



Delinquent Tax Division
4045 Bridge View Drive
North Charleston, SC 29405
(843) 202-6570
FAX: (843) 202-6066

CHARLESTON COUNTY NOVEMBER 5, 2018 TAX SALE BIDDER REGISTRATION FORM

(Please Print)

Name: _____
(Name and address on the tax deed if you get the property after the year redemption period)

Mailing Address: _____

City: _____ State _____ Zip _____

Email: _____

Bidder Agent's Name (if applicable) _____

Home Phone: _____ Other Phone: _____ Work Cell

Signature: _____
By signing you agree to the terms within the November 5, 2018 Delinquent Tax Sale Bidder Information Sheet.

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BIDDER INSTRUCTIONS

ONLY ONE MAILING ADDRESS PER BIDDER CAN BE ACCEPTED. IF YOU REPRESENT MORE THAN ONE BIDDER THEN EACH BIDDER MUST HAVE ITS OWN BIDDER NUMBER UNDER EACH NAME AND EACH PAYS THE \$10 FEE. IF A CHANGE OF ADDRESS IS NECESSARY, PLEASE NOTIFY THIS OFFICE IMMEDIATELY IN WRITING.

PLEASE DO NOT SEND CASH BY MAIL

PLEASE SUBMIT YOUR **NON-REFUNDABLE \$10 BIDDER REGISTRATION FEE BY PERSONAL CHECK OR MONEY ORDER MADE OUT TO CHARLESTON COUNTY DELINQUENT TAX AND A COPY OF YOUR VALID GOVERNMENT ISSUED PHOTO ID WITH THIS BIDDER REGISTRATION FORM AND MAIL TO:**

**ATTN: BIDDER REGISTRATION
REVENUE COLLECTIONS-DELINQUENT TAX
4045 BRIDGE VIEW DR STE B110
NORTH CHARLESTON, SC 29405-7464**

V. 09/27/18