



SOUND
Business Brokers, Inc.

BUYER PROFILE

Date: _____ Agent Name: _____

Business Name (if any): _____

Background

Name: _____ Phone: _____

Address: _____ City, State, Zip: _____

Current Business/Employment: _____

Business Phone: _____ Can you be reached there? _____

If not, best number: _____ Email: _____

Present or Former Occupations: _____

Previous Business Ownership: Yes No

If yes, please describe: _____

Trade, professional, management experience or special training: _____

Buyer Search Information

What brought you to our office? _____

Primary types of businesses you are interested in: _____

Other types of businesses you may consider: _____

Describe previous business search: _____

How long have you been looking for a business? _____

What have you seen? _____

What did you like or not like about them? _____

What is your time frame for taking possession of a business? _____



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Geographic location preferred: _____

BUYER PROFILE

What are the things you feel your business must have (i.e. size, product, service, employees, sales volume, hours, etc.)?

Based on past business/occupational experience, my strengths are: _____

Additional information helpful to the recommendation of a business suited to my personal and financial goals:

Will you be: Owner/Operator Absentee Partner

Will family members assist or work in the business? _____

Please explain: _____

Profile Evaluation

How many hours a day are you available to work? _____

How many days per week? _____ Per Month? _____

Attitude toward incurring debt: _____

How do you plan to finance the purchase? _____

How much money is available for initial investment? _____

How much income is expected from the business? _____

Minimum income amount needed for personal debt? _____

When complete please return to:

Sound Business Brokers

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