

BUYER PROFILE

In order to identify and better serve your needs, Brooks Pointe evaluates all prospective buyers. Please complete this form and return it to your Brooks Pointe representative. Your information will be held in the strictest confidence. There is no obligation.

PERSONAL:		Spousas Namas		
Name: Last First	Mid. Initial	Spouses Name:_		
Address:				
City:			Phone:	
Fax:Mobi				
Married Single Divorced				
-	-			
Type of Business Preferred (in order of prefe	erence):	Locat	ion Preference (County/City in orde	er of preference):
1		1		
2		2.		
3				
4		4		
Will you consider a franchise? Yes / No	If so, what type	of franchises do yo	ou prefer?	_
When do you plan to buy a business?				
Are there any issues preventing you from bu				
	ying a business i			
BACKGROUND: Education: High School College G	raduate Degree	Major:		
Have you owned a business? Yes / No				
•	-			
Present Occupation/Business:				
Previous Occupation/Business:				
Who, besides yourself, is involved in this de	cision?			
FINANCIAL:				
Amount set aside for down payment: \$		When	will this amount be available?	
Source of down payment funds: Savings				
Minimum "Owner Benefit" or earnings you	require: \$	Have y	ou been qualified for an SBA loan?	
ASSETS	Even Dol		ABILITIES & NET WORTH	Even Dollars
Cash		Notes pa	yable to banks, secured	
Listed Securities			yable to banks, unsecured	
Unlisted Securities			payable to others	
Accounts Receivable			accounts and bills payable	
Loans, Mortgages, Notes Receivable			te mortgages payable, homestead	
Real Estate, homestead			te mortgages payable, other	
Real Estate, other		Other lia	bilities – itemize	
Automobiles				
Cash Value – Life Insurance				
Collectibles (Jewelry, Personal Items, etc.)				
Escrow Account		TOTAL	LIABILITIES	
		MIE///E/ 12/2	ADTH	
TOTAL ASSETS	\$	NET WO	ORTH L LIABILITIES & NET WORTH	\$

__ Date: _____

Buyer's Signature: