



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

OFFICIAL VEHICLE REGISTRATION

ity Stickers:

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|--|--------------------------------|---|
| VEHICLE OR CURRENT TITLE NUMBER 10487740 | TRANSACTION CODE 001 | REGISTRATION ONLY NUMBER 588653 |
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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) 4 MAO <input checked="" type="checkbox"/> ILU <input checked="" type="checkbox"/> | | | | | |
| OWNER NAME BOWMAN TRAILER LEASING LLC | OWNER FIRST NAME BOWMAN | OWNER MIDDLE INITIAL TRAILER | OWNER LAST NAME LEASING | OWNER FIRST NAME LLC | OWNER MIDDLE INITIAL |
| ADDRESS 1 (MAILING) 0233 GOVERNOR LN BLVD | | ADDRESS 2 (PHYSICAL) | | | |
| CITY VILLIAMSPORT | STATE MD | ZIP CODE 21795 | CITY | STATE | ZIP CODE |
| ADDRESS OF RESIDENCE/PRINCIPAL BUS OR INCORP LOCATION 1 HAMILTON 033 | PURCHASE DATE 06/29/2012 | *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 # |

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|---|---------------------------|-------------------------------------|-------------------------|-------------------------------|---------------------|---|---------------------|--|------------------|
| VEHICLE INFORMATION | | MAKE GRAA06252T008726 | MODEL GDAN | YEAR 741 | BODY 2002 | TITLE BRAND - translation SE | CODE USED | TYPE OF FUEL - translation U | CODE 9 |
| TRANSFERRED TITLE # 14155087 | STATE TN | PREVIOUS STATES TITLED TN | VEHICLE USE F | VEHICLE TYPE S | 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 1 | | |
| OR CODE (enter appropriate code)* ER LOWER 0 | MOBILE HOME LGTH WIDTH | # AXLES | GROSS VEHICLE WEIGHT | *VEHICLE TRADE-IN DESCRIPTION | | COMPANY VEHICLE # 588653 | | | |

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| *SEE REVERSE SIDE FOR COMPLETE INSTRUCTIONS | | | | | | | | |
| CLASS CODE/ISSUE YR(1)(3) J383436 | VALIDATION # (1) 8020/1994 | COUNTY STICKER # (1) | CITY STICKER # (1)(2) | *PLATE # (TRADE IN) (2) | CLASS CODE/ISSUE YR(2) | EXPIRATION DATE (1)(2)(3) PERMANENT | | |
| STICKER # (4) | TEMP OPERATOR PERMIT # (3) | # OF SEATS (5) | ZONE (COUNTY NAME) (6) | USDOT / REGISTRANT # (7) | MOTOR CARRIER # (8) | | | |

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|---|--|--------------------|--------------------------|--------------------------------|
| VEHICLE INFORMATION (If lien present) | | | | LIEN DATE 06/29/2012 |
| VEHICLE CODE 1 | FIRST LIENHOLDER SUNTRUST BANK | | | |
| VEHICLE STREET 120 E BALTIMORE ST 25 FL | CITY BALTIMORE | STATE MD | ZIP CODE 21202 | |
| VEHICLE CODE 1 | SECOND LIENHOLDER | | | LIEN DATE |
| VEHICLE STREET | CITY | STATE | ZIP CODE | |

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|--|--|---------------------------------------|------------------------------------|------------------------------|------------------------------|
| SSEE / 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) | | | | |
| VEHICLE PRICE | TRADE IN ALLOWANCE | TAXABLE AMOUNT | SALES TAX 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 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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| I, the undersigned, do hereby 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 assignees 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 09/21/2012 |
|--|--|---------------------------|--|--|---------------------------|

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| COUNTY NUMBER 2265 @ | COUNTY NAME HAMILTON | CO NUMBER 33 | DATE OF APPLICATION 09/21/2012 | BY AUTHORITY OF REGISTRAR OF MOTOR VEHICLES (COUNTY CLERK) W.F. (BILL) KNOWLES | HJC27 | | |
| *ICE USE ONLY EMISSION: Trailer (total fees collected indicated certifies this form as a valid registration) | | | | | | | |
| REGISTRATION FEE 9.75 | CREDIT | LEASE FEE | TRANS FEE | CLERK FEE | ISSUANCE FEE 12.00 | TITLE FEE 5.50 | TOTAL TAX COLLECTED .00 |
| IMPUTATION 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 | | |