

Blue Ribbon Business Brokers, LLC
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Waxhaw, North Carolina, NC 28173
Office: 704- - Fax: 704-831-5432

BUYER QUESTIONNAIRE

Buyer's Name(s) please print: _____ Spouse: _____

Address: _____

Phone #'s H): _____ W): _____

Fax): _____ Cell): _____

Buyer's Email: _____

General Information:

Types of businesses of interest:

____ Mfg ____ Distribution ____ Service ____ Retail ____ Contracting ____ Other

If specific, list here:

Size businesses of interest, approx. annual gross sales \$ _____ # of employees _____

Cash Flow expectations at time of acquisition \$ _____

Will you consider looking at under-performing businesses and/or turnarounds: _____

What areas will you consider in buying a business: Only within _____ miles of

Anywhere in the Carolinas ____ Anywhere in the Southeast ____ Other _____

Why are you looking to buy a business: _____

I. Financial:

1. Approximate current household annual income \$ _____

2. Amount of cash personally available and willing to invest: _____

3. Source of funds: _____ (Financial Statement and Confidentiality Agreement must be submitted :

4. Minimum Monthly Income Requirement:
5. Anticipated Possession Date:
6. Size of Family:
7. Spouse Involvement:
8. How Long Have You Been Looking:
9. Ability to Act Quickly:

II. Background:

10. Have you ever owned a business previously: ____ If so, what kind:
11. Type of Business Preferred:
12. Previous Employment Previous employment/background:

*please provide a resume if possible as this will assist us greatly in our matchmaking process

13. Business Objectives:
14. Education:
15. Business Previously Considered:
16. How long have you been looking to buy a business:
17. If not immediately, how soon would the ideal time be to buy a business:
18. Do You Possess Any of the Following Skills:
 - a. Mechanical:
 - b. Finance:
 - c. Sales:
 - d. Administration:
 - e. Other:
19. List your strengths (ex. Management, Marketing, Sales, etc.):
20. Will You Consider any of the Following:
 - a. Retail:
 - b. Food and/or Beverage:

- c. Franchise:
- d. Dry Cleaning/Laundry:
- e. Services:
- f. Liquor:
- g. Other:

21. What Locations or Areas Will You Consider:

22. Will anyone else be joining you in this venture: ____ If so, who: _____

23. Have you ever worked with any other brokers: ____ If so, who: _____

24. Have you ever worked with any other brokers in our office: ____ If so, who: _____

25. How did you come in contact with us: (Newspaper, internet, yellow pages, referral, etc.) _____

26. Other Comments:

Completed by: _____ (Name of Sales Associate):