



Cover Sheet - PA

Process Date 04/03/2026 Transaction Id 119670974
Titling State PA Military



3GKALTEV7NL108082 2022 GMC
Used Passenger

Vehicle Info

Model: Terrain
Body Type: Sport Utility Vehicle
GVW: 5000
Fuel Type: Gas
Odometer Reading: 9426

Sale Information

Purchase Date: 03/12/2026
Sale Type: Purchase
Taxable Selling Price: 24,580.00
MSRP:
List Price:
Trade in Value: 600.00

Owner Info

Owner 1 Name: BETHANY MEAD
Owner 2 Name:
Registered Address: 2882 WILLOWOOD DR, ERIE, Erie, PA,
16506
Lessor Name:
Address:

Lienholder Info

Lienholder 1 Name: CARVANA LLC
Address: PO BOX 29002, PHOENIX, AZ, 85038
Lienholder 2 Name:
Address:
Lienholder 3 Name:
Address:

Registration Information

Application Type: Title & Registration
Registration Action: New Registration
Registration Period:
Plate Number:
Expiration Date:

Final Destination

Send to: MEAD BETHANY
Phone: (602)574-1310
Mailing Address: 2882 WILLOWOOD DR, ERIE, Erie, PA,
16506

Fee Summary

REGISTRATION FEE	\$48.00
PLATE FEE	\$20.00
LIEN FEE	\$36.00
TITLE FEE	\$72.00
LOCAL USE/ COUNTY FEE	\$5.00
PA STATE TAX (6%)	\$1,474.80
VITU FULL SERVICE FEE	\$135.00
PA STATE VARIABLE FEES	\$20.00
Total	\$1,810.80

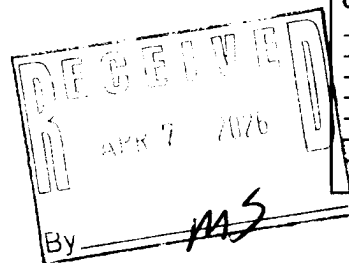
Submitted By:

Lennox McGarrell
Phone: (602)574-1310
Location: Carvana Processing
Address: 1305 W 1st Street, Tempe, Maricopa, AZ,
85281

For Vitu use

Pre-Checker Name

Comments / Resolution:



For your paperwork to be processed faster, please send your transaction documents in the order they are listed on the checklist. Thank you!

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FOLD AND DETACH HERE

(PART B)

FOLD AND DETACH HERE

R319

PENNSYLVANIA DEPARTMENT OF TRANSPORTATION

Control# B 8628671

Place Your
Registration Plate
Number and
Dealer/Business
Partner ID# Sticker
Here

