

Vanguard Initial Agency Questionnaire

Agency Name:	
Owner Name:	
Phone number:	
Email address:	
Overview:	
Products offered:	
Services offered:	
Geography covered:	
Headquarters:	
Founded:	
Ownership:	
# of Employees:	
# of Subagents:	
Non-competes:	
# of Rooftops:	
# of Dealership Groups:	
Revenue (\$000K)	
EBITDA (\$000K)	

For downloaded versions, please email this questionnaire back to jpolley@ezvds.com