

## **Buyer Questionnaire Form:**

| What is your time frame to purchase a business?  |
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| How much Liquid cash to invest:  |
| Will you be looking for bank financing?  |
| Estimated Net Worth:   |
| Any Credit Issues:   |
| If so please explain:  |
| Are you currently employed?  |
| Do you have Restaurant experience?   |
| If So please explain:  |
| Do you currently own your own business?  |
| If yes, what type and for how long?  |
| How many hours do you plan on working this business?   |
| Will you have family members involved?   |
| Will you have a Partner?   |
| If required, will you be able to attend out of state training for an extended period of time (2 -6 weeks)? |
| If required, are you willing to sign a personal guarantee for the lease?                                   |
| Name:  |
| Signature:   |
| Date:  |