

NAME _____

ADDRESS _____

I.D. NUMBER (Complete only one)

____-____-____-____-____-____
Social Security Number
(Individual's Name on C.P.)

____-____-____-____-____-____
Social Security Number
(Co-Owner, if applicable)

____-____-____-____-____-____
Federal Employer I.D. Number
(Business Name on C.P.)

****above is required for 1099-INT****

HOME PHONE ____-____-____-____-____-____

WORK PHONE ____-____-____-____-____-____

OWNERSHIP TITLE CODE: _____ RELATIONSHIP: _____
(If Applicable)

EMAIL ADDRESS: _____

OWNERSHIP TITLE CODES

- | | |
|--|----------------------------|
| 1. Individual | 8. As Joint Tenants/WROS |
| A. Unmarried man or woman | (Individual refer to 1) |
| B. Widow or widower | 9. Married S&S/Unmarried |
| C. Divorced man or woman | JT/WROS |
| 2. Husband and Wife, as JT/WROS* | 10. Undivided 1/2 Interest |
| 3. Married person as sole and | 11. Corporation |
| separate property* | 12. Partnership |
| 4. As tenants in common | 13. LLC |
| 5. Revocable Trust | |
| 6. Irrevocable Trust | |
| 7. Husband & Wife, not as tenants in common and not as joint tenancy, but as community property with right of survivorship | |

Dated: _____

Signature

Co-Owner Signature
(If Applicable)

Title (For business only)

* Spouse must sign

**BIDDER NUMBER APPLICATION
INSTRUCTIONS**

1. **NAME**
List last name first, first name, middle initial. Indicate the name(s) as you want the certificate of purchase to read.
2. **BUSINESS NAME**
Indicate the name of the business. Sole proprietor: furnish your individual name, and either your SSN or EIN. Also indicate that you are "Doing Business AS" (DBA).
3. **ADDRESS**
Please indicate your complete mailing address.
4. **TAXPAYER IDENTIFICATION NUMBER**
Be sure to use the appropriate federal employer identification number or your individual social security number.
5. **HOME PHONE, WORK PHONE**
Indicate both phone numbers, in case we must contact you regarding any business with the treasurer's office.
6. **OWNERSHIP TITLE CODE**
Select the ownership code from the list.
7. **EMAIL ADDRESS**
Only one email address can be entered into our program.
8. **DATE AND SIGNATURE.**
Date and sign the form. If more than one name is to be on the certificate of purchase, each person must sign. Return form to the Treasurer's Office.