

SALINE COUNTY  
REGISTRATION INFORMATION

**NAME TO BE LISTED ON TAX SALE CERTIFICATE: (INVESTOR)**

\_\_\_\_\_  
(Please Print) (Must be the same name as on W-9 Form)

ADDRESS ON CERTIFICATE WILL BE THE SAME AS ON W-9 FORM

TAX ID # or SOCIAL SECURITY # \_\_\_\_\_

PRIMARY CONTACT: \_\_\_\_\_

PHONE #1: \_\_\_\_\_

PHONE #2: \_\_\_\_\_

FAX #: \_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_

UPON REDEMPTION, WHAT IS THE PREFERRED METHOD OF NOTIFICATION?  
(Please circle your choice)

CERTIFIED MAIL    E-MAIL    FAX    PHONE #1    PHONE #2

IS INVESTOR OF FOREIGN STATUS? (Please circle)    YES    NO

IF YES, PROOF MUST BE PROVIDED THAT INVESTOR MAINTAINS A REGISTERED AGENT FOR SERVICE OF PROCESS WITH THE SECRETARY OF STATE AND COMPLETE A W-8BEN FORM. PLEASE CONTACT THE TREASURER FOR THIS FORM.

ALL TAX LIENS OBTAINED BY OR FOR THE ABOVE-NAMED INVESTOR, ARE BEING BOUGHT AT THE INVESTOR'S RISK AND IT IS HIS/HER/THEIR RESPONSIBILITY TO RESEARCH ANY AND ALL RECORDS PERTAINING TO SUCH LANDS AND LOTS. ANY COMPLICATIONS RESULTING FROM SUCH TAX PURCHASE(S) SHALL BE THE RESPONSIBILITY OF THE INVESTOR.

I AM IN RECEIPT OF THE 2017 PUBLIC TAX SALE INSTRUCTIONS. (Please circle) YES NO

I UNDERSTAND IT IS MY RESPONSIBILITY AS INVESTOR, TO EDUCATE MYSELF OR MY REPRESENTATIVE AS TO THE SALE PROCESS AND RULES OF THE SALE.

**NAME OF INDIVIDUAL WHO WILL BE PRESENT TO BID AND REPRESENT THE ABOVE-NAMED INVESTOR:**

\_\_\_\_\_  
(Please Print Bidder's Name and Title) (President, Owner, Self, Representative, etc.)

IS BIDDER AT LEAST 19 YEARS OF AGE OR OLDER? (Please circle) YES NO

**IDENTIFICATION OF BIDDER WILL BE REQUIRED.**  
**ANY BIDDER UNDER 19 YEARS OF AGE WILL NOT BE ALLOWED TO BID.**

Dated this \_\_\_\_ day of \_\_\_\_\_, 2017.

\_\_\_\_\_  
Signature and Title of Investor (Pres. Owner, Self, etc.)