

# Applebrook Auctions

**Business Name (if any):** \_\_\_\_\_  
**Name:** \_\_\_\_\_  
**Address:** \_\_\_\_\_  
**City:** \_\_\_\_\_ **St.** \_\_\_\_\_ **Zip.** \_\_\_\_\_  
**Phone:** \_\_\_\_\_  
**Fax:** \_\_\_\_\_  
**E-Mail:** \_\_\_\_\_  
**Drivers License #:** \_\_\_\_\_ **St.** \_\_\_\_\_

Are you a dealer? No: \_\_\_\_\_ Yes: \_\_\_\_\_ Please fill out information below.

Would you like to be emailed for upcoming auctions? Yes No (Circle)

The information I have given is accurate and I have read and understand the Terms of Sale.

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



State of Connecticut  
Department of Revenue Services  
**SALES & USE TAX RESALE CERTIFICATE**

Issued to (Seller) Applebrook Auctions 934 Federal Rd Brookfield, CT 06804

I certify that Name of Firm (Buyer) Business Name \_\_\_\_\_ Name \_\_\_\_\_

Is engaged as a registered ( ) Wholesaler ( ) Retailer ( ) Manufacturer ( ) Lessor ( ) Other (specify)

Address or P.O Box \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Tax ID#: \_\_\_\_\_ St. \_\_\_\_\_

I further certify that if any property so purchased tax free is used or consumed by the firm as to make it subject to sales or use tax we will pay the tax direct to the proper taxing authority when state law so provides or inform the seller for added tax billing. This certificate shall be part of each order which we may hereafter give to you, unless otherwise specified, and shall be valid until cancelled by us writing of revoked by city or state.

I declare under the penalties if false statement that this certificate has been examined by me and to the best of my knowledge and belief is true, correct and complete certificate.

Authorized Signature \_\_\_\_\_  
(Owner, Partner or Corporate Officer) Title Date

Please review and sign TERMS OF SALE on back of form...