

**REQUEST FOR ADDITIONAL INFORMATION**

Brokerage Company Name

Thank you for trusting the sale of your business to us. In order to complete our file on your business and to prepare our presentation information and marketing program, we will need the following items that have been checked:

|  |  |  |
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| [ ]  | Profit and Loss Statements for the years: |  |
| [ ]  | Balance Sheet on the business for the years: |  |
| [ ]  | Federal Income Tax Returns (including Schedule C if proprietorship) for the years: |
|  |  |
| [ ]  | Corporate Return |
| [ ]  | If Proprietorship, Personal Federal Income Tax Returns including Schedule C for the years: |
|  |  |
| [ ]  | Copy of the Lease and related documents, such as any assignments of the lease |
| [ ]  | Current list of the Furniture, Fixtures & Equipment with estimated present worth of each item |
| [ ]  | Copy of the Franchise Agreement |
| [ ]  | Documentation on the following loans against the business: |
|  |  |
| [ ]  | Publications |
| [ ]  | Aging of Accounts Receivable |
| [ ]  | Other: |       |
|  |  |
| [ ]  | Name, address and telephone number of outside professionals |

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| **Attorney**: |  | **Accountant:** |
|       |  |       |
| Attorney Name |  | Accountant Name |

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|       |  |       |
| Company Name |  | Company Name |

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|       |  |       |
| Street Address |  | Street Address |
|       |  |       |
| City, State, Zip |  | City, State, Zip |
|       |       |  |       |       |
| Telephone | Fax |  | Telephone | Fax |
|       |  |       |
| Email |  | Email |
| **Other**: |  | **Agent Contact Information:** |
|       |  |       |
| Name |  | Agent Name |

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| Company Name |  | Company Name |

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|       |  |       |
| Street Address |  | Street Address |
|       |  |       |
| City, State, Zip |  | City, State, Zip |
|       |       |  |       |       |
| Telephone | Fax |  | Telephone | Fax |
|       |  |       |
| Email |  | Email |