

OFFICE OF THE  
**CRAWFORD COUNTY TAX CLAIM BUREAU**  
903 DIAMOND PARK  
MEADVILLE, PENNSYLVANIA 16335  
PHONE 814/333-7332 FAX 814/333-2025

**CHRISTINE L. KRZYSIAK**  
Director

**KATIE ECKSTEIN**  
Deputy Director

**Real Estate Tax Sale  
BIDDER REGISTRATION FORM  
Business**

**BIDDER #** \_\_\_\_\_

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

Business Name: \_\_\_\_\_ Business Phone # \_\_\_\_\_

Business Address: \_\_\_\_\_  
\_\_\_\_\_

Name(s) of all officers:  
(Attach additional list if needed)

Note: All persons listed must complete an AFFIDAVIT OF BIDDER FORM and supply  
copy of Photo ID.

\_\_\_\_\_ Telephone # \_\_\_\_\_ Photo ID# \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_ Telephone # \_\_\_\_\_ Photo ID# \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_ Telephone # \_\_\_\_\_ Photo ID# \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_

PROPERTY TO BE DEEDED TO: \_\_\_\_\_

Address (This will be the address of record for the property)

\_\_\_\_\_  
\_\_\_\_\_

\$10 Registration Fee  
Paid \_\_\_\_\_  
\_\_\_\_\_