

Business Entity Bidder Registration
******Please print and verify the information provided.******

Purchaser's Information

*Business Name: _____

*Owner/ Managing Member: _____

*Mailing Address: _____

City: _____ State: _____ Zip Code: _____

*Phone Number: Area Code _____ Number _____

*Email: _____

Please mark "X" for one of the following options:

* _____ Please mail the certificates to the address provided above.

* _____ Certificates will be picked up from the Redemption Department. ****Photo I.D. required****

Person to pick up certificates for the business _____

Bidder's Information

*Bidder's Last Name: _____ First Name: _____

*Phone Number: Area Code _____ Number _____

Special Instructions

* Required Fields

*Please sign for receipt of the tax sale rules and procedures.

X _____