

**BERKS COUNTY TAX CLAIM BUREAU**  
**REPOSITORY BID FORM**

I, \_\_\_\_\_ (PRINT NAME OF BIDDER), hereby submit a sealed bid for the below-referenced property:

<b>SALE #</b>	
<b>PROPERTY LOCATION</b>	
<b>MUNICIPALITY</b>	
<b>PARCEL #</b>	

Proposed Use of Property: \_\_\_\_\_

<b>BID AMOUNT</b>	\$	
<b>TRANSFER TAX</b>	\$	
<b>RECORDING FEE</b>	\$	<b>82.00</b>
<b>DEED PREP FEE</b>	\$	<b>25.00</b>
<b>TOTAL DUE</b>	\$	

I have enclosed a CERTIFIED CHECK OR MONEY ORDER, for the "Total Due" amount listed above.

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**BIDDER SIGNATURE**

**DATE**

Please provide your contact information below:

<b>NAME</b>
<b>STREET ADDRESS</b>
<b>CITY, STATE, ZIP</b>
<b>PHONE NUMBER</b>
<b>EMAIL ADDRESS</b>

(\*If bidding as a business, please include corporate documents.)

# **AFFIDAVIT OF BIDDER**

I, \_\_\_\_\_ (PRINT NAME OF BIDDER), having been duly sworn according to law  
depose and say as follows:

- I am over the age of 18.
- Pursuant to Section 619.1 of the Real Estate Sale Law, 72 P.S. Section 5860.619.1, I hereby certify to the Berks County Tax Claim Bureau that I am not delinquent in paying real estate taxes to any of the taxing districts where the property is located, and that I have no municipal utility bills that are more than one year outstanding.
- Pursuant to Section 618 of the Real Estate Tax Sale Law, 72 P.S. Section 5860.618, I hereby certify that I was not the owner of the property immediately prior to the sale thereof by the Berks County Tax Claim Bureau. I further certify that I am not a partner or a shareholder of the owner of the property, nor am I in any of the following legal relationships with the owner; trust, partnership, corporation or any other business association.
- 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 Berks, 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.

**SIGNATURE**

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**PRINT NAME**

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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 falsifications to authorities.

**SIGNATURE**

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**PRINT NAME**

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