



VEHICLE TAXPAYER SERVICES DIVISION
MULTI-PURPOSE APPLICATION
OFFICIAL VEHICLE REGISTRATION



STATE

City Stickers:

NEW OR CURRENT TITLE NUMBER 97739049	TRANSACTION CODE N01	REGISTRATION ONLY NUMBER
--	--------------------------------	--------------------------

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) 5			MAO N	ILU N
LAST NAME BOWMAN SALES AND EQUIPMENT INC	FIRST NAME	MIDDLE INITIAL	LAST NAME	MIDDLE INITIAL

ADDRESS 1 (MAILING) 10233 GOVERNOR LN BLVD			ADDRESS 2 (PHYSICAL)	
--	--	--	----------------------	--

CITY WILLIAMSPORT	STATE MD	ZIP CODE 21795	CITY	STATE	ZIP CODE
-----------------------------	--------------------	--------------------------	------	-------	----------

CITY OF RESIDENCE/PRINCIPAL BUS OR INCOMP. LOCATION HAMILTON 033	PURCHASE DATE 08/19/2004	*LEASED ☐ *SERVICE OPTIONS ☐ SEE REVERSE SIDE FOR INSTRUCTIONS	TELEPHONE # 240 772 5474	*PLACARD/HEARING IMPAIRED CLS/YR	*INSURANCE POLICY #
--	------------------------------------	---	------------------------------------	----------------------------------	---------------------

VEHICLE INFORMATION VIN 3H3V532C8WT036002	MAKE HYTR	MODEL 3H3	YEAR 1998	BODY SE	TITLE BRAND - transaction USED	CODE U	TYPE OF FUEL - transaction	CODE 9
--	---------------------	---------------------	---------------------	-------------------	--	------------------	----------------------------	------------------

SURRENDERED TITLE # 11649738	STATE ME	PREVIOUS STATES TITLED	VEHICLE USE F	VEHICLE TYPE S	CURRENT MILEAGE	ODOMETER ACTUAL (0) NOT ACTUAL (8) INDICATOR OVER 10 YRS / 15,000 LBS (1) (List one) IN EXCESS OF MECHANICAL LIMITS (0)	CODE 1
--	--------------------	------------------------	-------------------------	--------------------------	-----------------	---	------------------

COLOR CODE (enter appropriate code) UPPER O	MOBILE HOME LGTH 0	WIDTH 0	# AXLES	GROSS VEHICLE WEIGHT	*VEHICLE TRADE-IN DESCRIPTION	COMPANY VEHICLE # 2376RT
--	---------------------------------	-------------------	---------	----------------------	-------------------------------	------------------------------------

PLATE INFORMATION * (required for Title and Registration and Registration Only Transactions) SEE REVERSE SIDE FOR COMPLETE INSTRUCTIONS							
PLATE # (1) U686045	CLASSCODE/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 DATE 07/16/2013
LIEN CODE	FIRST LIENHOLDER SUNTRUST BANK	CITY BALTIMORE	STATE MD	ZIP CODE 21202

STREET 120 E BALTIMORE ST 25 FL	CITY BALTIMORE	STATE MD	ZIP CODE 21202
---	--------------------------	--------------------	--------------------------

LIEN CODE	SECOND LIENHOLDER	CITY	STATE	ZIP CODE
STREET				

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

VEHICLE COST / TAX INFORMATION * (required for Title & Registration Transactions)				
SALE 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 lien/bill or altered Certificate of Title)					
☐ LOST	☐ STOLEN	☐ MUTILATED	☐ RTN'D DUE TO NON DELIVERY	☐ ALTERED	☐ 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.		POWER OF ATTORNEY/AUTHORIZED SIGNATURE (IF APPLICABLE)	DATE 04/06/2016
SIGNATURE OF CERTIFIER/OWNER			

INVOICE NUMBER 16097 @	COUNTY NAME HAMILTON	CO NUMBER 33	DATE OF APPLICATION 04/06/2016	BY AUTHORITY OF REGISTRAR OF MOTOR VEHICLES (COUNTY CLERK) W.F. (BILL) KNOWLES	HCM27
----------------------------------	--------------------------------	------------------------	--	--	--------------

OFFICE USE ONLY REGISTRATION FEE 79.75		CREDIT	LEASE FEE	TRANS FEE	CLERK FEE	ISSUANCE FEE 12.00	LIEN FEE	TITLE FEE 5.50	TOTAL TAX COLLECTED .00
COMPUTATION OF ☐ SALES TAX ☐ USE TAX	SALES OR USE TAX	SA TAX	LOCAL TAX	ADDITIONAL TAX	COLLECTED IN STATE OF	COUNTY WHEEL TAX	CITY STICKER FEE		

*SERVICE OPT FEE	ORGAN DONOR	POSTAGE	VER	ID / RESIDENCY VERIFICATION	*TOTAL FEES COLLECTED 97.25
------------------	-------------	---------	-----	-----------------------------	---------------------------------------