

ANNUAL VEHICLE INSPECTION REPORT

VEHICLE HISTORY RECORD	
REPORT NUMBER	FLEET UNIT NUMBER
	102
DATE 4-14-08	

MOTOR CARRIER OPERATOR <i>Golden Hawk Transportation</i>	INSPECTOR'S NAME (PRINT OR TYPE) <i>Joe Flick</i>
ADDRESS <i>4594 Lincoln Hwy</i>	THIS INSPECTOR MEETS THE QUALIFICATION REQUIREMENTS IN SECTION 396.19. <input checked="" type="checkbox"/> YES <input checked="" type="checkbox"/> NO
CITY, STATE, ZIP CODE <i>CRESTINE OHIO 44827</i>	VEHICLE IDENTIFICATION (VIN) AND COMPLETE <input checked="" type="checkbox"/> LIC. PLATE NO. <input checked="" type="checkbox"/> VIN <input type="checkbox"/> OTHER <i>179719</i>
VEHICLE TYPE <input checked="" type="checkbox"/> TRACTOR <input type="checkbox"/> TRAILER <input checked="" type="checkbox"/> TRUCK <input type="checkbox"/> (OTHER)	INSPECTION AGENCY/LOCATION (OPTIONAL)

VEHICLE COMPONENTS INSPECTED

OK	NEEDS REPAIR	REPAIRED DATE	ITEM	OK	NEEDS REPAIR	REPAIRED DATE	ITEM	OK	NEEDS REPAIR	REPAIRED DATE	ITEM
<input checked="" type="checkbox"/>			1. BRAKE SYSTEM	<input checked="" type="checkbox"/>			4. FUEL SYSTEM	<input checked="" type="checkbox"/>			9. FRAME
<input checked="" type="checkbox"/>			a. Service Brakes	<input checked="" type="checkbox"/>			a. Visible leak	<input checked="" type="checkbox"/>			a. Frame Members
<input checked="" type="checkbox"/>			b. Parking Brake System	<input checked="" type="checkbox"/>			b. Fuel tank filler cap missing	<input checked="" type="checkbox"/>			b. Tire and Wheel Clearance
<input checked="" type="checkbox"/>			c. Brake Drums or Rotors	<input checked="" type="checkbox"/>			c. Fuel tank securely attached	<input checked="" type="checkbox"/>			c. Adjustable Axle Assemblies (Sliding Subframes)
<input checked="" type="checkbox"/>			d. Brake Hose	<input checked="" type="checkbox"/>				<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>			e. Brake Tubing	<input checked="" type="checkbox"/>			5. LIGHTING DEVICES	<input checked="" type="checkbox"/>			10. TIRES
<input checked="" type="checkbox"/>			f. Low Pressure Warning Device	<input checked="" type="checkbox"/>			All lighting devices and reflectors required by Section 393 shall be operable.	<input checked="" type="checkbox"/>			a. Tires on any steering axle of a power unit.
<input checked="" type="checkbox"/>			g. Tractor Protection Valve	<input checked="" type="checkbox"/>				<input checked="" type="checkbox"/>			b. All other tires.
<input checked="" type="checkbox"/>			h. Air Compressor	<input checked="" type="checkbox"/>			6. SAFE LOADING	<input checked="" type="checkbox"/>			11. WHEELS AND RIMS
<input checked="" type="checkbox"/>			i. Electric Brakes	<input checked="" type="checkbox"/>			a. Part(s) of vehicle or condition of loading such that the spare tire or any part of the load or dunnage can fall onto the roadway.	<input checked="" type="checkbox"/>			a. Lock or Side Ring
<input checked="" type="checkbox"/>			j. Hydraulic Brakes	<input checked="" type="checkbox"/>			b. Protection against shifting cargo	<input checked="" type="checkbox"/>			b. Wheels and Rims
<input checked="" type="checkbox"/>			k. Vacuum Systems	<input checked="" type="checkbox"/>				<input checked="" type="checkbox"/>			c. Fasteners
<input checked="" type="checkbox"/>				<input checked="" type="checkbox"/>			7. STEERING MECHANISM	<input checked="" type="checkbox"/>			d. Welds
<input checked="" type="checkbox"/>			2. COUPLING DEVICES	<input checked="" type="checkbox"/>			a. Steering Wheel Free Play	<input checked="" type="checkbox"/>			12. WINDSHIELD GLAZING
<input checked="" type="checkbox"/>			a. Fifth Wheels	<input checked="" type="checkbox"/>			b. Steering Column	<input checked="" type="checkbox"/>			Requirements and exceptions as stated pertaining to any crack, discoloration or vision reducing matter (reference 393.60 for exceptions)
<input checked="" type="checkbox"/>			b. Pintle Hooks	<input checked="" type="checkbox"/>			c. Front Axle Beam and All Steering Components Other Than Steering Column	<input checked="" type="checkbox"/>			13. WINDSHIELD WIPERS
<input checked="" type="checkbox"/>			c. Drawbar/Towbar Eye	<input checked="" type="checkbox"/>			d. Steering Gear Box	<input checked="" type="checkbox"/>			Any power unit that has an inoperative wiper, or missing or damaged parts that render it ineffective.
<input checked="" type="checkbox"/>			d. Drawbar/Towbar Tongue	<input checked="" type="checkbox"/>			e. Pitman Arm	<input checked="" type="checkbox"/>			List any other condition which may prevent safe operation of this vehicle.
<input checked="" type="checkbox"/>			e. Safety Devices	<input checked="" type="checkbox"/>			f. Power Steering	<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>			f. Saddle-Mounts	<input checked="" type="checkbox"/>			g. Ball and Socket Joints	<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>				<input checked="" type="checkbox"/>			h. Tie Rods and Drag Links	<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>			3. EXHAUST SYSTEM	<input checked="" type="checkbox"/>			i. Nuts	<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>			a. Any exhaust system determined to be leaking at a point forward of or directly below the driver/sleeper compartment.	<input checked="" type="checkbox"/>			j. Steering System	<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>			b. A bus exhaust system leaking or discharging to the atmosphere in violation of standards (1), (2) or (3).	<input checked="" type="checkbox"/>				<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>			c. No part of the exhaust system of any motor vehicle shall be so located as would be likely to result in burning, charring, or damaging the electrical wiring, the fuel supply, or any combustible part of the motor vehicle.	<input checked="" type="checkbox"/>			8. SUSPENSION	<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>				<input checked="" type="checkbox"/>			a. Any U-bolt(s), spring hanger(s), or other axle positioning part(s) cracked, broken, loose or missing resulting in shifting of an axle from its normal position.	<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>				<input checked="" type="checkbox"/>			b. Spring Assembly	<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>				<input checked="" type="checkbox"/>			c. Torque, Radius or Tracking Components.	<input checked="" type="checkbox"/>			

