

TO BE COMPLETED BY APPLICANTS APPLYING FOR LICENSURE AS A NON-RESIDENT AUCTIONEER OR APPLICANTS APPLYING FOR LICENSURE BY RECIPROCITY.

ESCROW/TRUST ACCOUNT INFORMATION

Rule 55-5-.02 of the Georgia Auctioneers Commission requires that you submit the name of the bank and the account number of the escrow or trustee account wherein the funds of other held by you are maintained. It will also be necessary for you to submit the following authorization permitting the examination of the escrow or trustee account by duly authorized representative of the Commission, when so directed by the Commission.

Name: _____

Account Number: _____

Bank Name: _____

Bank Address: _____
(Street)

(City) (State) (Zip Code)

I hereby authorize the Georgia Auctioneer Commission and/or authorized representative of the Georgia Auctioneers Commission to examine any information concerning the above-mentioned account.

Signature of Applicant

Date

**A NONRESIDENT APPLICANT MUST ALSO COMPLETE THE
“DESIGNATION OF AGENT FOR THE SERVICE OF PROCESS’ FORM.**