

## **BUYER AUCTION REGISTRATION FORM**

Name:	
Company Name (if any)	
Address:	
City:	State: Zip:
E-mail:	
Day Phone:	Evening Phone:
Fax #:	Cell Phone:
Deposit Type:	
I have read the Terms & C	Conditions of the Auction and agree to them.
Comments:	
	is sold AS-IS WHERE-IS with no warranty expressed or erchantability of the Bill of Sale.
Bill of Sale will be transfer liens, back taxes or encuml	red subject to restrictions of record, free and clear of any brances.
Signed:	
Signed:	
Date:	
My/Our deposit of: \$	has been paid and I/We
understand and agree, Aud	ctioneer, as part of the deposit will retain it towards the /We are the high bidder(s) and Seller confirms the bid.
Form of deposit:	
Bidder Number:	