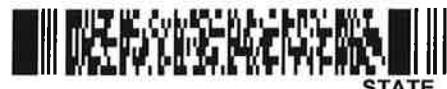




TENNESSEE DEPARTMENT OF REVENUE  
VEHICLE TAXPAYER SERVICES DIVISION  
MULTI-PURPOSE APPLICATION  
OFFICIAL VEHICLE REGISTRATION



STATE

## City Stickers:

NEW OR CURRENT TITLE NUMBER <b>13300522464</b>	TRANSACTION CODE* <b>N01</b>	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 <b>BOWMAN SALES AND EQUIPMENT INC</b>	FIRST NAME	MIDDLE INITIAL	LAST NAME	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
-----------------------------	--------------------	-------------------------------	------	-------	----------

CNTY OF RESIDENCE/PRINCIPAL BUS OR INCORP LOCATION <b>HAMILTON 033</b>	PURCHASE DATE <b>02/05/2021</b>	*LEASED <b>0</b> *SERVICE OPTIONS SEE REVERSE SIDE FOR INSTRUCTIONS	TELEPHONE # <b>800 635 6733</b>	*PLACARD/HEARING IMPAIRED CLS/YR	*INSURANCE POLICY #
---	------------------------------------	--	------------------------------------	----------------------------------	---------------------

VEHICLE INFORMATION		VIN <b>3H3V532K6NS536123</b> MAKE <b>HYTR</b> MODEL <b>3H3</b> YEAR <b>2022</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 / 16,000 LBS (1) (List one) IN EXCESS OF MECHANICAL LIMITS (9)	CODE <b>1</b>
COLOR CODE (enter appropriate code)* UPPER <b>O</b>	LOWER LGTH	MOBILE HOME WDTH	# 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>169732T</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>02/05/2021</b>
STREET <b>120 E BALTIMORE ST 25TH FL</b>	CITY	STATE	ZIP CODE <b>MD 21202</b>				
LIEN CODE	SECOND LIENHOLDER						LIEN DATE
STREET	CITY	STATE	ZIP CODE				

*LESSEE / REGISTRANT INFORMATION(OWNER OF PLATE)		LEGAL STATUS <input type="checkbox"/>	NAME CODE <input type="checkbox"/>	MAO <input type="checkbox"/>	ILU <input type="checkbox"/>
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 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 DELIVERY	<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>02/08/2021</b>
--	--	--	--	------------------------------	--	--	--	---	--	---------------------------

INVOICE NUMBER COUNTY NAME CO NUMBER DATE OF APPLICATION BY AUTHORITY OF REGISTRAR OF MOTOR VEHICLES(COUNTY CLERK)

<b>21039 @</b>	<b>HAMILTON</b>	<b>33</b>	<b>02/08/2021</b>	<b>W.F. (BILL) KNOWLES</b>	<b>HCM27</b>
(total fees collected indicated certifies this form as a valid registration)					

REGISTRATION FEE <b>100.25</b>	ELECTRIC VEHICLE FEE	CREDIT	LEASE FEE	TRANS FEE	CLERK FEE	ISSUANCE FEE	LIEN FEE	TITLE FEE	TOTAL TAX COLLECTED
					<b>12.00</b>	<b>11.00</b>	<b>5.50</b>	<b>.00</b>	

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	COUNTY WHEEL TAX	CITY STICKER FEE	INS FEE
*SERVICE OPT FEE	ORGAN DONOR	POSTAGE	VER	ID / RESIDENCY VERIFICATION	VIN PLATE FEE	*TOTAL FEES COLLECTED		
					<b>.00</b>	<b>128.75</b>		