



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



City Stickers:

NEW OR CURRENT TITLE NUMBER 92786885		TRANSACTION CODE N01		REGISTRATION ONLY NUMBER	
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"/> ILU <input checked="" type="checkbox"/> N					
LAST NAME BOWMAN TRAILER LEASING LLC		FIRST NAME 		MIDDLE INITIAL 	
ADDRESS 1 (MAILING) PO BOX 433 % 10233 GOVERNOR LN BLVD		ADDRESS 2 (PHYSICAL) 			
CITY WILLIAMSPORT		STATE MD		ZIP CODE 21795	
CITY OF RESIDENCE/PRINCIPAL BUS OR INDOOR LOCATION HAMILTON 033		PURCHASE DATE 10/24/2013		*LEASED <input checked="" type="checkbox"/> 0 *SERVICE OPTIONS <input type="checkbox"/> SEE REVERSE SIDE FOR INSTRUCTIONS	
TELEPHONE # 301 582 1793		*PLACARD/HEARING IMPAIRED CLS/YR 		*INSURANCE POLICY # 	
VEHICLE INFORMATION					
VIN 1GRAA06271B038945		MAKE GDAN		MODEL 1GR	
YEAR 2001		BODY SE		TITLE BRAND - translation USED	
CODE U		TYPE OF FUEL - translation 		CODE 9	
SURRENDERED TITLE # 09608454		STATE ME		PREVIOUS STATES TITLED 	
VEHICLE USE F		VEHICLE TYPE S		CURRENT MILEAGE 	
ODOMETER ACTUAL (5) NOT ACTUAL (8) INDICATOR OVER 10 YRS / 15,000 LBS (1) (List one) IN EXCESS OF MECHANICAL LIMITS (9) 		CODE 1			
COLOR CODE (enter appropriate code)* UPPER B		MOBILE HOME LGTH WIDTH 		# AXLES 	
GROSS VEHICLE WEIGHT 		*VEHICLE TRADE-IN DESCRIPTION 		COMPANY VEHICLE # 2144	
PLATE INFORMATION *(required for Title and Registration and Registration Only Transactions) SEE REVERSE SIDE FOR COMPLETE INSTRUCTIONS					
PLATE # (1) U477169		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 INFORMATION (if lien present)					
LIEN CODE 		FIRST LIENHOLDER SUNTRUST BANK			LIEN DATE 10/24/2013
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 					
*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 	
SALE TAX PAID 		TAX EXEMPTION REASON / SALES TAX # 			
DEALER NAME 		DEALER ADDRESS 		DEALER # 	
*Required for Duplicate Title - T.C.A. 55-3-115 (submit flexible 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	
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 11/11/2013
INVOICE NUMBER 13315 @		COUNTY NAME HAMILTON		CO NUMBER 33	
DATE OF APPLICATION 11/11/2013		BY AUTHORITY OF REGISTRAR OF MOTOR VEHICLES (COUNTY CLERK) W.F. (BILL) KNOWLES		HCM27	
OFFICE USE ONLY					
REGISTRATION FEE 79.75		CREDIT 		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	