INSTRUCTIONS: MARK COLUMN ENTRIES TO VERIFY INSPECTION: ☒ OK, ☒ NEEDS REPAIR, ☒ IF ITEMS DO NOT APPLY, _____ REPAIRED DATE

CERTIFICATION: THIS VEHICLE HAS PASSED ALL THE INSPECTION ITEMS FOR THE ANNUAL VEHICLE INSPECTION REPORT IN ACCORDANCE WITH 49 CFR 396.

ANNUAL VEHICLE INSPECTION REPORT

VEHICLE HISTORY RECORD

REPORT NUMBER	FLEET UNIT NUMBER
	102
DATE 11-12-07	

MOTOR CARRIER OPERATOR Golden HAWK TRANSPORTATION	INSPECTOR'S NAME (PRINT OR TYPE) JOHN WHITMAN
ADDRESS 4594 US30	THIS INSPECTOR MEETS THE QUALIFICATION REQUIREMENTS IN SECTION 396.19. <input checked="" type="checkbox"/> YES
CITY, STATE, ZIP CODE CRESTLINE, OHIO 44827	VEHICLE IDENTIFICATION (✓) AND COMPLETE <input type="checkbox"/> LIC. PLATE NO. <input checked="" type="checkbox"/> VIN <input type="checkbox"/> OTHER 179719
VEHICLE TYPE <input type="checkbox"/> TRACTOR <input type="checkbox"/> TRAILER <input checked="" type="checkbox"/> TRUCK <input type="checkbox"/> (OTHER)	INSPECTION AGENCY/LOCATION (OPTIONAL)

