



# Offer to Purchase Surplus Real Property

Commission Adopted 03/15/04

**In accordance with City Policy, all offers to purchase Surplus Real Property shall be submitted in writing and signed by the prospective purchaser(s). The following must be completed in it's entirety before an offer will be considered.**

I acknowledge and certify that I have read The Policy for the Disposition of City Owned Surplus Real Property \_\_\_\_\_(initials)

I acknowledge and certify that I have read and returned a signed Disclaimer Regarding City Owned Surplus Real Property (Attachment A) \_\_\_\_\_(initials)

Real Estate Brokers must enter into the listing agreement incorporated in the Policy for the Disposition of City Owned Surplus Real Property.

Purchaser(s) Name: \_\_\_\_\_

Purchaser(s) Address: \_\_\_\_\_

Telephone Number – Home: (\_\_\_\_) \_\_\_\_\_ Work: (\_\_\_\_) \_\_\_\_\_

Legal name of organization: \_\_\_\_\_  
(if applicable, if not insert n/a)

Name of principal for purchaser who is authorized to execute all documents of behalf of purchaser: \_\_\_\_\_  
(if same as Purchaser, insert Same)

Parcel number: \_\_\_\_\_

Parcel address: \_\_\_\_\_

Total purchase price: \_\_\_\_\_

*Proposed use and development of the property* \_\_\_\_\_

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*Guarantees for completing any proposed project* \_\_\_\_\_

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*Dollars to be invested (if constructing a building / home)* \_\_\_\_\_

*Anticipated method(s) of financing* \_\_\_\_\_

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*Timeline for implementation and completion of any proposed project* \_\_\_\_\_

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*Contingencies required by purchaser* \_\_\_\_\_

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*Any specific contingencies to be performed by the City* \_\_\_\_\_

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***If proposed use of the property is commercial or industrial complete the following:***

Number of jobs to be created/retained: \_\_\_\_\_

Average job wage: \_\_\_\_\_

Developer Name: \_\_\_\_\_

Developer's Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Developer's Telephone Number: \_\_\_\_\_

Terms of Sale (e.g. cash, land contract or option): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Signatures of Prospective Purchaser(s):

\_\_\_\_\_  
Name:

\_\_\_\_\_  
Date:

\_\_\_\_\_  
Name:

\_\_\_\_\_  
Date:

Return this form along with Disclaimer Regarding City Owned Surplus Real Property to:

Sara Dimitroff  
Economic Development Project Manager  
City of Bay City  
301 Washington Avenue  
Bay City, MI 48708

***FOR INTERNAL USE ONLY:***

Received Date		Approved	
Received Disclaimer (Attachment A)		Commission Proceeding Date	
Real Estate Broker Listing Agreement (if applicable)		Date Title Recorded	