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Absentee Bidding Registration

Signed

ID Provided □

I hereby request Colville Auctions without legal obligation of any kind on their part or on the part of any employee or agent to bid on my behalf for the undermentioned lots up to the hammer price stated. I confirm that I acknowledge that the bids are made in accordance with the Conditions of Sale (as amended by any announcement made by Colville Auctions at any time prior to the fall of the hammer) and I agree to be bound by all such terms and conditions.

Auctions at any time prior to the fall of	of the ham	mer) and I agree to be bound by all such terms and cor	ditions.	
All bids must be received at least 24 hrs before the sale or by	Lot No	Title or Description of Lot	Bid Price (\$)	
alternative published deadline. A buyer's premium of 20% of the				
bid price plus GST is payable on				
each successful bid.				
Lots in the catalogue marked + are				
also subject to GST on the				
hammer price.				
An absentee bid is the maximum				
hammer price that the auctioneer				
acting as your representative can bid up to on your behalf. The				
auctioneer will purchase the work				
on your behalf for the lowest bid				
amount possible				
Where we receive more than one				
bid of the same value the one				
received first will take precedence.				
The bidder may elect one further				
bid increment, by donating +1 in the maximum bid amount.				
the maximum bid amount.				
Bids placed by telephone will be				
accepted at your risk and must be confirmed in email or text. Please				
Note Colville Auctions assumes no				
responsibility if it fails to execute				
such bid or bids or does so		1	1	
negligently.	Visa ☐ Mastercard ☐ Bankcard ☐ Eftpos ☐			
Credit Card Details	Cardholder Name			
We will debit all charges due on	Card Number			
any purchase plus 2% (and GST)	Expiry/_ CVV			
7 days after the sale if you have not settled your account by an	Billing Address (if different from below)			
alternative method. By signing	tiled your account by an			
below, you are authorizing this	(if different from below)			
payment to be taken by us.	If successful, please debit my card immediately or,			
Please Print Please email invoice for payment back transfer				
	0	Nama		
Mr/Mrs/Miss/Ms/Title Full Name	or Compa	ny Name		
Address				
		Postcode		
Preferred Phone	Alternate Phone			
Email address				

Date

Previously Registered