



# OFFICIAL VEHICLE REGISTRATION

971019

**Vehicle Information Stickers:**

VEHICLE OR CURRENT TITLE NUMBER <b>30494994</b>	TRANSACTION CODE <b>001</b>	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) <b>4</b>						MAO <input checked="" type="checkbox"/>	ILU <input checked="" type="checkbox"/>
FIRST NAME <b>BOWMAN TRAILER LEASING LLC</b>			MIDDLE INITIAL			LAST NAME FIRST NAME MIDDLE INITIAL	
ADDRESS 1 (MAILING) <b>10233 GOVERNOR LN BLVD</b>				ADDRESS 2 (PHYSICAL)			
CITY <b>WILLIAMSPORT</b>		STATE <b>MD</b>	ZIP CODE <b>21795</b>		CITY	STATE	ZIP CODE
ADDRESS OF RESIDENCE/PRINCIPAL BUS OR INCORP LOCATION <b>HAMILTON 033</b>		PURCHASE DATE <b>06/29/2012</b>	*LEASED <input checked="" type="checkbox"/> *SERVICE OPTIONS <input type="checkbox"/> SEE REVERSE SIDE FOR INSTRUCTIONS		TELEPHONE # <b>301 582 1793</b>	*PLACARD/HEARING IMPAIRED CLS/YR	*INSURANCE POLICY #

VEHICLE INFORMATION										
VIN <b>3H3V532C38T053065</b>		MAKE <b>HYTR</b>	MODEL <b>3H3</b>	YEAR <b>2008</b>	BODY <b>SE</b>	TITLE BRAND - translation <b>USED</b>	CODE <b>U</b>	TYPE OF FUEL - translation		CODE <b>9</b>
CURRENTLY REGISTERED TITLE # <b>74696018</b>		STATE <b>TN</b>	PREVIOUS STATES TITLED <b>TN</b>		VEHICLE USE <b>F</b>	VEHICLE TYPE <b>S</b>	CURRENT MILEAGE	ODOMETER ACTUAL (5) NOT ACTUAL (8) INDICATOR OVER 10 YRS / 16,000 LBS (1) (List one) IN EXCESS OF MECHANICAL LIMITS (9)		CODE <b>1</b>
VEHICLE OR CODE (enter appropriate code) *PER LOWER <b>C</b>	MOBILE HOME LGTH WIDTH		# AXLES	GROSS VEHICLE WEIGHT		*VEHICLE TRADE-IN DESCRIPTION		COMPANY VEHICLE # <b>971019</b>		

PLATE INFORMATION *(required for Title and Registration and Registration Only Transactions) SEE REVERSE SIDE FOR COMPLETE INSTRUCTIONS							
PLATE # (1) <b>U399277</b>	CLASS CODE/ISSUE YR (1)(3) <b>8020/1994</b>	VALIDATION # (1)	COUNTY STICKER # (1)	CITY STICKER # (1)(2)	*PLATE # (TRADE IN) (2)	CLASS CODE/ISSUE YR (2)	EXPIRATION DATE (1)(2)(3) <b>PERMANENT</b>
REGISTRATION 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 <b>SUNTRUST BANK</b>	LIEN DATE <b>06/29/2012</b>	
REET	<b>120 E BALTIMORE ST 25 FL</b>	CITY <b>BALTIMORE</b>	STATE <b>MD</b>
ZIP CODE	<b>21202</b>		
LIEN CODE	SECOND LIENHOLDER	LIEN DATE	
REET	CITY	STATE	ZIP CODE

REGISTRANT / REGISTRANT INFORMATION (OWNER OF PLATE)			
LEGAL STATUS <input type="checkbox"/>	NAME CODE <input type="checkbox"/>	MAO <input type="checkbox"/>	ILU <input type="checkbox"/>
NAME			
ADDRESS CITY STATE ZIP CODE			

VEHICLE COST / TAX INFORMATION *(required for Title & Registration Transactions)			
VEHICLE PRICE	TRADE IN ALLOWANCE	TAXABLE AMOUNT	SALES TAX PAID
DEALER NAME			DEALER ADDRESS
		DEALER #	

*required for Duplicate Title - T.C.A. 55-3-115 (submit if illegible or altered Certificate of Title)			
<input type="checkbox"/> LOST	<input type="checkbox"/> STOLEN	<input type="checkbox"/> MUTILATED	<input type="checkbox"/> RTND'D DUE TO NON DELIVERY
<input type="checkbox"/> ALTERED	<input type="checkbox"/> ILLEGIBLE		

I, the undersigned, for 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 <b>10/17/2012</b>
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PLATE NUMBER <b>12291 @</b>	COUNTY NAME <b>HAMILTON</b>	CO NUMBER <b>33</b>	DATE OF APPLICATION <b>10/17/2012</b>	BY AUTHORITY OF REGISTRAR OF MOTOR VEHICLES (COUNTY CLERK) <b>W.F. (BILL) KNOWLES</b>	<b>KAR46</b>
*Emission: Trailer					
(total fees collected indicated certifies this form as a valid registration)					
REGISTRATION FEE <b>79.75</b>	CREDIT	LEASE FEE	TRANS FEE	CLERK FEE <b>12.00</b>	TITLE FEE <b>5.50</b>
TOTAL TAX COLLECTED <b>.00</b>					
IMPUTATION OF SALES TAX <input type="checkbox"/> USE TAX <input type="checkbox"/>	SALES OR USE TAX	SA TAX	LOCAL TAX	ADDITIONAL TAX	COLLECTED IN STATE OF
COUNTY WHEEL TAX	CITY STICKER FEE				
SERVICE OPT FEE	ORGAN DONOR	POSTAGE	VER	ID / RESIDENCY VERIFICATION	TOTAL FEES COLLECTED <b>97.25</b>