TELEPHONE BID FORM

mossgreen

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In order to register to bid with Mossgreen, please complete this form and fax to +61 3 9508 8899 or scan and email to accounts@mossgreen.com.au

NAME
(please print clearly)

EMAIL ADDRESS
(for invoice & correspondence purposes)

INVOICE ADDRESS
(PO Box not sufficient)

CITY STATE POST CODE

COUNTRY

TELEPHONE NUMBER(S)
(in order of preference) 1. 2.

☐ Please tick here if you **do not** want to receive special invitations and online auction catalogues by email.

BIDDER #
(Office Use Only)

AUCTION # & TITLE
(Please PRINT Auction # & title here)

We value your privacy and will not disclose your details to any third party. You may request that your details are removed from our database at any time.

Please scan or fax a copy of Photo ID, either a drivers licence or passport if you have not previously purchased with Mossgreen.

Lot Number (in order)	**Catalogue Description**	**Cover Bid –** Not including buyer's premium or GST (where applicable)
		A$
		A$
		A$
		A$
		A$
		A$
		A$
		A$
		A$
		A$
		A$

I authorise Mossgreen to register bids on a per lot basis up to the maximum price I have indicated for each lot. I will not hold Mossgreen responsible for any errors that occur.

I understand that if my bid is successful, the purchase price will be the sum of my final bid plus the buyer's premium of 17.5% (Motor Cars, Motorcycles & Vehicles Registration Plates only) and 24% (all other lots) of the final bid price plus any GST payable on the hammer price, as indicated in the catalogue. GST will be charged on the buyer's premium. If the Resale Royalty Scheme is applicable 5% will be charged on the hammer price only. The Resale Royalty Scheme is denoted by the § symbol in the catalogue and online at www.mossgreen.com.au

I have read and accepted Mossgreen's terms and conditions as printed in the catalogue and online at www.mossgreen.com.au
Bids will not be processed unless this form is signed.

SIGNATURE DATE

Please tick your desired shipping method

☐ I will collect my purchase/s or arrange shipping
☐ I wish to be contacted regarding shipping

Please tick your payment type

☐ Direct Deposit ☐ Cheque ☐ Cash
☐ Credit Card (Visa/Mastercard/AMEX only)

CARDHOLDER'S NAME

CARD NUMBER

CARD EXPIRY DATE M M / Y Y CCV NUMBER *(the last three digits above your signature on the reverse of your card)*

SIGNATURE OF CARDHOLDER

Please Note: Credit Card payments will be accepted for Visa and Mastercard with a 1.3% surcharge and American Express with a 2.85% surcharge.