



OFFICIAL VEHICLE REGISTRATION

Stickers:

WORK OR CURRENT TITLE NUMBER 30480873	TRANSACTION CODE 001	REGISTRATION ONLY NUMBER 813065
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OWNER INFORMATION *LEGAL STATUS: 1 (AND) 2 (OR) ☐ ENTER NAME CODE IN BOX 1 (SAME) 2 (DIFFERENT) 3 (MULTIPLE LAST NAMES) 4 (COMPANY) 5 (OVER 28 CHARACTERS) 4		MAO ☒ ILU ☒
ST NAME BOWMAN TRAILER LEASING LLC	FIRST NAME BOWMAN	MIDDLE INITIAL TRAILER
ADDRESS 1 (MAILING) 10233 GOVERNOR LN BLVD		ADDRESS 2 (PHYSICAL)
CITY WILLIAMSPORT	STATE MD	ZIP CODE 21795
OFFICE OF RESIDENCE/PRINCIPAL BUS OR INCORP LOCATION HAMILTON 033	PURCHASE DATE 06/29/2012	TELEPHONE # 301 582 1793
*LEASED ☒ *SERVICE OPTIONS ☐		*PLACARD/HEARING IMPAIRED CLS/YR 0
SEE REVERSE SIDE FOR INSTRUCTIONS		*INSURANCE POLICY #

VEHICLE INFORMATION		MAKE WABA	MODEL DVC	YEAR 2000	BODY SE	TITLE BRAND - translation	CODE U	TYPE OF FUEL - translation	CODE 9
REGISTERED TITLE # 70931894		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 0	WIDTH 0	# AXLES 0	GROSS VEHICLE WEIGHT	*VEHICLE TRADE-IN DESCRIPTION			COMPANY VEHICLE # 813065	

*SEE REVERSE SIDE FOR COMPLETE INSTRUCTIONS							
STATE # (1) J381137	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
R STICKER # (4)	TEMP OPERATOR PERMIT # (3)	# OF SEATS (5)	ZONE (COUNTY NAME) (6)	USDOT / REGISTRANT # (7)	MOTOR CARRIER # (8)		

N INFORMATION (if lien present)		N CODE	FIRST LIENHOLDER SUNTRUST BANK	LIEN DATE 06/29/2012
REET	CITY BALTIMORE	STATE MD	ZIP CODE 21202	
120 E BALTIMORE ST 25 FL				
N CODE	SECOND LIENHOLDER	LIEN DATE		
REET	CITY	STATE	ZIP CODE	

SSSEE / REGISTRANT INFORMATION (OWNER OF PLATE)	LEGAL STATUS ☐	NAME CODE ☐	MAO ☐	ILU ☐
ME	NAME			
ADDRESS	CITY	STATE	ZIP CODE	

HICLE COST / TAX INFORMATION *(required for Title & Registration Transactions)				
LE PRICE	TRADE IN ALLOWANCE	TAXABLE AMOUNT	SALESTAX PAID	*TAX EXEMPTION REASON / SALES TAX #
ALER NAME	DEALER ADDRESS			DEALER #

required for Duplicate Title - T.C.A. 55-3-115 (submit illegible or altered Certificate of Title)				
☐ LOST	☐ STOLEN	☐ MUTILATED	☐ RTND DUE TO NON DELIVERY	☐ ALTERED
☐ ILLEGIBLE				

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 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 08/30/2012

COICE NUMBER 12243 @	COUNTY NAME HAMILTON	CO NUMBER 33	DATE OF APPLICATION 08/30/2012	BY AUTHORITY OF REGISTRAR OF MOTOR VEHICLES (COUNTY CLERK) W.F. (BILL) KNOWLES				HJC27
*TOTAL FEES COLLECTED INDICATED CERTIFIES THIS FORM AS A VALID REGISTRATION								
REGISTRATION FEE 79.75	CREDIT	LEASE FEE	TRANS FEE	CLERK FEE	ISSUANCE FEE 12.00	TITLE FEE 5.50	TOTAL TAX COLLECTED .00	
IMPUTATION OF	SALES OR USE TAX	SA TAX	LOCAL TAX	ADDITIONAL TAX	COLLECTED IN STATE OF	COUNTY WHEEL TAX	CITY STICKER FEE	
☐ SALES TAX ☐ USE TAX	ORGAN DONOR		POSTAGE	VER	ID / RESIDENCY VERIFICATION	*TOTAL FEES COLLECTED 97.25		