



# OFFICIAL VEHICLE REGISTRATION

085374

**City Stickers:**

VEHICLE OR CURRENT TITLE NUMBER <b>1465379</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>
OWNER NAME <b>BOWMAN TRAILER LEASING LLC</b>	FIRST NAME <b>BOWMAN</b>	MIDDLE INITIAL	LAST NAME <b>TRAILER LEASING LLC</b>
ADDRESS 1 (MAILING) <b>0233 GOVERNOR LN BLVD</b>	ADDRESS 2 (PHYSICAL)		
CITY <b>VILLIAMSPORT</b>	STATE <b>MD</b>	ZIP CODE <b>21795</b>	CITY <b>VILLIAMSPORT</b>
RESIDENCE/PRINCIPAL BUS OR INCORP LOCATION <b>HAMILTON 033</b>	PURCHASE DATE <b>02/05/2013</b>	*LEASED <input checked="" type="checkbox"/> *SERVICE OPTIONS <input type="checkbox"/> <small>SEE REVERSE SIDE FOR INSTRUCTIONS</small>	TELEPHONE # <b>301-582-1793</b>
		*PLACARD/HEARING IMPAIRED CLS/YR	*INSURANCE POLICY #

VEHICLE IDENTIFICATION NUMBER <b>JJV532W78L205374</b>	MAKE <b>WABA</b>	MODEL <b>DVH</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>
REGISTERED TITLE # <b>16187933</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 (0) 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) LOWER	MOBILE HOME LGTH	WIDTH	# AXLES	GROSS VEHICLE WEIGHT	*VEHICLE TRADE-IN DESCRIPTION	COMPANY VEHICLE # <b>085374</b>		

*TITLE INFORMATION *(required for Title and Registration and Registration Only Transactions) SEE REVERSE SIDE FOR COMPLETE INSTRUCTIONS							
PLATE # (1) <b>1432798</b>	CLASSCODE/ISSUEYR(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>02/05/2013</b>	
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	
ADDRESS	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		NAME			
ADDRESS		CITY	STATE	ZIP CODE	

*VEHICLE COST / TAX INFORMATION *(required for Title & Registration Transactions)				
NET 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				

I, the undersigned, 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 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>03/04/2013</b>
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COUNTY NUMBER <b>3063 @</b>	COUNTY NAME <b>HAMILTON</b>	CO NUMBER <b>33</b>	DATE OF APPLICATION <b>03/04/2013</b>	BY AUTHORITY OF REGISTRAR OF MOTOR VEHICLES (COUNTY CLERK) <b>W.F. (BILL) KNOWLES</b>	<b>KAR46</b>
*VEHICLE USE ONLY EMISSION: Trailer (total fees collected indicated certifies this form as a valid registration)					
REGISTRATION FEE <b>9.75</b>	CREDIT	LEASE FEE	TRANS FEE	CLERK FEE	ISSUANCE FEE <b>12.00</b>
SALES TAX <input type="checkbox"/> USE TAX		SA TAX	LOCAL TAX	ADDITIONAL TAX	TITLE FEE <b>5.50</b>
SALES TAX OPT FEE		ORGAN DONOR	POSTAGE	VER	TOTAL TAX COLLECTED <b>.00</b>
ID / RESIDENCY VERIFICATION					CITY STICKER FEE
*TOTAL FEES COLLECTED <b>97.25</b>					