

\_\_\_\_\_  
Lien Holder ID  
(Do not complete)

**BUYER INFORMATION SHEET**  
**(COMPLETE AND FAX TO 732-775-7600 PRIOR TO TAX SALE)**

Investor Name: \_\_\_\_\_  
(As you wish it to appear on your Tax Sale Certificate)

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ FAX Number \_\_\_\_\_

Tax ID Number / SS Number: \_\_\_\_\_

Representative attending sale: \_\_\_\_\_

