



BUSINESS NOTE WORKSHEET

Brokers: Print, fill in, and fax this page to us at 415-433-3588

Seller's Name _____ How did the seller hear of you? _____
Phone _____ Fax _____

Business Information

Exact name of Business _____

Type of Business _____

Is operation a Franchise? Yes No

Street Address: _____ City _____ State _____ Zip _____

Business is: Owned by Payor Leased by Payor and expires: _____

Terms of lease renewal option(s) _____

Is Note signed by a corporation? Yes No If so, is Note personally guaranteed? Yes No

If Note is not signed by a corporation, is it directly signed by an individual? Yes No

Is there a signed Security Agreement with UCC-1 recorded at the time of the Note creation? Yes No

Business Sale

Date of sale _____
Selling price _____
Down payment _____
1st lien _____
2nd lien _____

Financial Performance

Annual revenues _____
Less annual expenses _____
Net operating income _____

Note Information

Date of Note _____
Amount _____
Term of Months _____
Payment Amt _____
Balloon Amt _____
Balloon Date _____
Interest Rate _____
Due Date 1st Pmt _____
of Pmts Paid _____
of Pmts Left _____
Next Pmt Due _____
Balance _____

Payor /Guarantor

Most recent FICO _____
SSN _____
Qualifications for this biz _____
Payment History _____

Broker Contact Information

Name _____
Company _____
Email _____
Phone _____

Quote to Seller (for SFS use only)

Buy full note _____
Buy partial note _____
Quote date _____