



VEHICLE TAXPAYER SERVICES DIVISION
MULTI-PURPOSE APPLICATION
OFFICIAL VEHICLE REGISTRATION



STATE

City Stickers:

NEW OR CURRENT TITLE NUMBER 97739035		TRANSACTION CODE N01	REGISTRATION ONLY NUMBER	
OWNER INFORMATION *LEGAL STATUS: 1 (AND) 2 (OR) ☐ ENTER NAME CODE IN BOX 1 (SALE) 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 BOWMAN		
ADDRESS 1 (MAILING) 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 09/21/2004	*LEASED ☒ 0 *SERVICE OPTIONS ☐ SEE REVERSE SIDE FOR INSTRUCTIONS	TELEPHONE # 240 772 5474	
		*PLACARD/HEARING IMPAIRED CLS/YR	*INSURANCE POLICY #	

VEHICLE INFORMATION VIN 1JJV532WXXL577709		MAKE WABA	MODEL 1JJ	YEAR 1999	BODY SE	TITLE BRAND - translation USED	CODE U	TYPE OF FUEL - translation	CODE 9
SURRENDERED TITLE # 11701715		STATE ME	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 O	MOBILE HOME LGTH 2896RT	WIDTH	# AXLES	GROSS VEHICLE WEIGHT		*VEHICLE TRADE-IN DESCRIPTION		COMPANY VEHICLE #	

PLATE INFORMATION *required for Title and Registration and Registration Only Transactions SEE REVERSE SIDE FOR COMPLETE INSTRUCTIONS									
PLATE # (1) U686036	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 DATE 07/16/2013	
LIEN CODE	FIRST LIENHOLDER SUNTRUST BANK	CITY BALTIMORE	STATE MD
STREET 120 E BALTIMORE ST 25 FL		ZIP CODE 21202	
LIEN CODE	SECOND LIENHOLDER	CITY	STATE
STREET		ZIP CODE	

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

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

*Required for Duplicate Title - T.C.A. 65-3-115 (submit legible 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		EMISSION: Trailer		(total fees collected indicated certifies this form as a valid registration)			
COMPUTATION OF ☐ SALES TAX ☐ USE TAX		LEASE FEE	TRANS FEE	CLERK FEE	ISSUANCE FEE 12.00	LIEN FEE	TITLE FEE 5.50
*SERVICE OPT FEE		ORGAN DONOR	POSTAGE	VER	COLLECTED IN STATE OF	COUNTY WHEEL TAX	TOTAL TAX COLLECTED .00
				ID / RESIDENCY VERIFICATION	CITY STICKER FEE	*TOTAL FEES COLLECTED 97.25	