

## Seller Questionnaire

**About the Agency Being Purchased (Please have the selling agent complete this page for each agency being purchased):**

Owner's Name: \_\_\_\_\_

Legal Name of Agency: \_\_\_\_\_

Legal Form of Agency (corporation, dba, etc.): \_\_\_\_\_

Agency Address: \_\_\_\_\_  
Street City State Zip

Current Rental Rate: \$\_\_\_\_\_ Term Remaining on Lease: \_\_\_\_\_

Contact Info: \_\_\_\_\_  
Office Phone Cell Email

When was the agency established? \_\_\_\_\_ How long has the seller owned it? \_\_\_\_\_

Does the seller have any agency debt and/or Farmers subsidy? \_\_\_\_\_

What is the agency's selling price? \_\_\_\_\_

What is the owner's reason for selling? \_\_\_\_\_

Please describe the owner's post-closing plans. \_\_\_\_\_

How many licensed staff are employed at the agency? \_\_\_\_\_ How many unlicensed staff? \_\_\_\_\_

Does the seller's spouse or other relative work in the agency? \_\_\_\_\_

If so, who and in what capacity? \_\_\_\_\_

Does the seller, seller's spouse, or other family member have an ownership or other interest in an insurance agency within a 30 mile radius of the agency being sold? \_\_\_\_\_

Anticipated sale date: \_\_\_\_\_

**Seller's Affirmation: I hereby certify that the above information is true and correct to the best of my knowledge:**

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Buyer's Affirmation: I hereby certify that I have verified the above information to the best of my ability, and it is true and correct to the best of my knowledge:**

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_