



OFFICIAL VEHICLE REGISTRATION

878983

City Stickers:

NEW OR CURRENT TITLE NUMBER	TRANSACTION CODE	REGISTRATION ONLY NUMBER
90482410	001	

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) <input type="checkbox"/> 4 MAO <input type="checkbox"/> N ILU <input type="checkbox"/> N											
ST NAME		FIRST NAME		MIDDLE INITIAL		LAST NAME		FIRST NAME		MIDDLE INITIAL	
BOWMAN TRAILER LEASING LLC											
ADDRESS 1 (MAILING)						ADDRESS 2 (PHYSICAL)					
10233 GOVERNOR LN BLVD											
CITY		STATE		ZIP CODE		CITY		STATE		ZIP CODE	
WILLIAMSPORT		MD		21795							
TYPE OF RESIDENCE/PRINCIPAL BUS OR INCORP LOCATION		PURCHASE DATE		*LEASED <input type="checkbox"/> 0 *SERVICE OPTIONS <input type="checkbox"/>		TELEPHONE #		*PLACARD/HEARING IMPAIRED CLS/YR		*INSURANCE POLICY #	
HAMILTON 033		06/29/2012				301 582 1793					

VEHICLE INFORMATION		MAKE		MODEL		YEAR		BODY		TITLE BRAND - translation		CODE		TYPE OF FUEL - translation		CODE	
1GRAA06296T532256		GDAN		741		2006		SE				U				9	
PREVIOUS TITLE #		STATE		PREVIOUS STATES TITLED		VEHICLE USE		VEHICLE TYPE		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	
73898904		TN TN				F		S								1	
FOR CODE (enter appropriate code) PER LOWER		MOBILE HOME LGTH		# OF AXLES		GROSS VEHICLE WEIGHT		*VEHICLE TRADE-IN DESCRIPTION				COMPANY VEHICLE #				878983	
O																	

STATE INFORMATION *(required for Title and Registration and Registration Only Transactions) SEE REVERSE SIDE FOR COMPLETE INSTRUCTIONS															
PLATE # (1)		CLASS CODE/ISSUE YR (1)(3)		VALIDATION # (1)		COUNTY STICKER # (1)		CITY STICKER # (1)(2)		*PLATE # (TRADE IN) (2)		CLASS CODE/ISSUE YR (2)		EXPIRATION DATE (1)(2)(3)	
U381879		8020/1994												PERMANENT	
*R 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		LIEN DATE	
				SUNTRUST BANK		06/29/2012	
REET		CITY		STATE		ZIP CODE	
120 E BALTIMORE ST 25 FL		BALTIMORE		MD		21202	
SECOND LIENHOLDER		CITY		STATE		ZIP CODE	

REGISTRANT / 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		NAME		NAME		NAME	
ADDRESS		CITY		STATE		ZIP CODE			

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

required for Duplicate Title - T.C.A. 55-3-115 (submit legible or altered Certificate of Title)											
<input type="checkbox"/> LOST		<input type="checkbox"/> STOLEN		<input type="checkbox"/> MUTILATED		<input type="checkbox"/> RTN'D DUE TO NON DELIVERY		<input type="checkbox"/> ALTERED		<input type="checkbox"/> ILLEGIBLE	

I, the undersigned, do hereby certify that the 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 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	
						09/05/2012	

VOICE NUMBER		COUNTY NAME		CO NUMBER		DATE OF APPLICATION		BY AUTHORITY OF REGISTRAR OF MOTOR VEHICLES (COUNTY CLERK)							
12249 @		HAMILTON		33		09/05/2012		W.F. (BILL) KNOWLES HJC27							
VEHICLE USE ONLY		EMISSION: Trailer		(total fees collected indicated certifies this form as a valid registration)											
REGISTRATION FEE		LEASE FEE		TRANS FEE		CLERK FEE		ISSUANCE FEE		TITLE FEE		TOTAL TAX COLLECTED			
79.75								12.00		5.50		.00			
COMPUTATION OF		SALES OR USE TAX		SA TAX		LOCAL TAX		ADDITIONAL TAX		COLLECTED IN STATE OF		COUNTY WHEEL TAX		CITY STICKER FEE	
<input type="checkbox"/> SALES TAX <input type="checkbox"/> USE TAX															
SERVICE OPT FEE		ORGAN DONOR		POSTAGE		VER		ID / RESIDENCY VERIFICATION		*TOTAL FEES COLLECTED					
										97.25					