



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



City Stickers:

STATE

NEW OR CURRENT TITLE NUMBER 84202082	TRANSACTION CODE 004	REGISTRATION ONLY NUMBER 3319890
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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) 5			MAD <input checked="" type="checkbox"/> N <input type="checkbox"/> U <input checked="" type="checkbox"/> N		
LAST NAME BOWMAN SALES AND EQUIPMENT INC			FIRST NAME 		
MIDDLE INITIAL 			MIDDLE INITIAL 		
ADDRESS 1 (MAILING) 10233 GOVERNOR LN BLVD			ADDRESS 2 (PHYSICAL) 		
CITY WILLIAMSPORT		STATE MD	ZIP CODE 21795-0433		CITY
STATE MD		ZIP CODE 21795-0433		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"/> <small>SEE REVERSE SIDE FOR INSTRUCTIONS</small>	TELEPHONE # 301 582 1793	*PLACARD/HEARING IMPAIRED CLS/YR 	*INSURANCE POLICY #

VEHICLE INFORMATION										
VIN 1GRAP06228T540099	MAKE GDAN	MODEL 1GR	YEAR 2008	BODY SE	TITLE BRAND - translation USED	CODE U	TYPE OF FUEL - translation 		CODE 9	
SURRENDERED TITLE # 	STATE TN	PREVIOUS STATES TITLED TN	VEHICLE USE F	VEHICLE TYPE S	CURRENT MILEAGE 	ODOMETER ACTUAL (0) NOT ACTUAL (8) INDICATOR OVER 10 YRS / 18,000 LBS (1) (List one) IN EXCESS OF MECHANICAL LIMITS (9)		CODE 1		
COLOR CODE (enter appropriate code)* UPPER O LOWER 	MOBILE HOME LGTH WOTH 	# AXLES 	GROSS VEHICLE WEIGHT 	*VEHICLE TRADE-IN DESCRIPTION 			COMPANY VEHICLE # 968633			

PLATE INFORMATION (Required for Title and Registration and Registration Only Transactions) SEE REVERSE SIDE FOR COMPLETE INSTRUCTIONS							
PLATE #(1) U544100	CLASSCODE/ISSUEYR(1)(3) 8020/1994	VALIDATION #(1) 	COUNTY STICKER #(1) 	CITY STICKER #(1)(2) 	*PLATE #(TRADE IN)(2) U336400	CLASS CODE/ISSUE YR(2) 8020 1994	EXPIRATION DATE (1)(2)(3) PERMANENT
TDR STICKER #(4) 	TEMP OPERATOR PERMIT #(3) 	# OF SEATS(5) 	ZONE(COUNTY NAME)(8) 	USDOT / REGISTRANT #(7) 	MOTOR CARRIER #(9) 		

LIEN INFORMATION (if lien present)			
LIEN CODE 	FIRST LIENHOLDER 	LIEN DATE 	
STREET 		CITY 	STATE
STREET 		CITY 	STATE
LIEN CODE 	SECOND LIENHOLDER 	LIEN DATE 	
STREET 		CITY 	STATE

*LESSEE / REGISTRANT INFORMATION (OWNER OF PLATE)		LEGAL STATUS <input type="checkbox"/>	NAME CODE <input type="checkbox"/>	MAD <input type="checkbox"/>	ILLU <input type="checkbox"/>
NAME 		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 # 	

<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"/> ILLIGIBLE
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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 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 09/16/2014
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INVOICE NUMBER 14259 @	COUNTY NAME HAMILTON	GO NUMBER 33	DATE OF APPLICATION 09/16/2014	BY AUTHORITY OF REGISTRAR OF MOTOR VEHICLES (COUNTY CLERK) W.F. (BILL) KNOWLES	HCM27
OFFICE USE ONLY EMISSION: NOT APPLICABLE (total fees collected indicated certifies this form as a valid registration)					
REGISTRATION FEE 	CREDIT 	LEASE FEE 	TRANS FEE 11.75	CLERK FEE 	ISSUANCE FEE 2.50
COMPUTATION OF <input type="checkbox"/> SALES TAX <input type="checkbox"/> USE TAX		SALES OR USE TAX 	SA TAX 	LOCAL TAX 	ADDITIONAL TAX
*SERVICE OPT FEE 		ORGAN DONOR 	POSTAGE 	VER 	ID / RESIDENCY VERIFICATION
*TOTAL FEES COLLECTED 14.25					TOTAL TAX COLLECTED .00