



# OFFICIAL VEHICLE REGISTRATION

975910

**Stickers:**

VEHICLE IDENTIFICATION NUMBER / OR CURRENT TITLE NUMBER <b>0492919</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"/> <b>N</b>	ILU <input checked="" type="checkbox"/> <b>N</b>
FIRST NAME <b>LOWMAN TRAILER LEASING LLC</b>	MIDDLE INITIAL	LAST NAME	FIRST NAME <b>LOWMAN TRAILER LEASING LLC</b>
ADDRESS 1 (MAILING) <b>0233 GOVERNOR LN BLVD</b>		ADDRESS 2 (PHYSICAL)	
STATE <b>MD</b>	ZIP CODE <b>21795</b>	CITY <b>VILLIAMSPORT</b>	STATE <b>MD</b>
RESIDENCE/PRINCIPAL BUS OR INCORP LOCATION <b>HAMILTON 033</b>	PURCHASE DATE <b>06/29/2012</b>	TELEPHONE # <b>301 582 1793</b>	*PLACARD/HEARING IMPAIRED CLS/YR <b>0</b>
*LEASED <input checked="" type="checkbox"/> *SERVICE OPTIONS <input type="checkbox"/>		*INSURANCE POLICY #	

VEHICLE INFORMATION	MAKE <b>WABA</b>	MODEL <b>1JJ</b>	YEAR <b>2007</b>	BODY <b>SE</b>	TITLE BRAND - translation <b>USED</b>	CODE <b>U</b>	TYPE OF FUEL - translation	CODE <b>9</b>
REGISTERED TITLE # <b>4681685</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 (8) NOT ACTUAL (9) INDICATOR OVER 10 YRS / 16,000 LBS (1) (List one) IN EXCESS OF MECHANICAL LIMITS (9)	CODE <b>1</b>	
DR CODE (enter appropriate code) FR LOWER	MOBILE HOME LGTH	WIDTH	# AXLES	GROSS VEHICLE WEIGHT	VEHICLE TRADE-IN DESCRIPTION	COMPANY VEHICLE # <b>975910</b>		

TITLE INFORMATION *(required for Title and Registration and Registration Only Transactions) SEE REVERSE SIDE FOR COMPLETE INSTRUCTIONS							
PLATE # (1) <b>I399062</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>
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	ADDRESS <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 INFORMATION (OWNER OF PLATE)	LEGAL STATUS <input type="checkbox"/>	NAME CODE <input type="checkbox"/>	MAO <input type="checkbox"/>	ILU <input type="checkbox"/>
NAME	CITY			
ADDRESS	STATE			
	ZIP CODE			

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

<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
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I, the undersigned, in consideration of the sum of \_\_\_\_\_ Dollars, to me in hand paid by \_\_\_\_\_ the receipt of which is hereby acknowledged, do hereby certify that the 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.

NATURE OF CERTIFIER/OWNER	POWER OF ATTORNEY/AUTHORIZED SIGNATURE (IF APPLICABLE)	DATE <b>10/09/2012</b>
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PLATE NUMBER <b>2283 @</b>	COUNTY NAME <b>HAMILTON</b>	CO NUMBER <b>33</b>	DATE OF APPLICATION <b>10/09/2012</b>	BY AUTHORITY OF REGISTRAR OF MOTOR VEHICLES (COUNTY CLERK) <b>W.F. (BILL) KNOWLES</b>	<b>KAR46</b>
VEHICLE USE ONLY EMISSION: Trailer					
REGISTRATION FEE <b>9.75</b>	CREDIT	LEASE FEE	TRANS FEE	CLERK FEE	ISSUANCE FEE <b>12.00</b>
SALES OR USE TAX		SA TAX	LOCAL TAX	ADDITIONAL TAX	TITLE FEE <b>5.50</b>
SALES TAX <input type="checkbox"/> USE TAX		COLLECTED IN STATE OF		COUNTY WHEEL TAX	TOTAL TAX COLLECTED <b>.00</b>
DRIVE OPT FEE	ORGAN DONOR	POSTAGE	VER	ID / RESIDENCY VERIFICATION	CITY STICKER FEE
TOTAL FEES COLLECTED <b>97.25</b>					