TENNESSEE DEPARTMENT OF REVENUE VEHICLE TAXPAYER SERVICES DIVISION MULTI-PURPOSE APPLICATION

OFFICIAL VEHICLE REGISTRATION

| City Stickers: | | | | | | | | | | 868532 | <u> </u> | |
|--|--|---|---|--|---|---|--|---|--|--|----------|--|
| NEW OR CURRENT TITLE NU | IMBER | | | TE S | ANSACTION ODE | REGIS | TRATION ONLY NUMBE | R | - | | | |
| 84195619 | | 87 -17 -020 | | | O01 | | *** | | हि | MAO N ILU | N | |
| OWNER INFORMATION LEG | AL STATUS: 1 (AND) 2 | (QR) ENTER | NAME CODE IN | BOX 1 (SAM | E) 2(DIFFERE | NT) S(MÜLTIPLE LAS LAST NAME | T NAMES) 4(COMPAN | 7) 5(OVER 28 CHARACTI FIRST NAME | RS) | MAO L' LU L | | |
| BOWMAN SAL | ES AND EQ | UIPMENT | INC | | | | | | | | | |
| ADDRESS 1 (MAILING) | | | | | | ADDRESS 2 (PHYS | ICAL) | " | | | | |
| PO BOX 433 | % 10233 | GOVERN | | | | | | et . | ATE | ZIP CODE | | |
| CITY STATE WILLIAMSPORT MD | | | _ | ZIP CODE 21795 | | CITY | | 511 | 41C | ZIF CODE | | |
| ONTY OF RESIDENCE/PRONCIPAL BUS OF | | URCHASE DATE | <u> </u> | | | TELEPHO | √E# PLA | CARD/HEARING IMPAIR | ED CLS/YR | INSURANCE POLICY | | |
| HAMILTON 03 | 3 | 06/30/20 | 11 LEASE SEE RE | D U SER | VICE OPTIONS | 301- | 582-1793 | | | | | |
| VEHICLE INFORMATION | | I MAKE | MODEL | YEAR | BODY | | the exercists and | | TYPE OF FILE | L - list the appropriate | CODE | |
| VIN | COOFOC | | | | | (N)NEW (1)RE (U)USED (2)FL | the appropriate code CONSTRUCTED VEHIC OOD DAMAGE PECIALLY CONSTRUCT | ED U | code | CTRIC/HYBRID (3) | 9 | |
| 1JJV532W9YL | 629526 | WABA | 1JJ | 1000 TITLED | SE VEHICLE US | • | | AGE ODOMETER | ACTUAL (0) NO | OT ACTUAL (8) | CODE | |
| 72838230 | | TN TN | | === | F | S | | INDICATOR | OVER 10 YRS / 1 | 16,000 LBS (1) ECHANICAL LIMITS (9) | 1 | |
| COLOR CODE (enter appropriate UPPER LOWER | code)* MOBILE HO | 1 | # AXLES | GRO | OSS VEHICLE | | *VEHICLE TRADE | -IN DESCRIPTION | | COMPANY VEHICLE # | 1 | |
| O LOWER | LGIH | WUIH | | | | | | | | 868 | 8532 | |
| PLATE INFORMATION (1000) | red for Title and Registr | ation and Registra | ion Only Transac | tions) SEE RE | VERSE SIPE I | OR COMPLETE IN | TRUCTIONS | ¥6.4 | | | | |
| PLATE #(1) CL | ASSCODE/ISSUEYR(1) 8020/199 | (3) VALIDATIO | ON #(1) CO | DUNTY STICK | ER #(1) CП | Y STICKER #(1)(2) | *PLATE #(TRADE IN)(| 2) CLASS CODE/IS | SSUE YR(2) | PERMA | | |
| | TEMP OPERATOR PE | <u> </u> | F OF SEATS(5) | ZONE(CO | UNTY NAME)(| 6) | USDOT / REGISTRANT | #(7) | мото | OR CARRIER #(8) | MATIA | |
| | | | | | | | | | | | | |
| LIEN INFORMATION (If lien pr | resent) | | | | | N/1 1 1 2 2 2 | | | | | | |
| LIEN CODE FIRST LIEN | | | | | | | | | | LIEN DAT | | |
| | JNTRUST BA | ANK | | | | | | | | 06/30 | /2011 | |