VEHICLE COMPONENTS INSPECTED

OK	NEEDS REPAIR	REPAIRED DATE	ITEM	OK	NEEDS REPAIR	REPAIRED DATE	ITEM	OK	NEEDS REPAIR	REPAIRED DATE	ITEM
✓			1. BRAKE SYSTEM	✓			4. FUEL SYSTEM	✓			9. FRAME
✓			a. Service Brakes	✓			a. Visible leak	✓			a. Frame Members
✓			b. Parking Brake System	✓			b. Fuel tank filler cap missing	✓			b. Tire and Wheel Clearance
✓			c. Brake Drums or Rotors	✓			c. Fuel tank securely attached	✓			c. Adjustable Axle Assemblies (Sliding Subframes)
✓			d. Brake Hose				5. LIGHTING DEVICES				10. TIRES
✓			e. Brake Tubing				All lighting devices and reflectors required by Section 393 shall be operable.	✓			a. Tires on any steering axle of a power unit.
✓			f. Low Pressure Warning Device	✓			6. SAFE LOADING	✓			b. All other tires.
✓			g. Tractor Protection Valve				a. Part(s) of vehicle or condition of loading such that the spare tire or any part of the load or dunnage can fall onto the roadway.	✓			11. WHEELS AND RIMS
✓			h. Air Compressor	✓			b. Protection against shifting cargo	✓			a. Lock or Side Ring
✓			i. Electric Brakes					✓			b. Wheels and Rims
✓			j. Hydraulic Brakes					✓			c. Fasteners
✓			k. Vacuum Systems					✓			d. Welds
✓			2. COUPLING DEVICES	✓			7. STEERING MECHANISM	✓			12. WINDSHIELD GLAZING
✓			a. Fifth Wheels				a. Steering Wheel Free Play				Requirements and exceptions as stated pertaining to any crack, discoloration or vision reducing matter (reference 393.60 for exceptions)
✓			b. Pintle Hooks				b. Steering Column				13. WINDSHIELD WIPERS
✓			c. Drawbar/Towbar Eye	✓			c. Front Axle Beam and All Steering Components Other Than Steering Column				Any power unit that has an inoperative wiper, or missing or damaged parts that render it ineffective.
✓			d. Drawbar/Towbar Tongue	✓			d. Steering Gear Box				List any other condition which may prevent safe operation of this vehicle.
✓			e. Safety Devices	✓			e. Pitman Arm				
✓			f. Saddle-Mounts	✓			f. Power Steering				
✓			3. EXHAUST SYSTEM				g. Ball and Socket Joints				
✓			a. Any exhaust system determined to be leaking at a point forward of or directly below the driver/sleeper compartment.	✓			h. Tie Rods and Drag Links				
✓			b. A bus exhaust system leaking or discharging to the atmosphere in violation of standards (1), (2) or (3).	✓			i. Nuts				
✓			c. No part of the exhaust system of any motor vehicle shall be so located as would be likely to result in burning, charring, or damaging the electrical wiring, the fuel supply, or any combustible part of the motor vehicle.	✓			j. Steering System				
✓				✓			8. SUSPENSION				
✓				✓			a. Any U-bolt(s), spring hanger(s), or other axle positioning part(s) cracked, broken, loose or missing resulting in shifting of an axle from its normal position.				
✓				✓			b. Spring Assembly				
✓				✓			c. Torque, Radius or Tracking Components.				

INSTRUCTIONS: MARK COLUMN ENTRIES TO VERIFY INSPECTION: ☒ OK, ☒ NEEDS REPAIR, ☒ IF ITEMS DO NOT APPLY, _____ REPAIRED DATE

CERTIFICATION: THIS VEHICLE HAS PASSED ALL THE INSPECTION ITEMS FOR THE ANNUAL VEHICLE INSPECTION REPORT IN ACCORDANCE WITH 49 CFR 396.

ORIGINAL



STATE OF OHIO - BUREAU OF MOTOR VEHICLES

CERTIFICATE OF REGISTRATION

102

PLATE NO.: PFZ5316 REG. DATE: 01/09/2008 EXP. DATE: 12/31/2008 ISSUE DATE: 01/09/2008 APP NO.: 733655AX
VALIDATION NO.: 812PFZ5316 AGENCY: 7009
OWNER NAME: RAYMOND T MILLER VEHICLE OWNERSHIP: COMMERCIAL USER ID: LM
OLD APP NO.: 690404AV
OLD PLATE: PFZ5316

