

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

OFFICIAL VEHICLE REGISTRATION





City Stickers:	IMPED			l TE	ANSACTION	PECIS	TRATION ONLY	/ NUMBER			a times usin term	STATE	
13300167512					RANSACTION CODE:	3301046							
OWNER INFORMATION 'LEG LAST NAME BOWMAN SAL		LIKOT NAME		E IN BOX 1 (SAM MIDDLE INITIAL	iE) 2(DIFFER L	ENT) 3(MULTIPLE LA LAST NAME	ST NAMES) 4(C	OMPANY) 5(O\	/ER 28 CHARACT FIRST NAME	ERS) 5	MAQ N ILU MIDDLE INITIA		
ADDRESS I (MAILING)	LO AND LO	OII WILI	1 1140			ADDRESS 2 (PHYS	SICAL)						
10233 GOVERI	NOR LANE												
WILLIAMSPORT					05-4029 CITY					ATE	ZIP CODE		
HAMILTON 03	07/30/2018 LEASED 0 .			RVICE OPTIO	Ms	772 550		HEARING IMPAIR	KED CESTAN	*INSURANCE POLICY	#		
VEHICLE INFORMATION VIN		MAKE	MODEL	YEAR	BODY	TITLE BRAND - tr	ranslation		CODE	TYPE OF F	UEL - translation	CODE	
1JJV532W29L178733		WABA 1JJ 2		2009	SE				Uo		ther		
SURRENDERED TITLE #		STATE PREVIOUS STATES TITLED		ES TITLED	VEHICLE	USE VEHICLE TY	E CURRENT MILEAGE		ODOMETER ACTUAL (6) I INDICATOR OVER 10 YRS (List one) IN EXCESS OF			CODE	
556913235008		TN			F	S				IN EXCESS OF		1	
COLOR CODE (enter appropriate code)* UPPER LOWER WDTH # AXLES LOTH WDTH # AXLES					GROSS VEHICLE WEIGHT "VEHICLE TRAE			E TRADE-IN DE	SCRIPTION		COMPANY VEHICLE #	6779	
PLATE INFORMATION *(requi	red for Title and Regist		tration Only Tran	sactions) SEE RE		FOR COMPLETE IN	STRUCTIONS	ADE INV(2)	CLASS CODE/	ISSUE VR(2)	EXPIRATION DATE	(1)(2)(3)	
130127T	8020/199	Marie Co. Sandri	11014 #(1)	COUNTYGIEN	CICH(I)	arr onoren #(1/(2)		4536	8020	1994			
TDR STICKER #(4)	ERMIT #(3)	# OF SEATS(5) ZONE(CC	I BMAN YTNUC	E)(6)	USDOT / REGIS	SDOT / REGISTRANT #(7)		Me	OTOR CARRIER #(8)			
LIEN INFORMATION (If lien pr LIEN CODE FIRST LIEN SUBSTREET		ANK				CITY			STA	TF.	07/3	0/2018	
120 E BALTIMORE ST 25 FL					BALTIMORE					MD 21202			
LIEN CODE SECOND L	IENHOLDER										LIEN DA	ATE	
STREET						CITY			STA	TE	ZIP CODE		
*LESSEE / REGISTRANT INFO	ORMATION(OWNER O	OF PLATE)	LEG	AL STATUS	NAM	E CODE	мао 🗌	ILU 🗌					
NAME						NAME							
ADDRESS					(CITY					STATE ZIP CODE		
VEHICLE COST / TAX INFOR	MATION *(required for TRADE IN A		ion Transactions		ABLE AMOUN	іт	SALESTAX	(PAID		*TAX EX	EMPTION REASON / SALE	S TAX#	
DEALER NAME DEALER ADDR				ALER ADDRESS	RESS					DEALER#			
*Required for Duplicate Title -	T.C.A. 55-3-115 (subm	it Illegible or alte	red Certificate of	Title)									
LOST	STOLEN	. [MUTILA	ATED	F	RTN'D DUE TO NON E	DELIEVERY	AL	TERED		ILLEGIBLE		
Under penalties of perjury, I he or its assignees to determine the		ion provided is tr mation provided	ue and correct to by me or on my	the best of my kr behalf.	nowledge, an	d acknowledge that it i	s not the respons	sibility of the Mo	tor Vehicle Divisio	n Inco	TC .		
SIGNATURE OF CERTIFIER/	OWNER			POWER OF AT	TORNEY/AU	THORIZED SIGNATU				DAT	07/27/202	0	
20209 @	HAMILT	ON		CO NUMBER	200	7/27/2020	100000000000000000000000000000000000000	I Westerlier o to t	GISTRAR OF MO	·	LES(COUNTY CLERK)	HCM27	
OFFICE USE ONLY		NOT APPLIC	CABLE TLEASE		ANS FEE	CLERK FEE		ees collected Ir	ndicated certifies	this form as	a valid registration) TAL TAX COLLECTED		
B - A			8597.08827.00	10	0.00		2.50				.00		
SALES TAX USE TO	SALES OR USE TAX ORGAN DONOR	9,000	AX LG	OCAL TAX /	ADDITIONAL		LLECTED IN ST	ON VI	UNTY WHEEL TA	170	OTAL FEES COLLECTED	11	
SE-1357 Port: WK48	B/DR27/ Cash	1: 0.00 C	heck: 0.0	0 Check	#: Cr	redit: 0.00 A	Auth#:	GV: 0.00	O0 Change:		12.50	N-692	

SF-1357