

ABSENTEE/TELEPHONE BIDDING FORM

Sale Number 14 **Sale Title** FINE DESIGN - STILE E RICERCA **Sale Date** 22 SEPTEMBER 2026

Please see the important information regarding absentee bidding on the reverse of this form.
Forms should be completed in ink and emailed to info@marcopoloauctions.com

MARCOPOLO ACCOUNT NUMBER (IF KNOWN)

TITLE	FIRST NAME	LAST NAME
COMPANY NAME		
ADDRESS		
POSTAL CODE	COUNTRY	
DAYTIME PHONE	MOBILE PHONE	FAX
EMAIL		

Please indicate how you would like to receive your invoices: **Email** **Post/Mail**

Telephone number during the sale (telephone bids only) _____

ABSENTEE BIDDING: Please write clearly and place your bids as early as possible, as in the event of identical bids, the earliest bid received will take precedence. Bids should be submitted at least 24 hours before the auction.

TELEPHONE BIDDING: This service will be provided within the limits of line availability at the time and in order of receipt of requests. For bids on lots in which bidders wish to make use of the telephone bidding service, the customer unconditionally accepts from the moment of his or her bidding request for the lot itself the base auction value, and more precisely the first of the two prices indicated in the catalogue and on the website. In the event that no other bids are received during the auction, the lots will be awarded to the person/entity that requested the service even if that person/entity did not confirm their bid by telephone during the auction. Marcopolo is not responsible for any technical problems that may prevent or limit the telephone bidding service during the auctions (see point 9 in General Conditions).

LOT NUMBER	LOT DESCRIPTION	MAXIMUM euro PRICE OR ✓ FOR PHONE BID (EXCLUDING PREMIUM AND TAX)

By my signature below, I hereby declare that I have read, fully understand and unconditionally accept, in their entirety and without reservation, the contractual terms and conditions contained in Clauses 1 through 29 (inclusive) of the General Conditions, and agree to be bound thereby.

SIGNATURE

FIRST NAME _____ DATE _____