



STATE

NEW OR CURRENT TITLE NUMBER	TRANSACTION CODE	REGISTRATION ONLY NUMBER
97006993	N01	

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) ☒						MAO ☒ ILU ☒					
LAST NAME		FIRST NAME		MIDDLE INITIAL		LAST NAME		FIRST NAME		MIDDLE INITIAL	
BSE TRAILER LEASING LLC											
ADDRESS 1 (MAILING)						ADDRESS 2 (PHYSICAL)					
10233 GOVERNOR LN BLVD											
CITY		STATE		ZIP CODE		CITY		STATE		ZIP CODE	
WILLIAMSPORT		MD		21795							
COUNTY OF RESIDENCE/PRINCIPAL BUS OR INCORP LOCATION		PURCHASE DATE		*LEASED ☒ *SERVICE OPTIONS ☐ SEE REVERSE SIDE FOR INSTRUCTIONS		TELEPHONE #		*PLACARD/HEARING IMPAIRED CLS/YR		*INSURANCE POLICY #	
HAMILTON 033		01/13/2016				240-772-5501					

VEHICLE INFORMATION										
VIN	MAKE	MODEL	YEAR	BODY	TITLE BRAND - translation	CODE	TYPE OF FUEL - translation		CODE	
3H3V532C4HT367064	HYTR	3H3	2017	SE	NEW	N			9	
SURRENDERED TITLE #	STATE	PREVIOUS STATES TITLED	VEHICLE USE	VEHICLE TYPE	CURRENT MILEAGE	ODOMETER ACTUAL (0) NOT ACTUAL (8) INDICATOR OVER 10 YRS / 10,000 LBS (1) (List one) IN EXCESS OF MECHANICAL LIMITS (9)			CODE	
MSO	CA		F	S					1	
COLOR CODE (enter appropriate code)* UPPER LOWER	MOBILE HOME LGTH WIDTH	# AXLES	GROSS VEHICLE WEIGHT	*VEHICLE TRADE-IN DESCRIPTION			COMPANY VEHICLE #			
O							HT367064			

PLATE INFORMATION <i>(Required for Title and Registration and Revalidation Only Transitional) SEE REVERSE SIDE FOR COMPLETE INSTRUCTIONS</i>							
PLATE # (1)	CLASSCODE/ISSUEYR (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)
U648164	8020/1994						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		LIEN DATE
	SUNTRUST BANK		01/13/2016
STREET	CITY	STATE	ZIP CODE
120 E BALTIMORE ST 25 FL	BALTIMORE	MD	21202
LIEN CODE	SECOND LIENHOLDER		LIEN DATE
STREET	CITY	STATE	ZIP CODE

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

VEHICLE COST / TAX INFORMATION *Treated 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. 55-9-115 (submit Monthly or Annual Certificate of Title)					
☐ LOST	☐ STOLEN	☐ MUTILATED	☐ RTND DUE TO NON DELIVERY	☐ ALTERED	☐ ILLEGIBLE

Under penalties of perjury, I 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 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 01/26/2016
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INVOICE NUMBER	COUNTY NAME	CO NUMBER	DATE OF APPLICATION	BY AUTHORITY OF REGISTRAR OF MOTOR VEHICLES(COUNTY CLERK)
16026 @	HAMILTON	33	01/26/2016	W.F. (BILL) KNOWLES HCM27

OFFICE USE ONLY		EMISSION: Trailer				(total fees collected indicated certifies this form as a valid registration)			
REGISTRATION FEE	CREDIT	LEASE FEE	TRANS FEE	CLERK FEE	ISSUANCE FEE	LIEN FEE	TITLE FEE	TOTAL TAX COLLECTED	
79.75					12.00	11.00	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		
☐ SALES TAX ☐ USE TAX									
*SERVICE OPT FEE	ORGAN DONOR	POSTAGE	VER	ID / RESIDENCY VERIFICATION				*TOTAL FEES COLLECTED	
								108.25	