NFP1708
18002555

E X P R E S	7	16	26	E X P R E S

TEMPORARY REGISTRATION PERMIT

15

11

7

MV-1 (7-19)							H. TAX/FEE'S		
A. VEHICLE DESCRIPTION	Make of Vehicle		Vehicle Identification Number (VIN). If tracing required, tape securely to reverse side of this copy.			Body Type (SDN, TK, Bus, etc.)	Model Year	Purchase Price (See Note On Reverse)	
	Gross Vehicle Wt. Rating	Fuel Type: <input type="checkbox"/> Gasoline <input type="checkbox"/> Diesel <input type="checkbox"/> Propane <input type="checkbox"/> Hybrid <input type="checkbox"/> Electric <input type="checkbox"/> Natural Gas <input type="checkbox"/> Other	DIN/Bus. Part. ID/Mechanic #		Authorized Notary Public or Certified Inspection Mechanic (Print Name)			Less Trade-In	
	Check the appropriate block if the vehicle is to be used or was formerly used as a <input type="checkbox"/> Taxi or a <input type="checkbox"/> Police Vehicle			I certify that I have verified that a legible tracing cannot be secured and that the above VIN and vehicle weight information listed here and in Section F are correct.			Sign Here	Taxable Amount	
B. APPLICANT INFORMATION	Last Name (or Full Business Name)		First Name	Middle Name	PA DL/ID# or Bus. ID#	Date of Birth		Sales Tax X 6% (.06), X 7% (.07) or X 8% (.08) ★ (See Note on Reverse.)	
	Co-Purchaser Last Name		First Name	Middle Name	PA DL/ID#	Date of Birth		Less Tax Credit	
	Street			Date Acquired/Purchased		COUNTY CODE		1. Sales Tax Due	
	City		State	Zip Code	Dealer/Bus. Partner ID# (If Applicable)	Refer to county codes listing on reverse side of yellow copy			1A. Exemption Reason Code (must be a number from 1 to 26 or 0)
	NOTE: If a co-purchaser other than your spouse is listed and you want the title to be listed as "Joint Tenants With Right of Survivorship" (On death of one owner, title goes to surviving owner) CHECK HERE <input type="checkbox"/> . Otherwise, the title will be issued as "Tenants in Common" (On death of one owner, interest of deceased owner goes to their heirs or estate.)								
C. MILEAGE INFORMATION	<input type="checkbox"/> Reflects the amount of mileage in excess of its mechanical limits			<input type="checkbox"/> Is NOT the actual mileage. WARNING: Odometer discrepancy.			ODOMETER READING		
	WARNING: Federal and state laws require that you state the mileage in connection with the transfer of ownership. Failure to complete or providing a false statement may result in fines and/or imprisonment.						Tenths	1C. PTA No.	
D. LIEN INFORMATION	If no lien, CHECK <input type="checkbox"/> Is this an ELT? (If yes, FIN required) <input type="checkbox"/> YES <input type="checkbox"/> NO			If no 2nd lien, CHECK <input type="checkbox"/> Is this an ELT? (If yes, FIN required) <input type="checkbox"/> YES <input type="checkbox"/> NO				2. Title Fee	
	1st Lienholder Financial Institution Number			2nd Lienholder Financial Institution Number				3. Lien Fee	
	1st Lienholder Name			2nd Lienholder Name				4. Registration Or Processing Fee	
	Street			Street				Fee Exempt Number as Assigned by the Department	
	City		State	Zip Code	City		State	Zip Code	5. County Fee ♦ (See Note on Reverse)
E. VEHICLE TRADED	Make of Vehicle		Vehicle Identification Number (VIN)			Model Year			
	Body Type (SDN, BUS, TK, etc.)		Condition of Vehicle <input type="checkbox"/> GOOD <input type="checkbox"/> FAIR <input type="checkbox"/> POOR						
	F. ADDITIONAL VEHICLE INFORMATION	Passenger, Taxi/Bus	<input type="checkbox"/> Passenger <input type="checkbox"/> Taxi <input type="checkbox"/> Limousine <input type="checkbox"/> School Bus <input type="checkbox"/> Mass Transit <input type="checkbox"/> Other Bus			Seating Capacity			
		Motorcycle, Motor Driven Cycle, Moped	Cylinder Capacity 50cc or Less <input type="checkbox"/> YES <input type="checkbox"/> NO	Brake Horsepower <input type="checkbox"/> 1.5 or Less <input type="checkbox"/> 1.6 to 5.0 <input type="checkbox"/> Over 5.0					
			Operable Pedals <input type="checkbox"/> YES <input type="checkbox"/> NO	Max Design Speed 25 MPH or Less <input type="checkbox"/> YES <input type="checkbox"/> NO					
	Motor Home	Automatic Transmission <input type="checkbox"/> YES <input type="checkbox"/> NO	Designed/Altered for Road Use <input type="checkbox"/> YES <input type="checkbox"/> NO						
	Trailer & Vehicles Below	Chassis Mfr:	Body Make:						
Truck, Truck Tractor	Number of Axles:	Req. Registered Gross Wt. (Including Load)							
Sum of GAWR's:		Unladen Wt. (Empty)							
Req. Registered Gross Combination Wt.		Gross Combination Wt. Rating							
G. APPLICATION FOR REGISTRATION	Original Registration Plate - CHECK ONE							10. TOTAL PAID (ADD 1 THRU 8) Send One Check In This Amount →	
	<input type="checkbox"/> Registration Plate to be Issued by Department (Proof of insurance must be attached.)			<input type="checkbox"/> Transfer of Previously Issued Registration Plate <input type="checkbox"/> Transfer & Replacement of Registration Plate					
	<input type="checkbox"/> Exchange Registration Plate to be Issued by Department			<input type="checkbox"/> Transfer & Renewal of Registration Plate					
	<input checked="" type="checkbox"/> Temporary Registration Plate Issued by Full Agent (NOTE: This registration plate will expire 90 days from date of issuance.)			Registration Plate No.		Reason for Replacement			
				Expires Month Year		<input type="checkbox"/> Lost <input type="checkbox"/> Defaced <input type="checkbox"/> Stolen <input type="checkbox"/> Never Received (Lost in Mail)			
				Transferred From Title No.		VIN			
				Signature of Person From Whom Registration Plate is Being Transferred (If Other Than Applicant)			Relationship to Applicant		
				Temp. Registration Plate No.					
	Insurance Company Name		NAIC No.	Policy No. (Or Attach Binder)		Policy Effective Date	Policy Expiration Date		
	ISSUING AGENT INFORMATION	I certify that on month ___ day ___ year ___ I have checked to determine that the vehicle is insured and issued temporary registration to the above applicant, in compliance with all applicable provisions of the Vehicle Code and Department regulations.			Issuing Agent (Print Name)		Agent No.		
			Issuing Agent Signature			Telephone No.			
I. NOTARIZATION	Subscribed And Sworn To Before Me: Month Day Year			I/We certify that I/we have examined and signed this application after its completion. I/We further certify that all statements herein are TRUE and CORRECT and make application for certificate of title for the vehicle described in Section A. If any exemption is claimed, I/we certify that the purchaser is authorized to claim this exemption. I/We acknowledge that I/we may lose my/our operating privilege(s) or vehicle registration for failure to maintain financial responsibility on the currently registered vehicle for the period of registration. I/We acknowledge that I/we may be subject to a fine not exceeding \$5,000 and imprisonment of not more than two years for any false statement that I/we make on this application.					
	SIGNATURE OF PERSON ADMINISTERING OATH								
	S T A M P			Commonwealth of Pennsylvania - Notary Seal Angelique Santiago, Notary Public Bucks County My Commission Expires August 23, 2026 Commission Number 1421599			Signature of Purchaser or Authorized Signer		
				Signature of Co-Purchaser/Title of Authorized Signer			Telephone No.		
								MESSANGER NO.	

