

Build Your Firm, Inc
(888) 999-9800

**Application & Practice Profile for
Outsourced Marketing Program**

Purpose:

The following application and practice profile is a tool so Build Your Firm can evaluate candidates for our Outsourced Marketing Program. We are looking for practitioners who have the passion, tenacity and commitment to acquire at least \$150,000 – \$250,000 dollars of new business and can handle the flow of new business.

Instructions:

Please complete your answers directly on this form.
When finished, please email the completed application to us or
fax to 203-318-1162.

Build Your Firm reserves the right to decline accounting firms for this program. Completing this application in no way obligates BYF to accept you. Some markets are currently closed due to pre-existing program participants. And some markets are too small and/or too soft economically.

| Personal Information: | |
|-------------------------------------|--|
| Your name? | |
| Home address? | |
| Are you a CPA, EA or other? | |
| What is your role? | |
| Estimated net worth? | |
| Liquid net worth? | |
| Have you ever filed for bankruptcy? | |
| How much debt does the firm have? | |
| Line of credit? | |

| Firm Information: | |
|---|--|
| Firm name? | |
| Firm address? | |
| Phone number? | |
| Fax number? | |
| Email address? | |
| Year established? | |
| Any other partners, if so, names. | |
| Names of staff, how long with you? | |
| Square footage of your entire office. | |
| How many offices? | |
| Do you have a retail presence? | |
| Have you ever merged or acquired another practice? If yes, explain. | |
| Are you securities licensed? | |
| If so, who is your broker/dealer? | |

| Operational Information: | |
|---|--|
| Gross annual revenues? | |
| Percent of revenues you keep? | |
| Number of business clients? | |
| Number of individual clients? | |
| Average annual fee per business client? | |
| Average annual fee per individual client? | |
| How many clients are write-up's. | |
| Explain the work flow / processing of the typical business client. Please use detail. | |
| Do you seek to prepare payroll or outsource it to a payroll company? | |
| On a scale from 1-10, with 10 being the busiest, how busy is your tax season? | |
| Do you have any specialties? Niches? | |
| Are there industries you prefer not to service? | |

| Please Breakdown Fees By Percent: | |
|--|--|
| Regular business accounting services. | |
| Annual business tax returns | |
| Annual individual tax returns. | |
| Other, explain. | |

| Software & Technology: | |
|--|--|
| What write-up software do you use? | |
| What tax prep software do you use? | |
| What billing software do you use? | |
| Do you bridge write-up software into your tax preparation software? | |
| On a scale from 1-10, with 10 being the highest, how Quickbooks savvy are you. | |
| What email program do you use? | |
| Do you use dial-up, Cable, DSL or T1? | |
| What percent of your clients do you maintain in an email address book? | |
| On a scale from 1-10, with 10 being the highest, how computer savvy are you? | |

| Advertising: | |
|--|--|
| What areas and cities would you like to market to? | |
| What types of advertising do you presently engage in, if applicable? | |
| Are you successful with it? Please explain. | |
| What is your monthly adv budget? | |
| What is your web site address? | |
| How many clients per month do you secure from referrals? | |
| Do you provide incorporation services? | |
| How often do you send out email newsletter? | |

| Goals: | |
|--|--|
| Where would you like your practice to be in 12-15 months from now? | |
| Name the top 3 goals for your business. | |
| What is your biggest strength in your practice? | |
| Where do you need to improve? | |
| Do you have the commitment, tenacity and persistence to follow through on the marketing plan we put together? Why? | |