

SUBWAY® Business Acquisition

BUYER INFORMATION

Buyer name _____ Social Security # _____ Birthdate _____
 U.S. citizen? Yes No If no, how long in U.S.? _____ Residency status _____
 Home address _____ City _____ State _____ Zip _____
 Phone _____ Fax _____ Mobile _____ E-mail _____

BUSINESS TO BE PURCHASED

Trade name _____ Business type _____ Phone _____
 Address _____ City _____ State _____ Zip _____
 Is this business incorporated? Yes No Does business purchase include real estate? Yes No

FRANCHISE INFORMATION

DA contact name _____
 Phone _____ Fax _____ E-mail _____
 Franchise fee paid? Yes No

OTHER BUSINESSES OWNED BY BUYER

Business name(s) _____ Business type _____ Phone _____
 Location(s) _____
 Type _____ Owned since _____ Gross yearly income \$ _____ Net yearly income \$ _____

BUYER'S PREVIOUS EXPERIENCE

Business name _____ Business type _____ Phone _____
 Location(s) _____
 Employed Managed Owned How long? _____ Sold for \$ _____ Sold to _____

CO-BUYER INFORMATION

Co-buyer name _____ Social Security # _____ Birthdate _____
 U.S. citizen? Yes No If no, how long in U.S.? _____ Residency status _____
 Home address _____ City _____ State _____ Zip _____
 Phone _____ Fax _____ Mobile _____ E-mail _____

OTHER BUSINESSES OWNED BY CO-BUYER

Business name(s) _____ Business type _____ Phone _____
 Location(s) _____
 Type _____ Owned since _____ Gross yearly income \$ _____ Net yearly income \$ _____

CO-BUYER'S PREVIOUS EXPERIENCE

Business name _____ Location(s) _____
 Employed Managed Owned How long? _____ Sold for \$ _____ Sold to _____

SETTLEMENT ATTORNEY

Law firm name _____ Attorney _____
 Phone _____ Fax _____ E-mail _____

TERMS OF SALE

Total purchase price \$ _____ Seller note term (months) _____
Buyer investment \$ _____ Desired Butler term (months) _____
Seller note \$ _____ Desired settlement date _____
Butler financing \$ _____ Is there a signed agreement of sale? Yes No

The following information is to be completed by, or obtained from, the seller of the business.

SELLER'S BUSINESS INFORMATION

Seller's legal business name _____ State of inc. _____
Type of business: Corporation Limited liability Partnership Proprietorship Contact _____
Address _____ City _____ State _____ Zip _____
Phone _____ Fax _____ E-mail _____

HISTORY OF BUSINESS BEING PURCHASED

Date business opened _____ Is seller the original owner? Yes No If no, date seller purchased _____
Purchased from _____ Price seller paid \$ _____

BUSINESS BEING PURCHASED INFORMATION

Is business under lease? Yes No If yes, please answer the following: Monthly rent \$ _____
When did lease begin? _____ # years remaining _____ Renewal option? Yes No If yes, # years _____

LANDLORD (of business being purchased)

Landlord name _____ Contact person _____
Address _____ City _____ State _____ Zip _____
Phone _____ Fax _____ E-mail _____

LOANS TO BE PAID AT SETTLEMENT

Are there any loans or equipment leases due on the business? Yes No If yes, please complete the following:
Lender _____ Contact _____ Phone _____
Account # _____ Balance due \$ _____ Monthly payment \$ _____

Lender _____ Contact _____ Phone _____
Account # _____ Balance due \$ _____ Monthly payment \$ _____

I hereby authorize my banks(s) creditors and supplier, including the franchisor(s) for my franchised business operations to release to and provide Butler Capital Corporation ("Butler") all information requested by them from time to time in connection with their extension of and continued extension of credit. Such information shall include but not be limited to account balances, payment terms and histories, franchise operating statements, Franchise Disclosure documents, etc. Any person receiving a request for information from Butler may rely on this authorization without further inquiry and as fully as if I personally made the request.

Applicant signature _____ Date _____
Applicant signature _____ Date _____

LEGAL DISCLOSURES

If your application for business credit is denied, you have the right to a written statement of the specific reasons for the denial. To obtain the statement, please contact: Legal Dept., Butler Capital Corp., PO Box 677, Hunt Valley, MD 21030-0677, 410-771-9600, within 60 days from the date you are notified of our decision. Butler Capital will send you a written statement of reasons for the denial within 30 days of receiving your request for the statement. The federal Equal Credit Opportunity Act prohibits creditors from discriminating against credit applicants on the basis of race, color, religion, national origin, sex, marital status, or age (provided the applicant has the capacity to enter into a binding contract); or because all or part of the applicant's income derives from any public assistance program; or because the applicant has, in good faith, exercised any right under the Consumer Credit Protection Act. The federal agency that administers compliance with this law concerning this credit is the Federal Trade Commission, Equal Credit Opportunity, Washington, DC 20850.

Detailed Personal Financial Statement

If this is a joint application, please include information on the co-applicant. Your providing proof of cash and cash-equivalent assets (such as copies of statements) will help to speed the process and strengthen your application.