Record #: 89790

For:
BETHANY MICHELLE MEAD
2882 WILLOWOOD DR
ERIE, PA 16506

Date: 04/17/2026
Time: 12:09 PM

Clerks Initials: km

Offline Transaction	Agency Fees
Title Number	Commonwealth of PA - Temp/Trans 1635.80
VIN 3GKALTEV7NL108082	
Year 2022	
Make GMC	
Odometer	
Tag Number NFP1708	
Comments: VITU INTERSTATE - CARVANA	
VEHICLE PREVIOUSLY IN PA, PENNDOT'S RECORD SHOWS 'CANCELLED RECORD'. TRANSACTION WILL NEED TO BE PROCESSED BY PENNDOT. PINK SLIP GOOD AS TEMP FOR 90 DAYS.	
	Agency amount paid 1635.80
	Payment Type CHECK(0)
	Check to state 0 0.00
	Surcharge 0.00
	Total Agency Fees 1635.80
	Service Fees
	Messenger Fee 30.00
	Notary Fee 0.00
	Copy/Fax Fee 0.00
	Plate Fee 20.00
	Admin/Clerical Fee 0.00
	Payment Type CHECK(0)
	Total Service Fee 50.00
	Surcharge 0.00
Sworn and subscribed to before me on 17-Apr-2026.	Total Surcharge 0.00
	Total Amount Due 1685.80
	Amount Tendered 1685.80
	Change Due 0.00
	No Refunds on Service or Notary fees. We are not responsible for the work the State fails to process.
Notary Seal	

Your Direct Connection with PENNDOT, "Online", State & Service Fees Apply