

Business Details					
ull name and address of the business to be purchased:					
REEHOLD / LEASEHOLD	Reference Number:				
lease Circle	Amount of offer (£):				
	Amount of offer (in words):				
		Subject to o	ontra		
HARE / ASSET / UNKNOWN lease Circle					
s the offer subject to:	The sale of any existing property or business?	YES	NO		
ease circle for each	A formal valuation?	YES	NO		
	Arranging finance?	YES	NO		
	Planning? Any other conditions? If yes, please specify below	YES YES	NO NO		
your offer is acceptable to our client	, confirmation of funding will be required in the form of a lett	er from vou	r ban		
r finance company.	Agreed?	YES	NC		
o you require exclusivity? (A holding	deposit would be required to secure this)	YES	NO		
re you willing to place a holding depo		YES	NO		
Vithin what time scale do you intend	to complete the purchase of the business?				
	signment of the lease to an independent operator private ind to 3-12 months' rent may be required. Are you willing and a		uch		
	Please Circle?	YES	NC		
ersonal Details					
our full name and address:					
Vork Tol:	Homo Toli				
Vork Tel:	Home Tel: Mobile Tel:				
mail address:					
Will you need help with funding/would like us to recommend a solicitor?					











If yes, please provide the name and address: Postcode:	
Postcode:	
If no, what experience do you have in the sector?	
If you do not own a business, what is your current employment?	
What relevant qualifications do you have ? Please tick:	
 □ NVQ □ National Certificate for Licencees □ National Certificate for Personal Licence Holders □ NVQ Assessor □ Other, please specify 	
Please give more specific details, including any grades, levels, etc.	
Please enclose CV's for any relevant parties with offer.	
Licensed Businesses Only	
Have you held a Premises Licence? YES NO	
Do you intend to be the Licensee? YES NO	
If no, please give further details.	
Leasehold Referees If your offer relates to a business that is conducted from leasehold premises, it will be necessary for us to applied references on your behalf, in order to obtain the landlord's consent to assignment or under-letting of the lease complete the following: Name of bank:	•
All	
Address: Postcode:	











Aut	horisation					
I/W						
			with a reference on my / our behalf.			
(B)		ny/ our bank/building society to deduct the cost of this reference from my/ our account.				
(C)	Enclose payment by cheque in the sum of £_		_ Made payable to			
Sigr	ned:		Date:			
Nar	ne of Solicitor:					
	lress:					
		Postco	ode:			
For	the attention of:	E-mail	l:			
Tel:						
	me/s and addresses of past and/or present lanether with the address of rented/leased prop	ulorus				
2.						
3.						
Nar	ne and address of your accountant:					
			Postcode:			
Tel:	E-mail:	A/C No:				
Non	no /s and addresses of the trade suppliers	1				
Name/s and addresses of the trade suppliers. In the absence of trade suppliers, please provide details of alternative professional referees:		1.	Postcode:			
		Tel:	A/C No:			
		E-mail:				
2.			Postcode:			
Tel:	E-mail:		A/C No:			
3.						
			Postcode:			
Tel:	E-mail:		A/C No:			
l co	nfirm that the personal information provided	in this offer is true a	and correct.			
	ned:	Date:				







