



OFFICIAL VEHICLE REGISTRATION

S

035351

City Stickers:

NEW OR CURRENT TITLE NUMBER 84179358	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) 5		MAO <input checked="" type="checkbox"/> ILU <input checked="" type="checkbox"/>
LAST NAME BOWMAN SALES AND EQUIPMENT INC	FIRST NAME 	MIDDLE INITIAL
ADDRESS 1 (MAILING) PO BOX 433 % 10233 GOVENOR LN BLVD		ADDRESS 2 (PHYSICAL)
CITY WILLIAMSPORT	STATE MD	ZIP CODE 21795
CITY OF RESIDENCE/PRINCIPAL BUS OR INCORP LOCATION HAMILTON 033	PURCHASE DATE 06/30/2011	*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 #

VIN 1GRAA0628XS057626	MAKE GDAN	MODEL 1GR	YEAR 1999	BODY SE	TITLE BRAND - list the appropriate code (N)NEW (U)USED (D)DEMO (S)SPECIALLY CONSTRUCTED (P)PARTS ONLY	CODE U	TYPE OF FUEL - list the appropriate code GAS (1) DIESEL (2) ELECTRIC/HYBRID (3) PROPANE (4)	CODE 9
SURRENDERED TITLE # 76948228	STATE TN	PREVIOUS STATES TITLED NC	VEHICLE USE F	VEHICLE TYPE S	CURRENT MILEAGE 	ODOMETER ACTUAL (0) NOT ACTUAL (8) INDICATOR OVER 10 YRS / 16,000 LBS (1) IN EXCESS OF MECHANICAL LIMITS (9) (List one)	CODE 1	
COLOR CODE (enter appropriate code) UPPER LOWER O	MOBILE HOME LGTH WIDTH 	# AXLES 	GROSS VEHICLE WEIGHT 	*VEHICLE TRADE-IN DESCRIPTION 	COMPANY VEHICLE # 035351			

PLATE # (1) U330307	CLASS CODE/ISSUE YR (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 CODE 	FIRST LIENHOLDER SUNTRUST BANK	LIEN DATE 06/30/2011
STREET 120 E BALTIMORE 25TH 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"/> RTN'D DUE TO NON DELIVERY	<input type="checkbox"/> ALTERED	<input type="checkbox"/> ILLEGIBLE
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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 10/28/2011
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INVOICE NUMBER 11301 @	COUNTY NAME HAMILTON	CO NUMBER 33	DATE OF APPLICATION 10/28/2011	BY AUTHORITY OF REGISTRAR OF MOTOR VEHICLES (COUNTY CLERK) W.F. (BILL) KNOWLES	HJC27
OFFICE USE ONLY REGISTRATION FEE 79.75	EMISSION: Trailer		(total fees collected indicated certifies this form as a valid registration)		
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 TAX COLLECTED .00
					TOTAL FEES COLLECTED 97.25