



# OFFICIAL VEHICLE REGISTRATION

## City Stickers:

828193

NEW OR CURRENT TITLE NUMBER <b>84195236</b>		TRANSACTION CODE <b>N01</b>	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 28 CHARACTERS) <b>5</b> MAO <input checked="" type="checkbox"/> ILU <input checked="" type="checkbox"/>				
LAST NAME <b>BOWMAN SALES AND EQUIPMENT INC</b>		FIRST NAME <b>PO BOX 433 % 10233 GOVERNOR LN BLVD</b>		MIDDLE INITIAL
ADDRESS 1 (MAILING)		ADDRESS 2 (PHYSICAL)		
CITY <b>WILLIAMSPORT</b>		STATE <b>MD</b>	ZIP CODE <b>21795</b>	
CITY OF RESIDENCE/PRINCIPAL BUS OR INCORP LOCATION <b>HAMILTON 033</b>		PURCHASE DATE <b>06/30/2011</b>	*LEASED <input checked="" type="checkbox"/> *SERVICE OPTIONS <input type="checkbox"/> SEE REVERSE SIDE FOR INSTRUCTIONS	TELEPHONE # <b>301-582-1793</b>
		*PLACARD/HEARING IMPAIRED CLS/YR		*INSURANCE POLICY #
VEHICLE INFORMATION				
VIN <b>1UYVS25342G894515</b>	MAKE <b>UTIL</b>	MODEL <b>1UY</b>	YEAR <b>2002</b>	BODY <b>SE</b>
TITLE BRAND - list the appropriate code (N) NEW (1) RECONSTRUCTED VEHICLE (U) USED (2) FLOOD DAMAGE (D) DEMO (3) SPECIALLY CONSTRUCTED (B) PARTS ONLY		CODE <b>U</b>	TYPE OF FUEL - list the appropriate code GAS (1) ELECTRIC/HYBRID (3) DIESEL (2) PROPANE (4)	
SURRENDERED TITLE # <b>9378822</b>		STATE <b>ME</b>	PREVIOUS STATES TITLED	VEHICLE USE <b>F</b>
			VEHICLE TYPE <b>S</b>	CURRENT MILEAGE
COLOR CODE (enter appropriate code)* UPPER <b>O</b> LOWER		MOBILE HOME LGTH	WIDTH	# AXLES
		GROSS VEHICLE WEIGHT		*VEHICLE TRADE-IN DESCRIPTION
				COMPANY VEHICLE # <b>828193</b>
PLATE INFORMATION *(required for Title and Registration and Registration Only Transactions) SEE REVERSE SIDE FOR COMPLETE INSTRUCTIONS				
PLATE # (1) <b>U334403</b>	CLASS CODE/ISSUE YR (1)(3) <b>8020/1994</b>	VALIDATION # (1)	COUNTY STICKER # (1)	CITY STICKER # (1)(2)
*PLATE # (TRADE IN) (2)		CLASS CODE/ISSUE YR (2)		EXPIRATION DATE (1)(2)(3) <b>PERMANENT</b>
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 <b>SUNTRUST BANK</b>			LIEN DATE <b>06/30/2011</b>
STREET <b>120 E BALTIMORE 25TH FL</b>		CITY <b>BALTIMORE</b>		STATE <b>MD</b>
		ZIP CODE <b>21202</b>		
LIEN CODE	SECOND LIENHOLDER			LIEN DATE
STREET		CITY		STATE
		ZIP CODE		
*LESSEE / REGISTRANT INFORMATION (OWNER OF PLATE)				
NAME		LEGAL STATUS <input type="checkbox"/>	NAME CODE <input type="checkbox"/>	MAO <input type="checkbox"/> ILU <input type="checkbox"/>
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 illegible 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 that 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 <b>12/15/2011</b>
INVOICE NUMBER <b>11349 @</b>				
COUNTY NAME <b>HAMILTON</b>		CO NUMBER <b>33</b>	DATE OF APPLICATION <b>12/15/2011</b>	BY AUTHORITY OF REGISTRAR OF MOTOR VEHICLES (COUNTY CLERK) <b>W.F. (BILL) KNOWLES</b>
OFFICE USE ONLY REGISTRATION FEE <b>79.75</b>				
EMISSION: Trailer		(total fees collected indicated certifies this form as a valid registration)		
CREDIT	LEASE FEE	TRANS FEE	CLERK FEE	ISSUANCE FEE <b>12.00</b>
SALES OR USE TAX		SA TAX	LOCAL TAX	TITLE FEE <b>5.50</b>
COMPUTATION OF <input type="checkbox"/> SALES TAX <input type="checkbox"/> USE TAX		ADDITIONAL TAX	COLLECTED IN STATE OF	COUNTY WHEEL TAX <b>.00</b>
*SERVICE OPT FEE		ORGAN DONOR	POSTAGE	CITY STICKER FEE
		VER	ID / RESIDENCY VERIFICATION	
				*TOTAL FEES COLLECTED <b>97.25</b>
iF-1357 Port: WK46/DR3/8020 Cash: 0.00 Check: 0.00 Check#: Credit: 0.00 Auth#: Change: 0.00 RDA-692				