL) KNOWLES	HJC27
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REGISTRATION FEE 79.75	CREDIT	LEASE FEE	TRANS FEE	CLERK FEE	ISSUANCE FEE 12.00	TITLE FEE 5.50	TOTAL TAX COLLECTED .00
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SALES TAX <input type="checkbox"/> USE TAX	SALES OR USE TAX	SA TAX	LOCAL TAX	ADDITIONAL TAX	COLLECTED IN STATE OF	COUNTY WHEEL TAX	CITY STICKER FEE
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SERVICE OPT FEE	ORGAN DONOR	POSTAGE	VER	ID / RESIDENCY VERIFICATION	TOTAL FEES COLLECTED 97.25
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