

Prospect Call-in Sheet

(Take an extra 5 minutes on the call!)

Name: _____ Phone #: _____

Email address: _____

Type of business: _____ SF Needed: _____ Inline/OP/endcap: _____

Own Business Now: _____ If yes, how many years? _____ Where: _____

What do you like about your current location?: _____

What don't you like about your current location?: _____

More than one location: _____ If yes, what makes you successful: _____

Current revenues: _____ If no, have you completed a business plan: _____

Projected first year revenues: _____

***** What do you like about our center:** _____

Start-up capital needed: _____ How much capital do you have: _____

Any Partners?: _____ Who will sign Lease?: _____

Rent budget: _____ Funding sources: _____

Have you researched the area: _____

Why do you like the area: _____

What other areas/centers have you looked at: _____

Sign needs: _____ Parking needs: _____

Tough Stuff: A Personal Guarantee is required.

Other issues that may pose as objections down the line: _____



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