



**Complete  
Escrow Service**

## ***International City Escrow, Inc.***

5000 E. Spring Street, Suite 120, Long Beach, CA 90815, Tel: (562) 497-9777 Fax: (562) 497-9890

### **REQUIREMENTS FOR BULK SALE ESCROW**

#### **FROM SELLER:**

- Copy of Business License
- Copy of California Dept of Tax and Fee Administration Permit
- Copy of Alcoholic Beverage Control License, if applicable
- Employment Development Dept. Account No.
- TIN or Social Security Number
- Copy of Personal Property Tax Bill and/or 571-L filed with the County
- All other business names and addresses used by Seller in last 3 years
- Address of assets, if different
- Residence or Corporate address for post-closing and tax agencies
- General description of assets being sold (for Notice to Creditors)
- Complete listing of Furniture, Fixtures and Equipment (FF&E)
- Listing of secured creditors and/or existing leased equipment information
- Contract(s) Buyer is to assume
- Depending on type of Seller's entity documentation varies

#### **FROM BUYER:**

- Copy of all Buyer's Driver License(s), if purchasing as individuals
- Name and address (can NOT change unless a new Notice is published)
- TIN/Social Security Number
- Depending on type of Buyer's entity documentation varies
- Deposit to open escrow – payable to INTERNATIONAL CITY ESCROW

#### **FROM BOTH SELLER AND BUYER:**

- Allocation of Purchase Price

**SOME OF THE MOST COMMON CATEGORIES FOR ALLOCATION  
OF PURCHASE PRICE ARE:**

Furniture, Fixtures and Equipment

Goodwill

Inventory

ABC Liquor License

Covenant Not To Compete

Leasehold Improvements

Stock & Trade

Trade Name

**IMPORTANT: CHECK WITH YOUR TAX ACCOUNTANT, TAX  
ATTORNEY AND/ OR TAX PREPARER.**



**INTERNATIONAL CITY  
ESCROW, INC.**

**PATREECE COBURN**  
Escrow Officer  
Vice President

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Long Beach, CA 90815-1270  
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[www.ICEscrow.com](http://www.ICEscrow.com)

# SELLER'S STATEMENT OF INFORMATION MY FULL NAME

**Please Print**

\_\_\_\_\_  
FIRST NAME MIDDLE NAME LAST NAME

SOCIAL SECURITY NO. \_\_\_\_\_ DRIVERS LICENSE NO. \_\_\_\_\_

\_\_\_\_\_  
CURRENT HOME ADDRESS

HOME PHONE NO. \_\_\_\_\_ WORK NO. \_\_\_\_\_

CELL PHONE NO. \_\_\_\_\_ FAX NO. \_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_

## BUSINESS INFORMATION

\_\_\_\_\_  
LEGAL BUSINESS NAME

\_\_\_\_\_  
LEGAL BUSINESS ADDRESS

Have you used any other Business Name in the Last 3 years? \_\_\_\_\_ YES \_\_\_\_\_ NO

If yes, List Additional Names

\_\_\_\_\_  
ADDITIONAL LEGAL BUSINESS NAME (IF ANY)

THE SELLER HEREBY REPRESENTS AND WARRANTS TO ESCROWHOLDER, THAT THE ABOVE SHOWN NAMES ARE CORRECT, COMPLETE AND PROPERLY SPELLED AND THAT THE SELLER'S HAS NOT GONE BY ANY OTHER NAME OR VARIATION OF THE NAME.

\_\_\_\_\_  
SELLER'S SIGNATURE

DATED \_\_\_\_\_

ATTACHED IS A COPY OF MY CURRENT DRIVER'S LICENSE

# BUYER'S STATEMENT OF INFORMATION MY FULL NAME

**Please Print**

\_\_\_\_\_  
FIRST NAME MIDDLE NAME LAST NAME

SOCIAL SECURITY NO. \_\_\_\_\_ DRIVERS LICENSE NO. \_\_\_\_\_

\_\_\_\_\_  
CURRENT HOME ADDRESS

HOME PHONE NO. \_\_\_\_\_ WORK NO. \_\_\_\_\_

CELL PHONE NO. \_\_\_\_\_ FAX NO. \_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_

NAME OF BUSINESS PURCHASING \_\_\_\_\_

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\_\_\_\_\_  
BUYER'S SIGNATURE DATED \_\_\_\_\_

ATTACHED IS A COPY OF MY CURRENT DRIVER'S LICENSE