



Are You Ready To Liquidate ?!

V.M (verified member) Form

Thank you for choosing to become a LiquidationTime.com Verified member, we want to assure you that your business will benefit from your decision to do this.

Please answer all the questions and attach with your application the following:

Individuals and Sole Proprietors

Copy of driver license or Local, County, State or Federal government issued identification card

Copy of one utility bill listed under your name

Copy of business license or DBA form. (Contact us if you sell from home and are unable to provide some of these documents

Attach your business card if applicable.

1. LiquidationTime User ID _____
 2. Last Name: _____ 3. First Name _____ MI _____
 3. Date of birth _____
 4. Driver License number : _____ State: _____
 5. Expiration date _____
 6. Street Address: _____ Apt No: _____
 7. City _____ State _____ Zip Code _____.
 8. Home Phone number _____
 9. Business Name: _____
 10. Type of Business: (check one) Corporation ____ Sole Proprietorship ____
 11. Tax Identification No. or Social Security No. if a Sole Proprietorship _____
 12. Business Address: _____ Suite No: _____
 13. City _____ State _____ Zip code _____
- Business phone number : _____ . Ext _____

I hereby indicate that the information provided in this form is complete and accurate I have read, understand and agree to the LiquidationTime terms and conditions for becoming a Verified Member.

Print your full name: _____
Applicant Signature: _____ Date _____