



OFFICIAL VEHICLE REGISTRATION

City Stickers:

NEW OR CURRENT TITLE NUMBER **90514603** TRANSACTION CODE **N01** REGISTRATION ONLY NUMBER **057392**

OWNER INFORMATION *LEGAL STATUS: 1 (AND) 2 (OR) ENTER NAME CODE IN BOX 1 (SAME) 2 (DIFFERENT) 3 (MULTIPLE LAST NAMES) 4 (COMPANY) 5 (OVER 28 CHARACTERS) **4**

LAST NAME **BOWMAN TRAILER LEASING LLC** FIRST NAME MIDDLE INITIAL LAST NAME FIRST NAME MIDDLE INITIAL MAO ILU

ADDRESS 1 (MAILING) **PO BOX 433 % 10233 GOVERNOR LN BLVD** ADDRESS 2 (PHYSICAL)

CITY **WILLAMSPORT** STATE **MD** ZIP CODE **21795** CITY STATE ZIP CODE

CITY OF RESIDENCE/PRINCIPAL BUS OR INCORP LOCATION **HAMILTON 033** PURCHASE DATE **12/14/2012** *LEASED *SERVICE OPTIONS TELEPHONE # **301 582 1793** *PLACARD/HEARING IMPAIRED CLS/YR *INSURANCE POLICY #

VEHICLE INFORMATION

VIN **1PT01JAH8X9018615** MAKE **TRIM** MODEL **1PT** YEAR **1999** BODY **SE** TITLE BRAND - translation CODE TYPE OF FUEL - translation CODE

SURRENDERED TITLE # **11639952** STATE **ME** PREVIOUS STATES TITLED 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) CODE **9**

COLOR CODE (enter appropriate code)* UPPER LOWER **O** MOBILE HOME LGTH WIDTH # AXLES GROSS VEHICLE WEIGHT *VEHICLE TRADE-IN DESCRIPTION COMPANY VEHICLE # **057392**

PLATE INFORMATION *(required for Title and Registration and Registration Only Transactions). SEE REVERSE SIDE FOR COMPLETE INSTRUCTIONS

PLATE #(1) **U407115** 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)

LIEN INFORMATION (if lien present)

LIEN CODE FIRST LIENHOLDER **SUNTRUST BANK** LIEN DATE **12/14/2012**

STREET **120 E BALTIMORE ST 25 FL** CITY **BALTIMORE** STATE **MD** ZIP CODE **21202**

LIEN CODE SECOND LIENHOLDER CITY STATE ZIP CODE

*LESSEE / REGISTRANT INFORMATION (OWNER OF PLATE)

NAME LEGAL STATUS NAME CODE MAO ILU

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)

LOST STOLEN MUTILATED RTN'D DUE TO NON DELIVERY ALTERED ILLEGIBLE

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 if 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 **01/04/2013**

VOICE NUMBER **13004 @** COUNTY NAME **HAMILTON** CO NUMBER **33** DATE OF APPLICATION **01/04/2013** BY AUTHORITY OF REGISTRAR OF MOTOR VEHICLES(COUNTY CLERK) **W.F. (BILL) KNOWLES** KAR46

REGISTRATION FEE **79.75** CREDIT LEASE FEE TRANS FEE CLERK FEE (total fees collected indicated certifies this form as a valid registration) ISSUANCE FEE **12.00** TITLE FEE **5.50** TOTAL TAX COLLECTED **.00**

SALES TAX USE TAX SALES TAX LOCAL TAX ADDITIONAL TAX COLLECTED IN STATE OF COUNTY WHEEL TAX CITY STICKER FEE

ORGAN DONOR POSTAGE VER ID / RESIDENCY VERIFICATION *TOTAL FEES COLLECTED **97.25**