

PLATTE CO TREASURER
2025 TAX SALE REGISTRATION FORM
Print, fill out, return by mail or fax by **February 27, 2026**

Name-(As on W-9) _____

Address- _____

City- _____

State- _____

Zip Code- _____



MAILING ADDRESS FOR REDEMPTIONS AND CERTIFICATES

Name- _____

Company- _____

Address- _____

City- _____

State- _____

Zip Code- _____

Contact Person- _____

Phone Number- _____

Fax Number- _____



NAME ON CHECKS AND CERTIFICATES

Name to be printed on certificates- _____

Name to be printed on checks- _____



OFFICE USE ONLY

Buyers Number _____