



OFFICIAL VEHICLE REGISTRATION

80913

City Stickers:

NEW OR CURRENT TITLE NUMBER 92575691		TRANSACTION CODE N01	REGISTRATION ONLY NUMBER	
OWNER INFORMATION (LEGAL STATUS: 1 (AND) 2 (OR) 3 ENTER NAME CODE IN BOX 1 (SAME) 2 (DIFFERENT) 3 (MULTIPLE LAST NAMES) 4 (COMPANY) 5 (OVER 28 CHARACTERS) 4 MAO N ILJ				
LAST NAME BOWMAN TRAILER LEASING LLC		FIRST NAME	MIDDLE INITIAL	LAST NAME BOWMAN TRAILER LEASING LLC
ADDRESS 1 (MAILING) 10233 GOVERNOR LN BLVD		ADDRESS 2 (PHYSICAL)		
CITY WILLIAMSPORT	STATE MD	ZIP CODE 21795	CITY	STATE MD
CITY OF RESIDENCE/PRINCIPAL BUS OR INCORP LOCATION HAMILTON 033	PURCHASE DATE 06/24/2013	TELEPHONE # 301 582 1793	*PLACARD/HEARING IMPAIRED CLS/YR 0	
*LEASED ☒ *SERVICE OPTIONS ☐ SEE REVERSE SIDE FOR INSTRUCTIONS		*INSURANCE POLICY #		
VEHICLE INFORMATION				
VIN 1JJV532W95L936528	MAKE WABA	MODEL 1JJ	YEAR 2005	BODY SE
TITLE BRAND - translation USED		CODE U	TYPE OF FUEL - translation 9	
SURRENDERED TITLE # 09176014	STATE ME	PREVIOUS STATES TITLED	VEHICLE USE F	VEHICLE TYPE S
COLOR CODE (enter appropriate code)* UPPER O	MOBILE HOME LGTH 0	AXLES	GROSS VEHICLE WEIGHT	*VEHICLE TRADE-IN DESCRIPTION
COMPANY VEHICLE # 80913				
PLATE INFORMATION (required for Title and Registration and Registration Only) (SEE REVERSE SIDE FOR COMPLETE INSTRUCTIONS)				
PLATE # (1) U456571	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 06/24/2013
STREET 120 E BALTIMORE ST 25 FL	CITY BALTIMORE			STATE MD
LIEN CODE	SECOND LIENHOLDER			LIEN DATE
STREET	CITY			STATE
*LESSEE / REGISTRANT INFORMATION (OWNER OF PLATE)				
NAME		NAME		
ADDRESS		CITY		
STATE		ZIP CODE		
VEHICLE COST / TAX INFORMATION (required for Title & Registration Transaction)				
SALE PRICE	TRADE IN ALLOWANCE	TAXABLE AMOUNT	SALESTAX PAID	*TAX EXEMPTION REASON / SALES TAX #
DEALER NAME		DEALER ADDRESS		
DEALER #				
*Required for Duplicate Title - 1 (CA 55-3-145) (submit fileable or altered Certificate of Title)				
☐ LOST	☐ STOLEN	☐ MUTILATED	☐ RTND 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 or its assignees to determine the accuracy of the information provided by me or on my behalf.				
SIGNATURE OF CERTIFIER/OWNER				DATE 07/26/2013
POWER OF ATTORNEY/AUTHORIZED SIGNATURE (IF APPLICABLE)				
INVOICE NUMBER 13207 @				
COUNTY NAME HAMILTON				
CO NUMBER 33				
DATE OF APPLICATION 07/26/2013				
BY AUTHORITY OF REGISTRAR OF MOTOR VEHICLES (COUNTY CLERK) W.F. (BILL) KNOWLES				
HJC27				
OFFICE USE ONLY				
EMISSION: Trailer				
REGISTRATION FEE 79.75	CREDIT	LEASE FEE	TRANS FEE	CLERK FEE
COMPUTATION OF ☐ SALES TAX ☐ USE TAX		SALES OR USE TAX	SA TAX	LOCAL TAX
*SERVICE OPT FEE		ORGAN DONOR	POSTAGE	VER
ID / RESIDENCY VERIFICATION		*TOTAL FEES COLLECTED 97.25		
Port: WK48/DR27/8020 Cash: 0.00 Check: 0.00 Check#: Credit: 0.00 Auth#: Change: 0.00 RDA-692				