Business Disposal Statement of Financial Condition

Instructions: A financial statement is required for each owner, partner, corporate member or LLC member. If filing as a corporation or an LLC a separate financial statement is required. Please do not mix personal assets and liabilities with the corporation or LLC.

This Statement Is For (Check One)									
Individual Corporate or LLC. Member	Corpora	tion 🗌 Ltd. Liab. Co. 🗌 Ltd. Liab. Partners	hin						
This Section is to be Completed by All Applicants									
Individual Name									
This Section is to be Completed by Corporation and Limited Liability Company Applicants									
Corporate/Company Name									
This Section is to be Completed by All Applicants									
Assets	In Dollars (Omit Cents)	Liabilities	In Dollars (Omit Cents)						
Cash in Following Banks (Submit Bank Statement) Bank Name:		Real Estate Mortgages (See Schedule E)							
Bank Name:		Automobile Loans (See Schedule F)							
Bank Name:		Credit Card Payable (See Schedule G)							
Marketable Securities (See Schedule A, Submit Statement)		Other Notes Payable (See Schedule H)							
Non-Marketable Securities (See Schedule B, Submit Statement)		Income Taxes Due							
Notes Receivable (See Schedule C)		Other Unpaid Taxes							
Accounts Receivable (See Schedule D)		Other Debts (Itemize)							
Real Estate (See Schedule E, Submit Proof of Ownership)									
Motor Vehicles (See Schedule F, submit title or registration as verification)									
Other Assets (Itemize. Do NOT include furniture, appliances, jewelry or collectibles – guns, coins, etc.)									
		Total Liabili	ties						
Total Assets		Total Assets–Total Liabilities = Total Net Wo	orth						
	Yes* 🗌 No	 Contested income or other tax liens? Outstanding judgments or non-tax liens? Other special debts or circumstances? nd explain on a separate sheet of paper. 	☐ Yes* ☐ No ☐ Yes* ☐ No ☐ Yes* ☐ No ☐ Yes* ☐ No						
Do you have a line of credit? Yes No If yes, indicate amount and attach a verification letter from the lending institution.									
The undersigned acknowledges and understands that the Motor Vehicle Dealer Board is relying on the information provided herein in deciding whether to grant or deny a license. The undersigned certifies that the information provided herein is true, correct and complete. The undersigned authorizes the Board and its agents to make all inquires deemed necessary, including credit bureau inquiries, to verify the accuracy of this information and determine the financial fitness of the applicant.									
Signature (owner, partner, LLC member/manager or corporat	e officer)	Title	Date						

Form must be completed and <u>net worth requirement</u> must be met. See our website: SBG.Colorado.gov/AID Go to "licensing" section of the website.

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Number of Shares or Face Value of Bonds	Description				In Name of				Registered, Ple or Held by Oth			Market Value	
Schedule B – Nonmarkatable Securities (Submit Verification)													
Schedule B – Nonmarketable Securities (Submit Verification) Number of Shares Description In Name of											Market Value**		
												Market Value	
Schedule C – Notes Receivable													
Name and Addr	ess (Stre	eet and City) From Who	m Due	Explanation			Da	ited	Ma	turity	Amount		
Sobodulo D., Accounto Pacoivable													
Schedule D – Accounts Receivable Name and Address (Street and City) From Whom Due Explanation When Sold When Due Amount											Amount		
Name and Address (Street and Sity) From Whom Due							When Sold When I				, inouni		
	Schee	dule E – Real Esta	te (Submit	: Pro	of of Ov	vnership	o for	Each	Prope	rty Lis	sted)		
Complete Address &	County	Title in Name of	Cost	Date Acquired		Amount Owed		Monthly Payments		Monthl	y Income	Market Value	
								Payments					
					Totals								
Sche	dule F	- Motor Vehicles	(Submit C	ору	of Title	or Regis	strati	on for	Every	Vehic	cle List	ed)	
Description		Year Mfg'd.	Yea	ar Purch.	Purchase Price		Amount Owed		Monthly Payment Amount		Current Wholesale Value		
											value		
				<u> </u>	Totals								
		ç	Schedule (G – C	Credit Ca	ard Paya	able					I	
			Compan	у							C	Current Balance	
		Cobodulo U	- Bank an	4.04	hor loct	itutione		ations	hine				
Schedule H – Bank and Other Institutional Relationships Original Loan/ Date of Maturity Monthly Amount Quind													
Name and Address of Creditor				Amount	Loan	Da		Secured	/***	ayments	Amount Owed		
							1						