



OFFICIAL VEHICLE REGISTRATION

929226

City Stickers:

NEW OR CURRENT TITLE NUMBER 84202684	TRANSACTION CODE 001	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"/> N	ILU <input checked="" type="checkbox"/> N
LAST NAME BOWMAN SALES AND EQUIPMENT INC			FIRST NAME 			MIDDLE INITIAL 	
ADDRESS 1 (MAILING) PO BOX 433 % 10233 GOVENOR LN BLVD			ADDRESS 2 (PHYSICAL) 				
CITY WILLIAMSPORT		STATE MD	ZIP CODE 21795		CITY 		
CITY OF RESIDENCE/PRINCIPAL BUS OR INCORP LOCATION HAMILTON 033		PURCHASE DATE 06/30/2011	*LEASED <input type="checkbox"/> *SERVICE OPTIONS <input type="checkbox"/> SEE REVERSE SIDE FOR INSTRUCTIONS		TELEPHONE # 301 582 1793	*PLACARD/HEARING IMPAIRED CLS/YR 	*INSURANCE POLICY #

VIN 1GRAA06237T538815	MAKE GDAN	MODEL 1GR	YEAR 2007	BODY SE	TITLE BRAND - list the appropriate code (N) NEW (U) USED (D) DEMO (B) PARTS ONLY (1) RECONSTRUCTED VEHICLE (2) FLOOD DAMAGE (3) SPECIALLY CONSTRUCTED	CODE U	TYPE OF FUEL - list the appropriate code GAS (1) DIESEL (2) ELECTRIC/HYBRID (3) PROPANE (4)	CODE 9
SURRENDERED TITLE # 74678922	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) IN EXCESS OF MECHANICAL LIMITS (9)	CODE 1	
COLOR CODE (enter appropriate code) UPPER LOWER O	MOBILE HOME LOTH WOTH 	# AXLES 	GROSS VEHICLE WEIGHT 	*VEHICLE TRADE-IN DESCRIPTION 			COMPANY VEHICLE # 929226	

PLATE INFORMATION * (required for Title and Registration and Registration Only Transactions) SEE REVERSE SIDE FOR COMPLETE INSTRUCTIONS							
PLATE #(1) U336734	CLASS CODE/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
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 MD
		ZIP CODE 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 	SALE TAX PAID 	*TAX EXEMPTION REASON / SALES TAX #
DEALER NAME 		DEALER ADDRESS 		DEALER #

<input type="checkbox"/> LOST	<input type="checkbox"/> STOLEN	<input type="checkbox"/> MUTILATED	<input type="checkbox"/> RT'ND 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 01/09/2012
---	---	---------------------------

INVOICE NUMBER 12009 @	COUNTY NAME HAMILTON	GO NUMBER 33	DATE OF APPLICATION 01/09/2012	BY AUTHORITY OF REGISTRAR OF MOTOR VEHICLES/COUNTY CLERK W.F. (BILL) KNOWLES	HJC27
OFFICE USE ONLY EMISSION: Trailer (total fees collected indicated certifies this form as a valid registration)					
REGISTRATION FEE 79.75	CREDIT 	LEASE FEE 	TRANS FEE 	CLERK FEE 	ISSUANCE FEE 12.00
COMPUTATION OF SALES OR USE TAX <input type="checkbox"/> SALES TAX <input type="checkbox"/> 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
					CITY STICKER FEE
					TOTAL FEES COLLECTED 97.25