



OFFICIAL VEHICLE REGISTRATION

City Stickers:

852777

NEW OR CURRENT TITLE NUMBER 84195453		TRANSACTION CODE N01		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) 5 MAO <input checked="" type="checkbox"/> ILU <input checked="" type="checkbox"/>					
LAST NAME BOWMAN SALES AND EQUIPMENT INC		FIRST NAME		MIDDLE INITIAL	
ADDRESS 1 (MAILING) PO BOX 433 % 10233 GOVERNOR LN BLVD		ADDRESS 2 (PHYSICAL)			
CITY WILLIAMSPORT		STATE MD		ZIP CODE 21795	
CITY OF RESIDENCE/PRINCIPAL BUS OR INCORP LOCATION HAMILTON 033		PURCHASE DATE 06/30/2011		*LEASED <input type="checkbox"/> *SERVICE OPTIONS <input type="checkbox"/> SEE REVERSE SIDE FOR INSTRUCTIONS	
TELEPHONE # 301-582-1793		*PLACARD/HEARING IMPAIRED CLS/YR			
*INSURANCE POLICY #					
VEHICLE INFORMATION					
VIN 1JJV532W3YL711820		MAKE WABA		MODEL 1JJ	
YEAR 2000		BODY SE		TITLE BRAND - list the appropriate code (N) NEW (1) RECONSTRUCTED VEHICLE (U) USED (2) FLOOD DAMAGE (D) DEMO (3) SPECIALLY CONSTRUCTED (8) PARTS ONLY	
CODE U		TYPE OF FUEL - list the appropriate code GAS (1) DIESEL (2) ELECTRIC/HYBRID (3) PROPANE (4)		CODE 9	
SURRENDERED TITLE # 0605304120328		STATE WI		PREVIOUS STATES TITLED	
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			
COLOR CODE (enter appropriate code)* UPPER LOWER O		MOBILE HOME LGTH WIDTH		# AXLES	
GROSS VEHICLE WEIGHT		*VEHICLE TRADE-IN DESCRIPTION		COMPANY VEHICLE # 852777	
PLATE INFORMATION *(required for Title and Registration and Registration Only Transactions) SEE REVERSE SIDE FOR COMPLETE INSTRUCTIONS					
PLATE # (1) U334453		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 06/30/2011
STREET 120 E BALTIMORE 25TH FL		CITY BALTIMORE		STATE MD	
ZIP CODE 21202					
LIEN CODE		SECOND LIENHOLDER			LIEN DATE
STREET		CITY		STATE	
ZIP CODE					
*LESSEE / 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					
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'D DUE TO NON DELIVERY		<input type="checkbox"/> ALTERED		<input type="checkbox"/> 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		POWER OF ATTORNEY/AUTHORIZED SIGNATURE (IF APPLICABLE)			DATE 12/15/2011
INVOICE NUMBER 11349 @		COUNTY NAME HAMILTON		CO NUMBER 33	
DATE OF APPLICATION 12/15/2011		BY AUTHORITY OF REGISTRAR OF MOTOR VEHICLES (COUNTY CLERK) W.F. (BILL) KNOWLES			
OFFICE USE ONLY REGISTRATION FEE 79.75		EMISSION: Trailer		VBS03	
CREDIT		LEASE FEE		TRANS FEE	
CLERK FEE 12.00		TITLE FEE 5.50		TOTAL TAX COLLECTED .00	
COMPUTATION 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		*TOTAL FEES COLLECTED 97.25	
*SERVICE OPT FEE		ORGAN DONOR		POSTAGE	
VER		ID / RESIDENCY VERIFICATION			
SF-1357 Port: WK46/DR3/8020 Cash: 0.00 Check: 0.00 Check#: Credit: 0.00 Auth#: Change: 0.00 RDA-692					