APPLICANT INFORMATION

Your name _____ Social Security # _____
 Co-applicant name _____ Social Security # _____

Section A: CASH ON DEPOSIT IN BANKS / INSTITUTIONS

NAME OF BANK	NAME(S) ON ACCOUNT	BALANCE
1. _____	_____	\$ _____
2. _____	_____	\$ _____
3. _____	_____	\$ _____
4. _____	_____	\$ _____
5. _____	_____	\$ _____

Section B: MARKETABLE SECURITIES

DESCRIPTION	ACCOUNT WITH	MARKET VALUE
1. _____	_____	\$ _____
2. _____	_____	\$ _____
3. _____	_____	\$ _____
4. _____	_____	\$ _____

Section C: REAL ESTATE

PROPERTY ADDRESS	TYPE	DATE ACQUIRED	COST	MARKET VALUE	MORTGAGE BALANCE	2 ND MORTGAGE BALANCE
1. _____	_____	_____	\$ _____	\$ _____	\$ _____	\$ _____
2. _____	_____	_____	\$ _____	\$ _____	\$ _____	\$ _____
3. _____	_____	_____	\$ _____	\$ _____	\$ _____	\$ _____
4. _____	_____	_____	\$ _____	\$ _____	\$ _____	\$ _____
5. _____	_____	_____	\$ _____	\$ _____	\$ _____	\$ _____
6. _____	_____	_____	\$ _____	\$ _____	\$ _____	\$ _____

Section D: RETIREMENT ACCOUNTS (IRAs / 401(K)/ ESOP / profit sharing / etc.)

ACCOUNT TYPE	IN NAME OF	VESTED VALUE
1. _____	_____	\$ _____
2. _____	_____	\$ _____
3. _____	_____	\$ _____
4. _____	_____	\$ _____

Detailed Personal Financial Statement (continued)

Section E: PARTIAL INTEREST IN ASSETS

ASSET TYPE	YOUR % OWNERSHIP	ALSO OWNED BY	CURRENT DEBT	CURRENT VALUE
1. _____	_____	_____	\$ _____	\$ _____
2. _____	_____	_____	\$ _____	\$ _____
3. _____	_____	_____	\$ _____	\$ _____

Section F: BUSINESS ASSETS

ASSET DESCRIPTION	IN NAME OF	YOUR % OWNERSHIP	CURRENT DEBT	CURRENT VALUE
1. _____	_____	_____	\$ _____	\$ _____
2. _____	_____	_____	\$ _____	\$ _____
3. _____	_____	_____	\$ _____	\$ _____

Section G: NOTES PAYABLE (secured & unsecured)

NOTEHOLDER	FOR / PURPOSE	SECURED? YES / NO	ORIGINAL AMOUNT	CURRENT BALANCE	MONTHLY PAYMENT
1. _____	_____	_____	\$ _____	\$ _____	\$ _____
2. _____	_____	_____	\$ _____	\$ _____	\$ _____
3. _____	_____	_____	\$ _____	\$ _____	\$ _____
4. _____	_____	_____	\$ _____	\$ _____	\$ _____
5. _____	_____	_____	\$ _____	\$ _____	\$ _____

STATEMENT OF FINANCIAL CONDITION

ASSETS	LIABILITIES
Cash on hand \$ _____	Notes payable (secured) <i>From Section G</i> \$ _____
Cash on deposit <i>Total from Section A</i> \$ _____	Notes payable (unsecured) <i>From Section G</i> \$ _____
Marketable securities / investments <i>Total from Section B</i> \$ _____	Credit card balances payable \$ _____
Restricted or controlled stock \$ _____	Business debt <i>Total from Section F</i> \$ _____
Real estate <i>Total from Section C</i> \$ _____	Other debts: _____ \$ _____
Retirement accounts <i>Total from Section D</i> \$ _____	_____ \$ _____
Partial interests in assets <i>Total from Section E</i> \$ _____	_____ \$ _____
Business assets <i>Total from Section F</i> \$ _____	_____ \$ _____
Other assets: _____ \$ _____	_____ \$ _____
_____ \$ _____	TOTAL LIABILITIES (B) \$ _____
TOTAL ASSETS (A) \$ _____	NET WORTH (A minus B) \$ _____

Detailed Personal Financial Statement (continued)

SOURCE OF INCOME FOR PREVIOUS YEAR

employment income	\$		Co-applicant's employment income	\$	
Dividends / interest / investment income	\$		Real estate income	\$	
Business income	\$		Retirement / disability income	\$	
Other income (explain)				\$	

CONTINGENT LIABILITIES

Do you have any contingent liabilities? Yes No If yes, complete the following:

As endorser, co-maker, or guarantor \$ _____ On lease or contracts \$ _____ Legal claims \$ _____

Other special debt \$ _____ Explain _____

PERSONAL INFORMATION

Are you a partner in any other venture? Yes No If yes, explain _____

Are any assets pledged other than as described? Yes No If yes, explain _____

Have you ever been declared bankrupt? Yes No If yes, explain _____

Are you a defendant in any legal actions? Yes No If yes, explain _____

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866-218-4793 • FAX 410-771-0898 • E-mail: franchise@butlercapital.com • www.ButlerCapital.com