Iowa Business Bill of Sale Form

Date:								
This Business Bill of Sale is made on the day of, 20, by and between the following parties:								
Seller Information: Full Name: Address: City/State/ZIP: Phone Number: Email:	Buyer Information: Full Name: Address: City/State/ZIP: Phone Number: Email:							
BUSINESS INFORMATION: Name of Business:								
City: State: Zip Code:								
Type of Business: Business License Number (if applicable):								
Description of Business:								
CONSIDERATION:								
The total purchase price for the business is \$ (U.S. Dollars).								
PAYMENT TERMS:								

The E	Buyer agrees to pay the Selle	r the Purchase	Price as follows:
1.	Initial Deposit: \$	(Due on)
2.	Balance Due: \$	_ (Due on)
INCL	USIONS:		
The f	ollowing assets are included	in the sale of th	ne business:
1.	Inventory:		
2.	Equipment:		_
3.	Furniture:		
4.	Contracts and Agreements:		
5.	Intellectual Property:		
6.	Licenses and Permits:		
7.	Customer Lists:		
8.	Goodwill:		
9.	Other (specify):		
WAR	RANTIES:		
The S	Seller warrants that the busin	ess is being so	ld free and clear of all liens,
encu	mbrances, liabilities, and adv	erse claims of a	any kind.
GOVI	ERNING LAW:		
	Bill of Sale shall be governed state of lowa.	l by and constru	ued in accordance with the laws
SIGN	ATURES:		
Selle	r's Signature:		_ Date:
Printe	ed Name:		
Buve	r's Signature:		Date:

Printed Name:				-
WITNESS SIGNATU	JRES:			
Witness 1:				
Signature:		[Date:	
Printed Name:				-
Address:				
City:	State:	_Zip Code: _		
Witness 2:				
Signature:		[Date:	
Printed Name:				-
Address:				
City:	State:	_Zip Code: _		