**MILLER COUNTY COLLECTOR OF REVENUE**

**Business Tax Sale Registration**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Name:** |  |  |  |  |  | **Phone:** |  |  |
| **Street Address:** |  |  |  |  |  |  |  |
| **City:** |  |  | **State:** | **ZIP:** |  | **FIN:** |  |  |
| **Name as it will appear on the Deed:** |  |  |  |  |  |
| **List the names and address of any partnership, joint venture, LLC or LLP member(s)** |
| **Name** | **Address/Telephone** |
|   |   |   |   |   |   |   |   |   |
|   |   |   |   |   |   |   |   |   |
|   |   |   |   |   |   |   |   |   |
|   |   |   |   |   |   |   |   |   |
|   |   |   |   |   |   |   |   |   |
|   |   |   |   |   |   |   |   |   |
|   |   |   |   |   |   |   |   |   |
|   |   |   |   |   |   |   |   |   |
| **List the authorized bidding agent(s) on behalf of the partnership, joint venture, LLC or LLP.  *Documentation authorizing agent(s) to bid on behalf of said individual or entity is required.*** |
| **Name** | **Address/Telephone** |
|   |   |   |   |   |   |   |   |   |
|   |   |   |   |   |   |   |   |   |
| **CURRENTLY OWNED PROPERTY:** List all Counties in Missouri where entity **owns** personal or real property. |
|   |   |   |   |   |   |   |   |   |
|   |   |   |   |   |   |   |   |   |

**Application to bid at the August 22, 2022 Tax Certificate Sale**

**(Affidavit Pursuant to RSMO 140.190)**

1. This business in located and does business in the State of Missouri or have appointed some resident of Miller County to act as my agent, and I consent to service of process on such agent, thereby giving such court jurisdiction to try and determine any suit growing out of or connected with this sale of tax liens.
2. If I make the highest bid on a property offered at this sale, I will submit payment to the Miller County Collector **NO LATER THAN 2:00 P.M.** on the date of the sale. Payment will be in the form of **CASH OR CASHIER’S CHECK**. I further understand that failure to pay may result in suit filed by the prosecuting attorney to recover 25% of the bid amount as penalty (RSMO 140.280).
3. I understand that if the business does not pay the 2022 taxes on or before December 31, 2022 any tax certificate purchased at said sale may be forfeit. The business will lose the tax amount bid, but any surplus bid paid will be refunded to me.
4. I understand the Collector’s office follows RSMO 140. The business and owners are responsible for understanding the contents of this law. The Collector’s office cannot interpret the statutes for me.
5. I certify that the prospective business and its owners owe no delinquent taxes, whether real or personal, to any taxing units within the State of Missouri, nor am I acting on behalf of any person that has been disqualified from participation in the Miller County tax sale for any reason.
6. By signing below, I further certify that the information provided on this Tax Sale Business Registration Form is true and correct. I acknowledge and understand that furnishing false information on this form will invalidate any certificates or purchases or Collector’s Deeds subsequently awarded and that I will in turn forfeit my bid without refund.
7. If I have appointed an Agent, pursuant to paragraph 1 above, my designated agent also meets all the requirements of paragraph 5 and 6 above.
8. I, the business, or my appointed Agent, am bidding on the behalf of the business (or in the name of the bidder stated above), to own, possess, and profit from the properties I seek to purchase.

And further affiant saith not.

Printed Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Title:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

In witness hereof the undersigned has executed this Affidavit and had affixed his/her hand this \_\_\_\_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_\_.

Seal: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Notary Public