

CATALOGUE BID FORM – 28% premium

S & S AUCTION, INC.
 FAX 856-467-5578
 PHONE 856-467-3778
 EMAIL jane@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.

Form of payment. (Required in advance of auction)

Credit Card info: () AMEX () Visa () Mastercard () Discover

Card no. _____ Exp. _____

Lot/ID #	Item Description	ABSENTEE Minimum opening bid \$100	PHONE Minimum opening bid \$500
		\$	○
		\$	○
		\$	○
		\$	○
		\$	○

Primary Phone # _____ Secondary Phone # _____

CONDITIONS:

- 1) **CATALOGUE BUYER'S PREMIUM.** Cataloged Buyer's premium of **28%** will be added to all purchases.
- 2) **PAYMENT.** All purchases **must be secured and paid for by credit card. All purchases will be charged to buyer's credit card immediately after the auction. 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. Bidder is responsible for inspection of merchandise before placing bid. If bidder cannot personally inspect merchandise, bidder may request a condition report by phone. Auction will report condition to the best of our ability but **bidder still accepts all responsibility for condition of merchandise.**
- 4) **SHIPPING.** Successful bidder is responsible for making pick-up or shipping arrangements. **If you have not picked up your purchased items here at S & S Auction by the Friday following the sale.**

I have read and understand all above conditions.

Signature _____ Date _____

() Please mail my invoice () I will pick up my invoice (will be automatically mailed after 12 days)