

Business Pre-Qualification Form

Trade Name					
Corporate Name					
Address					
City		State		Zip	
Type of Business					
Is property <input type="checkbox"/> leased or <input type="checkbox"/> owned?		Appx. square feet of location			
If property is leased, provide lease details (monthly rent/term/options): _____					
If property is owned, what is the size of the lot?					
If property is owned, what is the age of the building?					
Business located in <input type="checkbox"/> strip center <input type="checkbox"/> mall <input type="checkbox"/> self standing <input type="checkbox"/> other _____					
Business Purchase Price		\$			
Property Purchase Price		\$			
Inventory		\$			
Receivables		\$			
Other Specify: _____		\$			
Total Acquisition Cost		\$			
Seller Financing		\$			
Owner's Salary <i>(as per tax return)</i>		\$			
Other Information					

Please note:

Along with this completed form, please provide 3 years business tax returns.