



OFFICIAL VEHICLE REGISTRATION

965997

City Stickers:

NEW OR CURRENT TITLE NUMBER 90479070	TRANSACTION CODE 001	REGISTRATION ONLY NUMBER
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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) 4 MAO <input checked="" type="checkbox"/> ILU <input checked="" type="checkbox"/>											
LAST NAME BOWMAN TRAILER LEASING LLC			FIRST NAME 			MIDDLE INITIAL 					
ADDRESS 1 (MAILING) 10233 GOVERNOR LN BLVD						ADDRESS 2 (PHYSICAL) 					
CITY WILLIAMSPORT		STATE MD		ZIP CODE 21795		CITY 		STATE 		ZIP CODE 	
CITY OF RESIDENCE/PRINCIPAL BUS OR INCORP LOCATION HAMILTON 033		PURCHASE DATE 06/29/2012		*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 		*INSURANCE POLICY # 	

VEHICLE INFORMATION															
VIN 1JJV532W8XL582911		MAKE WABA		MODEL 1JJ		YEAR 1999		BODY SE		TITLE BRAND - translation 		CODE U	TYPE OF FUEL - translation 		CODE 9
SURRENDERED TITLE # 70630073		STATE TN	PREVIOUS STATES TITLED OK		VEHICLE USE F		VEHICLE TYPE S		CURRENT MILEAGE 		ODOMETER ACTUAL (8) NOT ACTUAL (9) 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 WDTH 		# AXLES 		GROSS VEHICLE WEIGHT 		*VEHICLE TRADE-IN DESCRIPTION 			COMPANY VEHICLE # 965997				

PLATE INFORMATION *(required for Title and Registration and Registration Only Transactions) SEE REVERSE SIDE FOR COMPLETE INSTRUCTIONS															
PLATE #(1) U380825		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 06/29/2012		
STREET 120 E BALTIMORE ST 25 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 				SALESTAX PAID 		*TAX EXEMPTION REASON / SALES TAX # 			
DEALER NAME 				DEALER ADDRESS 				DEALER # 					

*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"/> RT'ND DUE TO NON DELIEVERY		<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 08/24/2012	
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INVOICE NUMBER 12237 @		COUNTY NAME HAMILTON		CO NUMBER 33		DATE OF APPLICATION 08/24/2012		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		LEASE FEE 		TRANS FEE 		CLERK FEE 		ISSUANCE FEE 12.00		TITLE FEE 5.50	
COMPUTATION OF <input type="checkbox"/> SALES TAX <input type="checkbox"/> USE TAX		SALES OR USE TAX 		SA TAX 		LOCAL TAX 		ADDITIONAL TAX 		COLLECTED IN STATE OF 	
*SERVICE OPT FEE 		ORGAN DONOR 		POSTAGE 		VER 		ID / RESIDENCY VERIFICATION 		*TOTAL FEES COLLECTED 97.25	