OWNER ADDR.: 4594 US ROUTE 30
CITY: CRESTLINE
STATE: OH ZIP: 44827
TAX DISTRICT: MADISON TOWNSHIP
COUNTY: RICHLAND

INSIDE CORP LIMIT: NO
VEHICLE YEAR: 1979
BODY TYPE: TK

VEHICLE CLASS: COMM TRUCK
ODOMETER READING: 761,703
MAKE: FRHT HVUT: 80000 WEIGHT: 27000

STATE FEES: \$1.00

CERTIFICATE TITLE NO.: 7001043684
VEH. SERIAL NO.: CB113HP179719
PURCHASE DATE: 09/05/2006
USED

PLATE TYPE: SUNBURST
REG TYPE: DUPLICATE

LOCAL TAX: \$0.00
REFL./CO. FEE: \$0.00
DEPUTY FEE: \$3.50

SUSPENSION/REVOCATION: NO

PRIOR OPERATION: NO

FEES PAID: NO

TOTAL FEES: \$4.50

- In Ohio, it is illegal to drive any motor vehicle without insurance or other financial responsibility (FR) coverage.
- It is also illegal for any motor vehicle owner to allow anyone else to drive the owner's vehicle without FR coverage.
- PROOF OF COVERAGE IS REQUIRED: Whenever a police officer issues a traffic ticket*At all vehicle inspection stops*Upon traffic court appearances*Upon random checks by the Registrar of Motor Vehicles.
- ANY DRIVER OR OWNER WHO FAILS TO SHOW PROOF OF INSURANCE OR OTHER COVERAGE WILL: Lose his or her driver license for 90 days on first offense, one year on second offense* Lose his or her license plates and vehicle registration*Pay reinstatement fees of \$75.00 on first offense, \$250.00 for second offense, and \$500.00 on any additional offense*Pay a \$50.00 penalty for any failure to surrender his or her driver license, license plates or registration AND*Be required to maintain special FR coverage ("High-risk" insurance or equivalent) on file with the Bureau of Motor Vehicles for THREE or FIVE YEARS.
- ONCE THIS SUSPENSION IS IN EFFECT: Any driver or owner who violates the suspension will have his or her vehicle immobilized and his or her license plates confiscated for at least 30 DAYS first offense and 60 DAYS second offense. For third or subsequent offenses, the vehicle will be forfeited and sold and the person will not be permitted to register any motor vehicle in Ohio for FIVE YEARS.
- IF YOU ARE INVOLVED IN AN ACCIDENT WITHOUT INSURANCE OR OTHER FR COVERAGE: In addition to all the penalties listed above, you may have*A SECURITY SUSPENSION for TWO YEARS or more and*A JUDGEMENT SUSPENSION INDEFINITELY (until all damages have been satisfied).
- THESE PENALTIES ARE IN ADDITION TO ANY FINES OR PENALTIES IMPOSED BY A COURT OF LAW. WARNING: THESE LAWS DO NOT PREVENT THE POSSIBILITY THAT YOU MAY BE INVOLVED IN AN ACCIDENT WITH A PERSON WHO HAS NO INSURANCE OR OTHER FR COVERAGE.
- WHEN REQUIRED, PROOF OF COVERAGE MAY BE SHOWN BY ANY OF THE FOLLOWING:*AN INSURANCE POLICY showing automobile liability insurance of at least \$12,500 bodily injury per person, \$25,000 injury two or more persons, and \$7,500 property damage*AN INSURANCE IDENTIFICATION CARD (same coverage)*A SURETY BOND OF \$30,000 issued by any authorized surety company or insurance company*A BMV BOND SECURED BY REAL ESTATE having equity of at least \$60,000*A BMV CERTIFICATE FOR MONEY OR GOVERNMENT BONDS in the amount of \$30,000 on deposit with the Ohio Treasurer of State*A BMV CERTIFICATE OF SELF-INSURANCE, available only to companies or persons who own at least twenty-six motor vehicles.

PROOF OF FINANCIAL RESPONSIBILITY

I affirm that all owners (or lessees of leased vehicle) now have insurance or other FR coverage and will not operate or permit the operation of this motor vehicle without FR coverage; all previous registration fees due have been paid; this plate category is correct; and this vehicle will not be used as a commercial or farm vehicle unless so registered.

By signing below I agree to and attest that all the above is true and accurate,

X **SIGNATURE ON FILE**

SIGNATURE OF OWNER(S)

DATE

WARNING: APPLICANT GIVING FALSE INFORMATION IS SUBJECT TO PROSECUTION-O.R.C. SEC. 2921.13.
APPLICATION MUST BE SIGNED BY THE OWNER(S) AS NAMED ON CERTIFICATE OF TITLE.

