



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



STATE

City Stickers:

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| NEW OR CURRENT TITLE NUMBER 93584090 | TRANSACTION CODE* N01 | 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 25 CHARACTERS) <input checked="" type="checkbox"/> 4 | | | | | | MAO <input checked="" type="checkbox"/> N | ILU <input checked="" type="checkbox"/> N | |
| 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 OF RESIDENCE/PRINCIPAL BUS OR INCORP LOCATION HAMILTON 033 | | PURCHASE DATE 03/10/2014 | | *LEASED <input checked="" type="checkbox"/> *SERVICE OPTIONS <input type="checkbox"/> <small>SEE REVERSE SIDE FOR INSTRUCTIONS</small> | | TELEPHONE # 240-772-5487 | *PLACARD/HEARING IMPAIRED CLS/YR | *INSURANCE POLICY # |

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| VEHICLE INFORMATION | | | | | | | | | | | |
| VIN 1GRAA0624XS071250 | | MAKE GDAN | MODEL 1GR | YEAR 1999 | BODY SE | TITLE BRAND - translation USED | | CODE U | TYPE OF FUEL - translation | | CODE 9 |
| SURRENDERED TITLE # 77317848 | | STATE FL | PREVIOUS STATES TITLED | | VEHICLE USE F | VEHICLE TYPE S | CURRENT MILEAGE | | ODOMETER ACTUAL (8) NOT ACTUAL (8) INDICATOR OVER 10 YRS / 10,000 LBS (1) (List one) IN EXCESS OF MECHANICAL LIMITS (9) | | CODE 1 |
| COLOR CODE (enter appropriate code)* UPPER O LOWER | | MOBILE HOME LGTH WIDTH | | # AXLES | GROSS VEHICLE WEIGHT | | *VEHICLE TRADE-IN DESCRIPTION | | | COMPANY VEHICLE # A25464 | |

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| PLATE INFORMATION (required for Title and Registration and Registration Only Transactions) SEE REVERSE SIDE FOR COMPLETE INSTRUCTIONS | | | | | | | | | | |
| PLATE #(1) U486123 | 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) | |

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|---|--|--|--------------------------|--|--|--------------------|--|--------------------------|--------------------------------|--|
| LIEN INFORMATION (if lien present) | | | | | | | | | | |
| LIEN CODE | FIRST LIENHOLDER SUNTRUST BANK | | | | | | | | LIEN DATE 03/10/2014 | |
| 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 | | |

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| *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 |

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| 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 # | | |

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| *Required for Duplicate Title - T.C.A. 55-3-115 (submit legitimate or altered Certificate of Title) | | | | | | | | | | |
| <input type="checkbox"/> LOST | <input type="checkbox"/> STOLEN | <input type="checkbox"/> MUTILATED | <input type="checkbox"/> RTND DUE TO NON DELIVERY | <input type="checkbox"/> ALTERED | <input type="checkbox"/> ILLEGIBLE | | | | | |

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|------------------------------|--|--|--|--|--|--|--|--|---------------------------|--|
| SIGNATURE OF CERTIFIER/OWNER | | | | | | POWER OF ATTORNEY/AUTHORIZED SIGNATURE (IF APPLICABLE) | | | DATE 03/27/2014 | |
|------------------------------|--|--|--|--|--|--|--|--|---------------------------|--|

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| INVOICE NUMBER 14086 @ | COUNTY NAME HAMILTON | | CO NUMBER 33 | DATE OF APPLICATION 03/27/2014 | | BY AUTHORITY OF REGISTRAR OF MOTOR VEHICLES (COUNTY CLERK) W.F. (BILL) KNOWLES | | | HCM27 | |
| 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 | TOTAL TAX COLLECTED .00 | | |
| 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 | | COUNTY WHEEL TAX | CITY STICKER FEE | |
| *SERVICE OPT FEE | | ORGAN DONOR | POSTAGE | VER | ID / RESIDENCY VERIFICATION | | | TOTAL FEES COLLECTED 97.25 | | |