



**AUCTION ABSENTEE BID FORM**

**Date:** \_\_\_\_\_

**Name of Bidder:**

\_\_\_\_\_

**Contact Person:**

\_\_\_\_\_

**Address:**

\_\_\_\_\_

\_\_\_\_\_

**Telephone Number:** \_\_\_\_\_

**Fax Number:** \_\_\_\_\_ **e-mail address:** \_\_\_\_\_

**The undersigned (“Bidder”) hereby submits a bid (“Bid”) to Seller to purchase: \_\_\_\_\_ on the following terms and conditions:**

- 1. Purchase Price (the “Purchase Price”) is \$ \_\_\_\_\_**
- 2.**

**Note: Bidder acknowledges and understands that a FIVE percent (5%) Buyer’s premium will be added to the Purchase Price, to be paid by Buyer at closing.**

- 3. State the name and address of the Cooperating Broker (if none, write “none”).**

**Name:**

\_\_\_\_\_

**Address:**

\_\_\_\_\_

\_\_\_\_\_

**This Bid is made pursuant to the Terms and Conditions of Sale stated in the Due Diligence Package as amended and supplemented. Bidder is submitting, with this bid all of the other documents required under the Terms and Conditions.**

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**IN WITNESS WHEREOF**, the undersigned Bidder has executed this Bid on the date set forth above.

\_\_\_\_\_  
\_\_\_\_\_  
**Name of Bidder** (Please print or type)\_\_\_\_\_ **Date**\_\_\_\_\_

**By:** \_\_\_\_\_

**Name:** \_\_\_\_\_

**Title:** \_\_\_\_\_

***\*\*Absentee Bid Forms must be received by Marine Auction Exchange, 48 hours prior to the auction • Fax Number: 630-477-0324 Phone : 800-530-4561***

[www.marineauctionexchange.com](http://www.marineauctionexchange.com)

Marine Auction Exchange LLC.

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