

CATALOG BID FORM – 28% premium

S & S AUCTION, INC.
FAX 856-467-5578
PHONE 856-467-3778
EMAIL [info@ssauction.com](mailto:info:ssauction.com)

Buyer no. _____

Acct. no. _____

Name _____ Sale date _____

Address _____ Phone _____

City _____ State _____ Zip _____ Country _____

Tax exempt? () YES () NO If yes, you **must** provide a copy of your sales tax certificate.

Lot/ID #	Item Description	ABSENTEE Minimum opening bid \$100	PHONE
		\$	<input type="radio"/>
		\$	<input type="radio"/>
		\$	<input type="radio"/>
		\$	<input type="radio"/>
		\$	<input type="radio"/>

Primary Phone # _____ **Secondary Phone #** _____

CONDITIONS:

- 1) **CATALOG BUYER'S PREMIUM.** Cataloged Buyer's premium of **28%** will be added to all purchases.
- 2) **PAYMENT.** All sales must be paid by credit card. Payment information must be provided to us prior to the sale in order for your bid to be executed. **NO EXCEPTIONS. SALES TAX.** New Jersey sales tax of **6.625 %** will be added to all purchases **unless** a copy of Sales Tax Certificate is filed with the office **prior** to bidding.
- 3) **ALL SALES ARE FINAL.** All merchandise sold as-is, where-is. The bidder is responsible for inspection of merchandise before placing a bid. If the bidder cannot personally inspect merchandise, the bidder may request a condition report by phone no later than noon the day before the sale. Auction will report conditions to the best of our ability, but the bidder **still accepts all responsibility for the condition of merchandise.**
- 4) **SHIPPING.** Successful bidder is responsible for making pick-up or shipping arrangements.

I have read and understand all the above conditions.

Signature _____ **Date** _____