Rose's Antiques

SALE NO.

ABSENTEE BIDDING FORM

HAVE YOU REGISTERED WITH US BEFORE?

☐ YES ☐ NO

*If you have NOT registered with us before, you must complete this form in full, including the credit card section for verification purposes. Please then present it with photo ID for processing.

FOR OFFICE USE ONLY

ID TYPE: □ DRIVING LICENSE □ CREDIT CARD □ PASSPORT

OTHERS: _____

CHECKED BY DATE

TITLE: _____ FIRST (GIVEN) NAME: _____ LAST NAME: _____

ADDRESS: _____

CITY: _____ STATE _____ POSTAL CODE _____

PRIMARY PHONE NO. : _____ ALTERNATIVE PHONE NO: _____

FAX: _____ E-MAIL: _____

I request Rose's Antiques without legal obligation of any kind, to bid on my behalf at the above sale for the following lot(s) up to the prices mentioned below. I accept that these bids shall be treated as offers made in accordance with the Conditions of Sale as printed in the catalogue. I understand that I will be subject to a buyer's premium of 25% of the hammer price of each lot in the event of a successful bid. (Please refer to important information for buyers printed in the catalogue).

LOT NO.	DESCRIPTION	SECURITY BID (opt)		LOT NO.	DESCRIPTION	SECURITY BID (opt)

By signing this form you agree to be bound by our conditions of sale as printed in your sale catalogue and/or as posted in the saleroom. The conditions of sale should be read in conjunction with the important information for purchases as detailed in your sale catalogue, which state the charges payable by you pertaining to purchases you made, including other details related to buying at auction. Please note item imperfections are not stated in your sale catalogue. It is the responsibility of the buyer to satisfy themselves prior to auction as to the condition of the lot before placing a bid. Telephone bids should be submitted at least 24 hours prior to the sale.

SIGNATURE: _____ DATE: _____

CREDIT OR DEBIT CARD PAYMENT

By signing below, you authorize us to debit all charges due, together with any additional costs associated with your purchase, if your account has not been settled by alternative means within 7 days of the sale date. Please note an additional credit card surcharge of _____ will be applied to VISA and MASTERCARD payments, _____ to DISCOVER and _____ to AMEX.

CARD TYPE: □ VISA □ MASTERCARD □ AMEX □ DISCOVER

CARDHOLDER NAME: _____

CARD NUMBER: _____

BILLING ADDRESS: □ Check box if same as above.