DO NOT DISCARD.

THIS IS YOUR VEHICLE REGISTRATION CERTIFICATE.



STATE OF OHIO - BUREAU OF MOTOR VEHICLES
CERTIFICATE OF REGISTRATION

#102
Red

PLATE NO.: PFZ5316 REG. DATE: 11/13/2007 EXP. DATE: 12/31/2008 ISSUE DATE: 11/13/2007 APP NO.: 690404AV
VALIDATION NO.: 812PFZ5316 AGENCY: 7009
OWNER NAME: RAYMOND T MILLER VEHICLE OWNERSHIP: COMMERCIAL USER ID: CA

OWNER ADDR.: 4594 US ROUTE 30
CITY: CRESTLINE
STATE: OH ZIP: 44827
TAX DISTRICT: MADISON TOWNSHIP
COUNTY: RICHLAND
INSIDE CORP LIMIT: NO
VEHICLE YEAR: 1979
BODY TYPE: TK

VEHICLE CLASS: COMM TRUCK
ODOMETER READING: 761,703
MAKE: FRHT HVUT: 80000 WEIGHT: 27000 STATE FEES: \$1,586.00

CERTIFICATE TITLE NO.: 7001043684
VEH. SERIAL NO.: CB113HP179719
PURCHASE DATE: 09/05/2006
USED

PLATE TYPE: SUNBURST
REG TYPE: NEW/RENEWAL LOCAL TAX: \$0.00
REFL./CO. FEE: \$0.50
DEPUTY FEE: \$3.50
SUSPENSION/REVOCAION: NO
PRIOR OPERATION: NO
FEES PAID: NO TOTAL FEES: \$1,590.00

- In Ohio, it is illegal to drive any motor vehicle without insurance or other financial responsibility (FR) coverage.
- It is also illegal for any motor vehicle owner to allow anyone else to drive the owner's vehicle without FR coverage.
- PROOF OF COVERAGE IS REQUIRED: Whenever a police officer issues a traffic ticket*At all vehicle inspection stops*Upon traffic court appearances*Upon random checks by the Registrar of Motor Vehicles.
- ANY DRIVER OR OWNER WHO FAILS TO SHOW PROOF OF INSURANCE OR OTHER COVERAGE WILL: Lose his or her driver license for 90 days on first offense, one year on second offense* Lose his or her license plates and vehicle registration*Pay reinstatement fees of \$75.00 on first offense, \$250.00 for second offense, and \$500.00 on any additional offense*Pay a \$50.00 penalty for any failure to surrender his or her driver license, license plates or registration AND*Be required to maintain special FR coverage ("High-risk" insurance or equivalent) on file with the Bureau of Motor Vehicles for THREE or FIVE YEARS.
- ONCE THIS SUSPENSION IS IN EFFECT: Any driver or owner who violates the suspension will have his or her vehicle immobilized and his or her license plates confiscated for at least 30 DAYS first offense and 60 DAYS second offense. For third or subsequent offenses, the vehicle will be forfeited and sold and the person will not be permitted to register any motor vehicle in Ohio for FIVE YEARS.
- IF YOU ARE INVOLVED IN AN ACCIDENT WITHOUT INSURANCE OR OTHER FR COVERAGE: In addition to all the penalties listed above, you may have*A SECURITY SUSPENSION for TWO YEARS or more and*A JUDGEMENT SUSPENSION INDEFINITELY (until all damages have been satisfied).
- THESE PENALTIES ARE IN ADDITION TO ANY FINES OR PENALTIES IMPOSED BY A COURT OF LAW. WARNING: THESE LAWS DO NOT PREVENT THE POSSIBILITY THAT YOU MAY BE INVOLVED IN AN ACCIDENT WITH A PERSON WHO HAS NO INSURANCE OR OTHER FR COVERAGE.
- WHEN REQUIRED, PROOF OF COVERAGE MAY BE SHOWN BY ANY OF THE FOLLOWING:*AN INSURANCE POLICY showing automobile liability insurance of at least \$12,500 bodily injury per person, \$25,000 injury two or more persons, and \$7,500 property damage*AN INSURANCE IDENTIFICATION CARD (same coverage)*A SURETY BOND of \$30,000 issued by any authorized surety company or insurance company*A BMV BOND SECURED BY REAL ESTATE having equity of at least \$60,000*A BMV CERTIFICATE FOR MONEY OR GOVERNMENT BONDS in the amount of \$30,000 on deposit with the Ohio Treasurer of State*A BMV CERTIFICATE OF SELF-INSURANCE, available only to companies or persons who own at least twenty-six motor vehicles.

