



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

**City Stickers:**

NEW OR CURRENT TITLE NUMBER <b>03779256</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) (MULTIPLE LAST NAMES) 4 (COMPANY) 5 (OVER 28 CHARACTERS)	<b>5</b>	MAO <input type="checkbox"/> ILU <input type="checkbox"/>			
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)
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CITY <b>WILLIAMSPORT</b>	STATE <b>MD</b>	ZIP CODE <b>21795-4029</b>	CITY	STATE	ZIP CODE
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CITY OF RESIDENCE/PRINCIPAL BUS OR INCORP LOCATION <b>HAMILTON 033</b>	PURCHASE DATE <b>11/30/2017</b>	*LEASED <input checked="" type="checkbox"/> SERVICE OPTIONS <small>SEE REVERSE SIDE FOR INSTRUCTIONS</small>	TELEPHONE # <b>240 772 5501</b>	*PLACARD/HEARING IMPAIRED CLS/YR	*INSURANCE POLICY #
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VEHICLE INFORMATION		TITLE BRAND - translation					CODE	TYPE OF FUEL - translation	CODE
VIN <b>1JJV532D5KL039149</b>	MAKE <b>WABA</b>	MODEL <b>1JJ</b>	YEAR <b>2019</b>	BODY <b>SE</b>			<b>N</b>	Other	<b>9</b>
SURRENDERED TITLE # <b>MSO</b>	STATE <b>MD</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)		<b>1</b>
COLOR CODE (enter appropriate code)* UPPER <b>O</b>	MOBILE HOME LGHTH WDTH	# AXLES	GROSS VEHICLE WEIGHT			*VEHICLE TRADE-IN DESCRIPTION		COMPANY VEHICLE # <b>KL039149</b>	

PLATE INFORMATION (Required for Title and Registration and Registration Only Transactions) SEE REVERSE SIDE FOR COMPLETE INSTRUCTIONS									
PLATE #(1) <b>U829810</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							LIEN DATE
Lien Code	First Lienholder <b>SUNTRUST BANK</b>						<b>11/30/2017</b>
STREET <b>120 E BALTIMORE ST 25 FL</b>	CITY		STATE		ZIP CODE		
Lien Code	Second Lienholder <b>BALTIMORE</b>						<b>21202</b>
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.O.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>12/29/2017</b>

INVOICE NUMBER <b>17363 @</b>	COUNTY NAME <b>HAMILTON</b>	CO NUMBER <b>33</b>	DATE OF APPLICATION <b>12/29/2017</b>	BY AUTHORITY OF REGISTRAR OF MOTOR VEHICLES(COUNTY CLERK) <b>W.F. (BILL) KNOWLES</b>			DATE
(total fees collected indicated certifies this form as a valid registration)							<b>HCM27</b>

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>.00</b>
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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
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*SERVICE OPT FEE	ORGAN DONOR	POSTAGE	VER	ID / RESIDENCY VERIFICATION	*TOTAL FEES COLLECTED <b>128.75</b>
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