



**JEFF GADMAN
TREASURER**

3000 Pacific Ave SE, Olympia, Washington 98501-2043 • 360-786-5550 • FAX 360-754-4683

Web: www.thurstoncountywa.gov/treasurer Email: trsr@co.thurston.wa.us

Application for Tax-Title

Please present to the Board of County Commissioners of Thurston County, Washington, this application for private negotiation or public auction tax-title property described as follows, to-wit:

Property Number (Parcel): _____

Address if known: _____

Full Legal Description (Check ☐ this box if legal description is an attachment):

I hereby guarantee to make a minimum starting bid of \$_____ on the day of resale for the above described property if approved for acceptance of bid by private negotiation or public auction.

I understand there are additional fees added to the minimum bid which may include; \$10.00 excise, recording, and a \$150.00 processing fees.

I understand that the legislative authority determines the starting minimum bid, may reject my bid, or whether to sell the property at all.

I understand with this application I submit a deposit of \$500.00 to the Thurston County Treasurer's Office via certified cashier's check or money order. If I am not the winning bidder, the deposit will be refunded back. However, this deposit will be forfeited, and the applicant banned from future sales if the applicant is the winning bidder and does not pay.

I also acknowledge by making this request that this property is being offered on a "where is" and "as is" basis without any representation, guarantee, or warranty, expressed or implied, by Thurston County and per the Revised Code of Washington (RCW).



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Applicant's Name (Printed) _____

Street Address _____

City, State, Zip & Phone _____

Email Address _____

Signed this _____ day of _____, A.D., 20____.

Signature of Applicant _____

State of _____, County of _____ ss:

I certify that I know or have satisfactory evidence that _____
is the person who appeared before me, and said person acknowledged that he/she
signed this instrument and acknowledged to be his/her free and voluntary act for the
uses and purposes mentioned in this instrument.

Witness my hand and official seal affixed the day and year in this certificate above
written.

My Commission Expires:

Signed _____

Printed Name _____

Notary Public in and for the State of _____

Residing at _____

This space for Official Use Only

Date of Sale _____

Name of Purchaser _____

Address of Purchaser _____

City, State & Zip _____