



BUSINESS PROFILE

Business Name: _____

Address _____

City, _____ State _____ Zip Code _____

Business Phone _____ Facsimile _____

Cell Phone _____ Email _____

Home Address _____

City/Town _____ State _____ Zip Code _____

Home Phone _____

Form of Ownership:

Individual _____ Partnership _____ #Partners _____ S Corp. _____ or C Corp. _____

Partners/Shareholders Names _____ % ownership or #Shares:

Location:

Is there a Lease? Yes _____ No _____ Tenant at Will? Yes _____ No _____

If owned and to be included in sale need copies of: Deed ___ Tax bill ___ and Plot plan _____

Current lease has _____ months remaining at \$_____ per month with option to renew for an additional period of _____ years. Current Lease expires on ___ / ___ / ___ Option to renew expires on ___ / ___ / ___ Rent under option(s) to be \$_____ / Month # Options _____

Does lease contain option to buy Real Estate? Yes _____ No _____

Landlord's Name _____

Address _____

Telephone # _____

Is Lease assignable? _____ New Lease available? _____

What is the rent per square foot next door? _____, Across the street? _____

Parking: # cars _____ In lot _____ on street _____

Room for expansion? _____

The Business:

Hours Open: _____

Describe this Business:

Square footage Business occupies: _____

Number of Seats (if applicable): _____ Number of shifts _____

Special licenses required _____

Vending contracts _____

Assets

Owner's estimate of Values, Orderly Liquidation Value (OLV) and Average Age

Furnishings, Fixtures and Equipment (FFE) _____

Leasehold Improvements _____

Inventory _____

Staff

Family

Number of family members active in Business -- Full-time_____ Part-time_____ List below:

Name	Job Description	Hourly Rate	Hrs/Wk	Stay/Leave
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Non Family

Number of non-family employees: Full-time_____ Part-time_____

Name Job	Job Description	Hourly Rate	Hrs/Wk	Tenure (yrs)
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Employee employment contracts? If yes need a copy of same.

Copy of W-2s and 1099s for latest tax year.

What is the status of the labor pool for the company?

Operations

How much would you have to pay a manager in order to run this Business "absentee"? \$ _____

What percentage of supplies or inventory would be considered as dead or obsolete? _____%

As a new Owner, how long would it take to be functional in this Business? _____

From start up, how long to reach current level of profitability (months) _____

How accurately can you predict Revenues (explain)

How much training is required to perform and understand this company's operations _____

What is your Liability exposure level _____

How important is the Owner to the Revenues of this Business? _____

Over last three years, how have Gross Sales been trending? _____

Explain how new business is obtained: (Owners influence, walk in, direct mail, etc.)

What special license, degree or skills would a new owner need?

Owner's Background

Owners background prior to founding or acquisition: Education, Special skills or interests, Prior positions held.

Details of sales and target gross profit by segment

Segment	Volume	Target GP

Recent price changes? _____

Customer Base

Top 10 customers by volume for the past three years.

Government and Regulations

Are there anticipated or actual changes in governmental regulations that will impact your business?

Are there environmental risks or hazardous materials used in or by this business?

Sales and Marketing

What efforts have you expended to grow the business?

What do you need to grow the business further? (Equipment, Staff, Financial)

Copies of Independent Party Reports:

Copies of OSHA reviews and reports

Copies of environmental audits or reports

Copies of sales, state, and federal tax reviews, audits or reports

Liens/Debts/Encumbrances

Lender	Amount	Collateral
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Miscellaneous

- Copies of pension/profit sharing plans
- Declaration pages of all Insurance policies
- Pending litigation?

Advisors

Attorney _____

Address _____

Telephone _____ Facsimile _____ E-Mail _____

Accountant _____

Address _____

Telephone _____ Facsimile _____ E-Mail _____

Insurance Agent _____

Address _____

Telephone _____ Facsimile _____ E-Mail _____

Consultants _____

Address _____

Telephone _____ Facsimile _____ E-Mail _____

Other _____

Address _____

Telephone _____ Facsimile _____ E-Mail _____

This information has been provided in connection with that Marketing Agreement dated _____ . I have reviewed the above Information and find it correct.

Owner

Date

For Metro Brokers / GMAC Real Estate:

Name / Title

Date