CHRISTIAN COUNTY

Bidder Registration Form

Delinquent Real Estate Taxes 2022 and
Delinquent Mobile Home Taxes 2023 and
All Prior Years
Sale Commences October 24, 2023
at 10:00 A.M.
2nd Floor Board Room
Registration must be received by October 10, 2023

A \$100.00 deposit fee must accompany this application for each company you are registering. This \$100.00 deposit fee will be applied toward your first purchase. If a registrant cannot participate in the sale, then he or she must notify the Tax Collector no later than 5 days prior to the sale, with a name of the substitute person who will participate in the sale. If the registrant attends the sale, and attempts but fails to purchase any parcel offered at the sale, then the deposit is refunded in full. Those registrants that do not notify the Tax Collector 5 business days prior to the sale or do not show up at the actual sale will forfeit the \$100.00 deposit fee.

An additional fee of \$80.00 will be charged to the buyers interested in obtaining a delinquent tax sale list. Upon completing this application and making payment to the Christian County Collector, Joseph E. Meyers & Associates will contact you via e-mail for the format of the list requested.

All buyers should be thoroughly familiar with Tax Sale procedures outlined by the Illinois Compiled Statutes. Neither the Treasurer nor her staff will provide legal advice or council. Please contact a tax attorney if you require such service.

| Bidder attending sale: | | | _ | | |
|---|------------------------|---|---------------|-------------------------------------|---------|
| Bidding on behalf of: | (Name | certificate will be issued in) | _ | | |
| Mailing address: | | | _ | | |
| SSN or FEIN #: | | | _ | | |
| Phone: | (_) | Fax: () | _ | | |
| E-Mail Address: | | | _ | | |
| understand that this completed registrati | on form must be receiv | of the Code of Civil Procedure, I hereby cerved by the Christian County Treasurer's office ed by the aforementioned date and that delay | by 4:00 P.M., | , October 10, 2023. I understand th | at I wi |
| Date | | Signature | | | |
| Make checks payable to and mai | il to: | FOR OFFICE USE ONLY | , | | |
| Tax Sale Registration | | BUYER NUMBER | | | |

Deposit Fee:____
List Fee:____
Total Fee:____
Date Paid:

P.O. Box 199

Taylorville, IL 62568-0199