PROOF OF FINANCIAL RESPONSIBILITY

I affirm that all owners (or lessees of leased vehicle) now have insurance or other FR coverage and will not operate or permit the operation of this motor vehicle without FR coverage; all previous registration fees due have been paid; this plate category is correct; and this vehicle will not be used as a commercial or farm vehicle unless so registered.

By signing below I agree to and attest that all the above is true and accurate,

X SIGNATURE ON FILE

SIGNATURE OF OWNER(S)

DATE

WARNING: APPLICANT GIVING FALSE INFORMATION IS SUBJECT TO PROSECUTION-O.R.C. SEC. 2921.13.
APPLICATION MUST BE SIGNED BY THE OWNER(S) AS NAMED ON CERTIFICATE OF TITLE.

**DO NOT DISCARD.
THIS IS YOUR VEHICLE REGISTRATION CERTIFICATE.**



STATE OF OHIO - BUREAU OF MOTOR VEHICLES
CERTIFICATE OF REGISTRATION

102

PLATE NO.: PFZ5316 REG. DATE: 12/31/2008 EXP. DATE: 12/31/2009 ISSUE DATE: 01/02/2009 APP NO.: 477461BK
VALIDATION NO.: 912PFZ5316 AGENCY: 7009
OWNER NAME: RAYMOND T MILLER VEHICLE OWNERSHIP: COMMERCIAL USER ID: LM
OLD APP NO.: 733655AX
OLD PLATE: PFZ5316
OWNER ADDR.: 4594 US ROUTE 30
CITY: CRESTLINE
STATE: OH ZIP: 44827
TAX DISTRICT: MADISON TOWNSHIP
COUNTY: RICHLAND
INSIDE CORP LIMIT: NO VEHICLE CLASS: COMM TRUCK
VEHICLE YEAR: 1979 ODOMETER READING: 761,703
BODY TYPE: TK MAKE: FRHT HVUT: 80000 WEIGHT: 27000 STATE FEES: \$1,351.00

CERTIFICATE TITLE NO.: 7001043684

VEH SERIAL NO.: CB113HP179719

PLATE TYPE: SUNBURST

REG TYPE: RENEWAL

LOCAL TAX: \$0.00

REFL./CO. FEE: \$0.00

DEPUTY FEE: \$3.50

SUSPENSION/REVOCATION: NO

PRIOR OPERATION: YES

FEES PAID: YES

TOTAL FEES: \$1,354.50



vehicle without insurance or other financial responsibility (FR) coverage.

owner to allow anyone else to drive the owner's vehicle without FR coverage.

ED: Whenever a police officer issues a traffic ticket*At all vehicle inspection stops*Upon traffic court appearances*Upon random les.

- ANY DRIVER OR OWNER WHO FAILS TO SHOW PROOF OF INSURANCE OR OTHER COVERAGE WILL: Lose his or her driver license for 90 days on first offense, one year on second offense* Lose his or her license plates and vehicle registration*Pay reinstatement fees of \$75.00 on first offense, \$250.00 for second offense, and \$500.00 on any additional offense*Pay a \$50.00 penalty for any failure to surrender his or her driver license, license plates or registration AND*Be required to maintain special FR coverage ("High-risk" insurance or equivalent) on file with the Bureau of Motor Vehicles for THREE or FIVE YEARS.
- ONCE THIS SUSPENSION IS IN EFFECT: Any driver or owner who violates the suspension will have his or her vehicle immobilized and his or her license plates confiscated for at least 30 DAYS first offense and 60 DAYS second offense. For third or subsequent offenses, the vehicle will be forfeited and sold and the person will not be permitted to register any motor vehicle in Ohio for FIVE YEARS.
- IF YOU ARE INVOLVED IN AN ACCIDENT WITHOUT INSURANCE OR OTHER FR COVERAGE: In addition to all the penalties listed above, you may have*A SECURITY SUSPENSION for TWO YEARS or more and*A JUDGEMENT SUSPENSION INDEFINITELY (until all damages have been satisfied).
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By signing below I agree to and attest that all the above is true and accurate,

X SIGNATURE ON FILE

SIGNATURE OF OWNER(S)

DATE

WARNING: APPLICANT GIVING FALSE INFORMATION IS SUBJECT TO PROSECUTION-O.R.C. SEC. 2913.42.
APPLICATION MUST BE SIGNED BY THE OWNER(S) AS NAMED ON CERTIFICATE OF TITLE.

