



City Stickers:

NEW OR CURRENT TITLE NUMBER <b>13300442728</b>		TRANSACTION CODE <b>N01</b>	REGISTRATION ONLY NUMBER		STATE
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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) <b>5</b>						MAO <b>N</b>	ILU <b>N</b>		
LAST NAME <b>BOWMAN SALES AND EQUIPMENT INC</b>			FIRST NAME			MIDDLE INITIAL			
ADDRESS 1 (MAILING) <b>10233 GOVERNOR LANE BLVD</b>			ADDRESS 2 (PHYSICAL)						
CITY <b>WILLIAMSPORT</b>		STATE <b>MD</b>	ZIP CODE <b>21795-4029</b>		CITY		STATE	ZIP CODE	
CITY OF RESIDENCE/PRINCIPAL BUS OR INCORP LOCATION <b>HAMILTON 033</b>		PURCHASE DATE <b>07/16/2020</b>		<input type="checkbox"/> *LEASED <input checked="" type="checkbox"/> *SERVICE OPTIONS <small>SEE REVERSE SIDE FOR INSTRUCTIONS</small>		TELEPHONE # <b>800 635 6733</b>		*PLACARD/HEARING IMPAIRED CLS/YR	*INSURANCE POLICY #

VEHICLE INFORMATION										
VIN <b>3H3V532C1MR097346</b>		MAKE <b>HYTR</b>	MODEL <b>3H3</b>	YEAR <b>2021</b>	BODY <b>SE</b>	TITLE BRAND - translation		CODE <b>N</b>	TYPE OF FUEL - translation <b>Other</b>	CODE <b>9</b>
SURRENDERED TITLE # <b>MSO</b>		STATE <b>CA</b>	PREVIOUS STATES TITLED		VEHICLE USE <b>F</b>	VEHICLE TYPE <b>S</b>	CURRENT MILEAGE	ODOMETER ACTUAL (0) NOT ACTUAL (8) INDICATOR OVER 10 YRS / 15,000 LBS (1) (List one) IN EXCESS OF MECHANICAL LIMITS (9)		CODE <b>1</b>
COLOR CODE (enter appropriate code)* UPPER <b>O</b> LOWER		MOBILE HOME LGTH 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) <b>129891T</b>		CLASSCODE/ISSUEYR(1)(3) <b>8020/1994</b>		VALIDATION #(1)	COUNTY STICKER #(1)	CITY STICKER #(1)(2)	*PLATE #(TRADE IN)(2)	CLASS CODE/ISSUE YR(2)	EXPIRATION DATE (1)(2)(3) <b>PERMANENT</b>	
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 <b>SUNTRUST BANK</b>							LIEN DATE <b>07/16/2020</b>	
STREET <b>120 E BALTIMORE ST 25 FL</b>		CITY <b>BALTIMORE</b>		STATE <b>MD</b>		ZIP CODE <b>21202</b>				
LIEN CODE		SECOND LIENHOLDER							LIEN DATE	
STREET		CITY		STATE		ZIP CODE				

*LESSEE / REGISTRANT INFORMATION(OWNER OF PLATE)									
NAME		LEGAL STATUS <input type="checkbox"/>		NAME CODE <input type="checkbox"/>		MAO <input type="checkbox"/>		ILU <input type="checkbox"/>	
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 illegible 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 DELIEVERY	<input type="checkbox"/> ALTERED	<input type="checkbox"/> 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 <b>07/24/2020</b>	
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INVOICE NUMBER <b>20206 @</b>		COUNTY NAME <b>HAMILTON</b>		CO NUMBER <b>33</b>		DATE OF APPLICATION <b>07/24/2020</b>		BY AUTHORITY OF REGISTRAR OF MOTOR VEHICLES(COUNTY CLERK) <b>W.F. (BILL) KNOWLES</b>		<b>HCM27</b>	
OFFICE USE ONLY <b>EMISSION: Trailer</b>											
REGISTRATION FEE <b>100.25</b>		ELECTRIC VEHICLE FEE		CREDIT		LEASE FEE		TRANS FEE		CLERK FEE	
COMPUTATION OF <input type="checkbox"/> SALES TAX <input type="checkbox"/> USE TAX		SALES OR USE TAX		SA TAX		LOCAL TAX		ADDITIONAL TAX		COLLECTED IN STATE OF	
*SERVICE OPT FEE		ORGAN DONOR		POSTAGE		VER		ID / RESIDENCY VERIFICATION		VIN PLATE FEE <b>.00</b>	
										*TOTAL FEES COLLECTED <b>128.75</b>	

SF-1357 Port: WK48/DR27/8020 Cash: 0.00 Check: 0.00 Check#: Credit: 0.00 Auth#: GV: 0.00 Change: 0.00 RDA-692