

## OFFICIAL VEHICLE REGISTRATION

City Stickers:							1			VANIV.===			6869	78	
90486871	MBER				TR	CODE OO1		HEGISTR	ATION ONL	YNUMBER	W1. 1911				
WNER INFORMATION *LEGA	AL STATUS; 1 (AND) 2								NAMES) 4(	COMPANY) 5(O	VER 28 CHARACT			N	
BOWMAN TRA	ILER LEASI	FIRST NAME		MID	DLE INITIAI	L	LAST NAM	E			FIRST NAME		MIDDLE INITIA	AL.	
DDRESS 1 (MAILING)		, n					ADDRESS	2 (PHYSIC	AL)						
10233 GOVERN	JOR LN BL		TATE		ZIP CODE		CITY				ST	TATE	ZIP CODE		
WILLIAMSPORT		MD			1795		FRUONE		I *DI ACARD	HEARING IMPAIR	DED CLSW	R   *INSURANCE POLIC	V #		
HAMILTON 03	_	06/29/		*LEASED SEE REVE		RVICE OPTION		301 5	82 179		MEANING IMPAIR	TED GES/11	in sommer one	Sales	
EHICLE INFORMATION		MAKE	MOI	DEL	YEAR	BODY	TITLE BF	IAND - tran	slation		CODE	TYPE OF	FUEL - translation	CODE	
1GRAP06259T552216		GDAN 1		GR	2009	SE	USED				U				
SURRENDERED TITLE #		STATE PREVIOUS ST		STATES TI	TLED	VEHICLE U	JSE VEHI	CLE TYPE	PE CURRENT MILEAGE		ODOMETER ACTUAL (0) NOT A INDICATOR OVER 10 YRS / 16,00 (List one) IN EXCESS OF MECH		O) NOT ACTUAL (8) PRS / 16,000 LBS (1) OF MECHANICAL LIMITS (9)	CODE	
76960024  OLOR CODE (enter appropriate PPER LOWER	TN OME WDTH	ME # AXLES			OSS VEHICLE	WEIGHT	S	*VEHIC	LE TRADE-IN DI	***************************************			30978		
LATE INFORMATION *(required)	red for Title and Regist	ration and Regi	stration Only	Transactio	ns) SEE RE	EVERSE SIDE	FOR COMP	LETE INST	RUCTIONS *PLATE #(T)	RADE IN)(2)	CLASS CODE/	ISSUE YR(			
U383224	8020/199							, , , ,	A. ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) (				PERM	ANEN	
DR STICKER #(4)	RMIT #(3) # OF SEATS(5)		ATS(5)	ZONE(CO	DUNTY NAME	)(6)	(6) USDOT / REGISTRANT #(7		ISTRANT #(7)			MOTOR CARRIER #(8)			
	ALTIMORE S	T 25 FL					CITY	ALTIM	IORE		STA	MD	ZIP CODE 21202  LIEN D  ZIP CODE	ATE	
LESSEE / REGISTRANT INFO	ORMATION(OWNER O	OF PLATE)		LEGAL ST	ATUS [	NAME	CODE	A	лао 🗌	ILU 🗌					
ADDRESS						C	LITY				ST	ATE	ZIP COD	ZIP CODE	
/EHICLE COST / TAX INFOR			ation Transac	ctions)	1	ABLE AMOUN			Tau sore	V DAID		Tetave	XEMPTION REASON / SALE	C TAV #	
SALE PRICE TRADE IN ALLOWANCE DEALER NAME			DEALER ADDRESS				INT SALESTAX PAID				DEALER#				
Required for Duplicate Title -	T.C.A. 55-3-115 (subm	it Illegible or alt	ered Certific	ate of Title)											
LOST	STOLEN		М	JTILATED		R	TN'D DUE TO	NON DEL	JEVERY	AL AL	TERED		ILLEGIBLE		
Inder penalties of perjury, I he r its assignees to determine the SIGNATURE OF CERTIFIER/		ion provided is mation provided	true and corr d by me or or	ect to the b my behalf POV	est of my kr	nowledge, and	acknowledge THORIZED S	e that it is n	of the respon	nsibility of the Mo	otor Vehicle Divisio	n Di	09/19/201	2	
NVOICE NUMBER	COUNTY NAME			COI	NUMBER	020	APPLICATION	977.00 mm					CLES(COUNTY CLERK)		
12263 @ DEFFICE USE ONLY	HAMILT EMISSION:	Trailer			33		9/19/20		(total	fees collected I		this form a	as a valid registration)	HJC2	
REGISTRATION FEE 79.75	CREDIT	L	EASE FEE		TF	RANS FEE	CLER	K FEE		.00	5.50		.00		
COMPUTATION OF SALES TAX USE TA *SERVICE OPT FEE	SALES OR USE T.		OSTAGE	LOCAL	TAX VER	ADDITIONAL '			VERIFICAT		OUNTY WHEEL TA		TOTAL FEES COLLECTED		
	(48/DR27/8020		h: 0.00		neck:		Check#			0.00	Auth#:		97.25 nge: 0.00 RD/		