



BayState Business Brokers
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Business Owner Information Form

Please fill this out if you currently own a business and are interested in selling it or buying another business.

Your Name _____

Other Owners: _____

Business Name _____

Business Address _____

City, State, Zip _____

Phone _____ Fax _____

Cell Phone _____ E-mail _____

Best way and time to contact you _____

Can we send mail to you? No Yes, Use Bus. Address Yes, Use address below:

Street Address _____

City, State, Zip _____

We mail a professionally-prepared, quarterly, newsletter about managing and selling a business. If you would like to receive this newsletter, please check here: _____

Please describe your current business: Description, Sales, Years Est., Employees, Etc:

When do you want to sell your business? _____

If you are interested in buying a business, please answer the following questions:

What type of business are you seeking? _____

What is the sales range you prefer? _____

Where should it be located? _____

Other requirements: _____

How much cash do you have to invest? _____

Signature _____ Date _____