DO NOT DISCARD.
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STATE OF OHIO - BUREAU OF MOTOR VEHICLES
CERTIFICATE OF REGISTRATION

102

PLATE NO.: PFZ5316 REG. DATE: 01/09/2008 EXP. DATE: 12/31/2008 ISSUE DATE: 01/09/2008 APP NO.: 733655AX
VALIDATION NO.: 812PFZ5316 AGENCY: 7009
OWNER NAME: RAYMOND T MILLER VEHICLE OWNERSHIP: COMMERCIAL USER ID: LM
OLD APP NO.: 690404AV
OLD PLATE: PFZ5316
OWNER ADDR.: 4594 US ROUTE 30
CITY: CRESTLINE
STATE OH ZIP: 44827
TAX DISTRICT: MADISON TOWNSHIP
COUNTY: RICHLAND
INSIDE CORP LIMIT: NO VEHICLE CLASS: COMM TRUCK
VEHICLE YEAR: 1979 ODOMETER READING: 761,703
BODY TYPE: TK MAKE: FRHT HVUT: 80000 WEIGHT: 27000 STATE FEES: \$1.00
CERTIFICATE TITLE NO.: 7001043684 PLATE TYPE: SUNBURST
VEH. SERIAL NO.: CB113HP179719 REG TYPE: DUPLICATE LOCAL TAX: \$0.00
PURCHASE DATE: 09/05/2006 REFL./CO. FEE: \$0.00
USED SUSPENSION/REVOCATION: NO DEPUTY FEE: \$3.50
PRIOR OPERATION: NO
FEES PAID: NO TOTAL FEES: \$4.50

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- IF YOU ARE INVOLVED IN AN ACCIDENT WITHOUT INSURANCE OR OTHER FR COVERAGE: In addition to all the penalties listed above, you may have*A SECURITY SUSPENSION for TWO YEARS or more and*A JUDGEMENT SUSPENSION INDEFINITELY (until all damages have been satisfied).
- THESE PENALTIES ARE IN ADDITION TO ANY FINES OR PENALTIES IMPOSED BY A COURT OF LAW. WARNING: THESE LAWS DO NOT PREVENT THE POSSIBILITY THAT YOU MAY BE INVOLVED IN AN ACCIDENT WITH A PERSON WHO HAS NO INSURANCE OR OTHER FR COVERAGE.
- WHEN REQUIRED, PROOF OF COVERAGE MAY BE SHOWN BY ANY OF THE FOLLOWING:*AN INSURANCE POLICY showing automobile liability insurance of at least \$12,500 bodily injury per person, \$25,000 injury two or more persons, and \$7,500 property damage*AN INSURANCE IDENTIFICATION CARD (same coverage)*A SURETY BOND OF \$30,000 issued by any authorized surety company or insurance company*A BMV BOND SECURED BY REAL ESTATE having equity of at least \$60,000*A BMV CERTIFICATE FOR MONEY OR GOVERNMENT BONDS in the amount of \$30,000 on deposit with the Ohio Treasurer of State*A BMV CERTIFICATE OF SELF-INSURANCE, available only to companies or persons who own at least twenty-six motor vehicles.

PROOF OF FINANCIAL RESPONSIBILITY

I affirm that all owners (or lessees of leased vehicle) now have insurance or other FR coverage and will not operate or permit the operation of this motor vehicle without FR coverage; all previous registration fees due have been paid; this plate category is correct; and this vehicle will not be used as a commercial or farm vehicle unless so registered.

By signing below I agree to and attest that all the above is true and accurate,

X SIGNATURE ON FILE

SIGNATURE OF OWNER(S)

DATE

WARNING: APPLICANT GIVING FALSE INFORMATION IS SUBJECT TO PROSECUTION-O.R.C. SEC. 2921.13.
APPLICATION MUST BE SIGNED BY THE OWNER(S) AS NAMED ON CERTIFICATE OF TITLE.

DO NOT DISCARD.

THIS IS YOUR VEHICLE REGISTRATION CERTIFICATE.