

FOR OFFICE USE ONLY	
Bidder Number:	
Town:	
Parcel Id:	
Former Owner Last Name:	

Please complete the following form and bring it with you to the registration desk. It must be clear and legible. The information requested is needed to complete the legal requirements regarding your deed. (If you are an unsuccessful bidder, this form will be destroyed.)

PLEASE PRINT

Name: _____

Address: _____

Phone Number: _____

Name or Names "EXACTLY" How It Is To Be Placed On The Deed:

Social Security Numbers of Each Person To Be Listed On The Deed:

Name: _____	Number: _____
Name: _____	Number: _____
Name: _____	Number: _____
Name: _____	Number: _____
Name: _____	Number: _____