



CONFIDENTIALITY AGREEMENT

5214 MARYLAND WAY STE. 300
BRENTWOOD, TN. 37027

PHONE 615-423-0781
FAX 866-453-4507

I, _____ acknowledge that the name of the seller(s) and certain confidential information, records, studies, and trade practices of businesses represented by Alliant Capital Advisors (“Alliant”) will be revealed to me. I understand that ***any breach of confidence*** may harm the seller or Alliant, and I accept responsibility to maintain the utmost **SECRECY AND CONFIDENCE**. Further, I will use the information received for the sole purpose of assessing the prospective purchase of the Business through Alliant.

I agree to not disclose any of the information given in connection herewith, either directly or indirectly, to third parties, except direct support people; nor will I use, or assist others to use, any such information for competitive trade purposes or to circumvent Alliant in any transaction or contact with the seller(s). I agree to not make copies of any of the material provided and to return all of it if I discontinue interest in the Business. The material and information furnished is believed to be reliable for the purpose of evaluating the Business. Further, I agree to not contact the seller(s) of the Business directly and understand that all negotiations, inquiries, investigations, offers to purchase, and/or letters of intent must be made through Alliant.

In consideration for the information given, I agree that this Agreement will be governed by the laws of the State of Tennessee and that all actions that may arise in law and/or equity shall be brought in the State of Tennessee.

It is understood that this Agreement applies to any information previously supplied by Alliant, verbally or in writing. I understand that neither the seller(s), the Business, its officers, directors, employees nor Alliant shall have any liability as a result of furnishing me the material included in this Agreement.

This also acknowledges that the undersigned buyer(s) has been advised that Alliant is an agent for the seller(s) in this transaction. I agree that should I buy, lease or come into possession of the Business during the listing term or **within two years** from the date below, I will protect Alliant’s right to fee under Alliant’s agreement with the seller(s).

Agreed and accepted this ___ day of _____, 20__.

Name : _____ Signature: _____

Address: _____

Phone: _____ Email Address _____

Agent: William Oates

**ALLIANT CAPITAL ADVISORS LLC
BUYER FINANCIAL INFORMATION
** STRICTLY CONFIDENTIAL ****

Name(s) _____

Address _____

Cell Phone _____

Assets

Cash on Hand and in Banks	\$
U.S. Government Securities	
Account, Loans and Notes Receivable	
Cash surrender Value of Life Insurance	
Value of Businesses owned	
Other Stocks and Bonds	
Real Estate	
Automobile - Number ()	
Household Furnishings and Personal Effects	
Other Assets (Itemize)	

Total Assets \$

Liabilities and Net Worth

Notes Payable	\$
Liens on Real Estate	
Other Liabilities (Itemize)	

Total Liabilities \$

Net Worth \$

Source of Income

Salary	\$
Dividends and Interest	
Bonus and Commissions	
Real Estate Income	
Other Income	

Total Income \$

The undersigned certifies that this information was provided by him/her and is true and correct

Signature(s) _____

Date _____