

Tel: 01454 632332 Fax: 01454 633160

Email: bidcity@btconnect.com

Commission E	Bid Form

Bid Number (office use only)

PAYMENT NO LATER THAN 12NOON THURSDAY FOLLOWING THE SALE

- Please bid on my behalf for the lot(s) shown below. The bids will be executed as cheaply as is permitted by other bids or reserves.
- I understand ALL bids are subject to buyer's premium as stated in the sale catalogue
- 'Buy' bids are not accepted. The limit you leave should be the maximum to which you would bid if you were to attend the auction, excluding VAT where applicable or any other additional charges as stipulated in the catalogue.
- This form should contain bids for one auction only.
- This form must be received no later than 4:30pm on the day prior to the auction. Bids received after that time may not be acted upon
- A valid email address and telephone number are compulsory. We cannot accept commission bids without them.
- Please refer to Conditions of Sale on the website or in the auction room for further information relating to instructions to City Auctioneering Ltd to execute absentee bids on your behalf. City Auctioneering Ltd will endeavour to execute absentee bids on your behalf but are not liable for any errors.

Or Invoice Name

 By submitting this form I agree that I have read the Terms & Conditions of Sale and agree to comply with such.

Name		OI IIIVOICE	Name
Address:			
Post Code:	Te	lephone/Mobile No:	:
E-mail:			
We regret that videntification o		entee bids without o	card payment details &
Card Details: (s	see catalogue for char	ges)	
Card Type		Card No:	
Valid From	Expiry Date	Issue No	Security Code
payment by the Falternative paym following the aud I understand that as un-viewed will responsibility an	Friday at 3:30pm following ent method and this pay ction. It if successful, I underta I all faults. I understand	ng the auction. I under ment must be received ke to pay for the lot(s that on the fall of the on as possible and I w	led above if they do not receive rstand that I can pay by cash as an ed no later than Friday 3:30pm) and I am happy to accept the lot(s) hammer, the goods are my will not hold the auctioneers auctioneers premises
Signed:		Date:	



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Name:	Or Invoice Name:
Marric.	Of invoice name.

Lot No	Description	Bid Limit	Viewed (please tick)