

BIDDER # _____

Please Print Clearly

COMPANY NAME: _____

INDIVIDUAL NAME: _____

STREET ADDRESS/MAILING ADDRESS: _____

CITY, STATE, ZIP: _____

EMAIL ADDRESS: _____

CELL PHONE: _____

HOME PHONE: _____

SOCIAL SECURITY#: _____

DRIVER LICENSE#: _____ **STATE** _____

AMOUNT YOU INTEND TO SPEND: \$ _____

FORM OF PAYMENT: CASH _____ **CHECK** _____ **WIRE** _____

(BANK LETTER OF GUARANTEE REQUIRED FOR CHECKS)

BANK NAME: _____

CONTACT PERSON: _____

TITLE HANDLING METHODS: HOLD AT AUCTION _____ **MAIL TO ADDRESS PROVIDED** _____

*******ALL PAYMENTS BY CHECK TITLES WILL BE HELD 7 DAYS** _____

*******BUYERS FEES APPLIES TO ALL PURCHASES, SEE ATTACHED FEES** _____

*******PAYMENT IS EXPECTED IN FULL AT TIME OF PURCHASES** _____

SIGNATURE THAT YOU AGREE TO ALL TERMS AND AGREEMENTS AT ADESA FARGO

