

Name(s) as it should appear on Deed or Bill of Sale

Street / P.O. Box

City / State / Zip

Phone _____ E-mail Address _____

Contact Person (for company, corp, or business)

Officers, Owners, Members or Managers of the Company

Office use only
Bidder No.

\$20.00
registration fee

AFFIDAVIT OF BIDDER-TAX SALE

STATE OF

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having been duly sworn according to law depose and say as follows:

1, _____

1. I am over the age of eighteen (18).
2. Pursuant to Section 619.1 of the Real Estate Tax Sale Law, 72 P.S. Section 5860.619.1, I hereby certify to the Butler County Tax Claim Bureau that I or the entity I represent are not delinquent in paying real estate taxes to any of the taxing districts where the property(s) that I am bidding on is located, and that I or the entity that I represent have no municipal utility bills that are more than one year outstanding.
3. Pursuant to Section 618 of the Real Estate Tax Sale Law, 72 P.S. Section 5860.618, I hereby certify that I am not the owner nor the entity that I represent is not the owner of the property(s) that I will be bidding on. I further certify that I am not a partner or shareholder of the owner of the property(s) I am bidding on, nor am I in any of the following legal relationships with the owner; trust, partnership, corporation or any other business association.
4. Pursuant to Section 601 (d) of the Real Estate Tax Sale Law, 72 P.S. Section 5860.601 (d), I hereby certify that I have not had a landlord license revoked in any municipality within the County of Butler, and I further certify that I am not bidding for, or acting as an agent for a person whose landlord license has been so revoked.
5. I received a copy of the Terms and Conditions for the Butler County Tax Claim Bureau Tax Sale. I understand it is my obligation as a responsible bidder to read and abide by said Terms and Conditions.

The undersigned verifies that he/she has read this Affidavit and that the facts contained therein are true and correct to the best of his/her information and belief. This verification is made subject to the penalties of 18 PA C.S. Section 4904, relating to unsworn falsification to authorities.

Signature _____ Date _____

Before me, the undersigned notary public, this day, personally appeared

to me known, who being duly sworn according to law, deposes the aforesaid.

the aforesaid,
Subscribed and sworn to before me

Notary Public