



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

OFFICIAL VEHICLE REGISTRATION

AHAN



City Stickers:

NEW OR CURRENT TITLE NUMBER	TRANSACTION CODE	REGISTRATION ONLY NUMBER
99599864	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) ☐ 5			MAO ☐ N ☐ ILU ☐ N					
LAST NAME			FIRST NAME			MIDDLE INITIAL		
BOWMAN SALES AND EQUIPMENT INC								
ADDRESS 1 (MAILING)			ADDRESS 2 (PHYSICAL)					
10233 GOVERNOR LN BLVD								
CITY			STATE			ZIP CODE		
WILLIAMSPORT			MD			21795		
CITY OF RESIDENCE/PRINCIPAL BUS OR INCORP LOCATION			PURCHASE DATE			TELEPHONE #		
HAMILTON 033			03/26/2007			240 772 5501		
			*LEASED ☐ 0 *SERVICE OPTIONS ☐			*PLACARD/HEARING IMPAIRED CLS/YR		
			SEE REVERSE SIDE FOR INSTRUCTIONS			*INSURANCE POLICY #		

VEHICLE INFORMATION									
VIN									
1GRDM96297H705268									
MAKE		MODEL		YEAR		BODY		TITLE BRAND - translation	
GDAN		1GR		2007		SE		NEW	
CODE		TYPE OF FUEL - translation		CODE					
N		Other		9					
SURRENDERED TITLE #		STATE		PREVIOUS STATES TITLED		VEHICLE USE		VEHICLE TYPE	
11380124		ME				F		S	
COLOR CODE (enter appropriate code)*		MOBILE HOME		# AXLES		GROSS VEHICLE WEIGHT		*VEHICLE TRADE-IN DESCRIPTION	
UPPER		LOTH		WIDTH				COMPANY VEHICLE #	
O								566SF	

PLATE 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)	
U733305		8020/1994					
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		07/16/2013	
STREET		CITY		STATE	
120 E BALTIMORE ST 25 FL		BALTIMORE		MD	
LIEN CODE		SECOND LIENHOLDER		LIEN DATE	
STREET		CITY		STATE	

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

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

*Required for Duplicate Title - T.C.A. 55-3-115 (submit legible or altered Certificate of Title)					
☐ LOST		☐ STOLEN		☐ MUTILATED	
☐ RTND 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.					
SIGNATURE OF CERTIFIER/OWNER		POWER OF ATTORNEY/AUTHORIZED SIGNATURE (IF APPLICABLE)		DATE	
				01/03/2017	

INVOICE NUMBER		COUNTY NAME		CO NUMBER		DATE OF APPLICATION		BY AUTHORITY OF REGISTRAR OF MOTOR VEHICLES (COUNTY CLERK)	
17003 @		HAMILTON		33		01/03/2017		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	
79.75									
COMPUTATION OF		SALES OR USE TAX		SA TAX		LOCAL TAX		ADDITIONAL TAX	
☐ SALES TAX ☐ USE TAX									
*SERVICE OPT FEE		ORGAN DONOR		POSTAGE		VER		ID / RESIDENCY VERIFICATION	
								*TOTAL FEES COLLECTED	
								108.25	