

Business Transfer Specialists
8917 S Old State Road, Suite 121
Lewis Center, OH 43035

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BUYER'S PERSONAL PROFILE / CONFIDENTIAL INFORMATION

Date: _____ -Associate: _____ -Data Base Entry By: _____

Name: _____ -Company: _____

Mailing Address: _____

Home: ____ / ____ -Office: ____ -FAX: ____ -Other: ____ -

Present Occupation or Business: _____

How did you learn about our Company? (*Check all that apply*)

[] Ad, [] Referral, [] Yellow Pages, [] Company's Web Site, [] Other: _____

TYPE OF BUSINESS PREFERRED:

1. _____ 3. _____

2. _____ 4. _____

LOCATION PREFERENCE:

1. _____ 3. _____

2. _____ 4. _____

- Minimum "Owner Benefit" or Earnings Before Tax income you require: \$ _____
- Max. cash down-payment available: \$ _____ • When will it be available? _____
- When do you want to take possession? _____ • Who, besides yourself is involved in decisions? _____
- Start-Up/Franchisee: [] YES, [] NO

Other Remarks: _____

BUSINESSES OFFERED/SHOWN

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_____. _____ NOTES: _____ | _____. _____ NOTES: _____

_____. _____ NOTES: _____ | _____. _____ NOTES: _____

_____. _____ NOTES: _____ | _____. _____ NOTES: _____

_____. _____ NOTES: _____ | _____. _____ NOTES: _____

Contact Date: _____ -**Contact Date:** _____ -**Contact Date:** _____ -**Contact Date:** _____