| STREET 120 E BALTIMORE 25TH FL | | | | | | BALTIMORE STATE | | | MD | ZIP CODE 21202 | | |
| LIEN CODE SECOND L | IENHOLDER | | | | | | | | | LIEN DAT | E | |
| | | | | | | | | | | 770 0005 | | |
| STREET | | | | | | CITY | | STAT | E | ZIP CODE | | |
| *LESSEE / REGISTRANT INF | OBMATION/OWNER O | E PI ATE) | LEGAL S | STATUS S | NAME (| rone [| | 1 | in . A | | | |
| NAME | OTHER TOP OF THE PROPERTY OF T | (LAIL) | LLUNC | 31A103, E | I IVWE | | | | | | | |
| | | | | | | NAME | MAO LI BILU LE | | | | | |
| ADDRESS | - | | | | сп | NAME | MAO L. J · · · ; ILU · Li···· | STA | TE | ZIP CODE | | |
| ADDRESS | | 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, | | | | NAME | | | | | | |
| | MATION (required for TRADE IN AL | | Transactions) | | | NAME | | STA | | ZIP CODE | | |
| VEHICLE COST / TAX INFOR | | | | TAXA | BLE AMOUNT | NAME | | | TAX EXEMP | PTION REASON / SALES | | |
| VEHICLE COST / TAX INFOR | | | | | BLE AMOUNT | NAME | | | TAX EXEMP | | | |
| VEHICLE COST / TAX INFOR | TRADE IN AL | TOWANCE | DEALI | TAXA ER ADDRESS | BLE AMOUNT | NAME | SALESTAX PAID | | TAX EXEMP | PTION REASON / SALES | TAX # | |
| VEHICLE COST / TAX INFOR SALE PRICE DEALER NAME | TRADE IN AL | LOWANCE | DEALI | TAXA ER ADDRESS | BLE AMOUNT | NAME Y | SALESTAX PAID | | TAX EXEMP | PTION REASON / SALES DEALER # | TAX # | |
| VEHICLE COST / TAX INFOR SALE PRICE DEALER NAME Required for Duplicate Title LOST | T.C.A. 55-3-115 (SUDMI | LOWANCE | DEALI Certificate of Titl MUTILATE | TAXA ER ADDRESS (9) | BLE AMOUNT | NAME Y N'D DUE TO NON DI | SALESTAX PAID | ALTERED | TAX EXEMP | PTION REASON / SALES | TAX # | |
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| VEHICLE COST / TAX INFOR SALE PRICE DEALER NAME "Required for Duplicate Title - LOST Under penalties of perjury, I her or its assignees to determine the SIGNATURE OF CERTIFIERAL INVOKE NUMBER 11350 @ OFFICE USE ONLY | TRADE IN AL T.C.A. 55-3-115 (stabull STOLEN reby certify all informatic e accuracy of the inform OWNER COUNTY NAME HAMILTO EMISSION: | i filegible or altered on provided is true altion provided by ON Trailler | Certificate of Title MUTILATE: and correct to the me or on my beh | TAXA ER ADDRESS 9) Dest of my kn although | BLE AMOUNT RTTI OWIEdge, and a FORNEY/AUTH DATE OF AP 12/ | NAME TY ND DUE TO NON DI cknowledge that it is ORIZED SIGNATUF PLICATION 716/2011 | SALESTAX PAID ELIEVERY not the responsibility of the second of the sec | ALTERED the Motor Vehicle Division OF REGISTRAR OF MOT L) KNOWLES ted Indicated certifies the | DATE OR VEHICLES | PTION REASON / SALES DEALER # 12/16/2011 (COUNTY CLERK) Kalid registration) | TAX # | |
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