



AGENT NAME:	AGENT PHONE:		AGENT FAX:	
Letter of Pre-Qualification and Non-Disclosure				
information on this busi	rest in one of our businesses iness, we need you to provide financial information you will b	us with some financial	information. You	also agree not to
	t and fax this form back after Il the information on the busine			onal information we
Date: Your Personal Information	Business Inquiring On: on (please print clearly):			
First Name:		ast Name:		
Street Address, City, Stat	e & Zip:			
Phone:	Fax:	Email:		
Name and address of bu	sinesses that you currently ow	n or have owned in the pa	st 2 years:	
1.				
2.				
3.				
	e as a business owner, please a what skills you possess to make		f why you are inte	rested in this
Money available for purc	hase:			
Cash:	Loan:	Other:		
Is any part of the down p	ayment coming from a family n	nember?	☐ YES	□ NO
Do you have additional w	orking capital available for the	first 3 months?	☐ YES	□ NO
If so, how much?				
premises, we will not talk the	the following terms and conditions: 1 owners, employees or customers of the tiations with the Seller without the ass 000.00	business; 3) We will not share	or disclose any inforr	nation that we receive;
Signature:		Date:		

Residential - Income - Business Opportunities - Commercial Phone: (619) 453-0862 Fax: (619) 568-3100

LPQ/ND-SB REV C: 02/2007