





# FRANCHISE APPLICATION

## EMPLOYMENT HISTORY

List up to three current and/or previous forms of employment

Company Name		Length of Employment	
Address	City	State	Zip / Postal Code
Type of Business			
Responsibilities and Number of Employees Supervised			
Company Name		Length of Employment	
Address	City	State	Zip / Postal Code
Type of Business			
Responsibilities and Number of Employees Supervised			
Company Name		Length of Employment	
Address	City	State	Zip / Postal Code
Type of Business			
Responsibilities and Number of Employees Supervised			
May we contact your present employer? <input type="checkbox"/> Yes <input type="checkbox"/> No			
If yes please provide contact information:			
Employer Contact		Business Phone Number	



# FRANCHISE APPLICATION

## REFERENCES \* = REQUIRED FIELD

Please provide one personal and two business references

First Name*	Last Name*		
Address*	City*	State*	Zip / Postal Code*
Phone Number*			

First Name*	Last Name*		
Address*	City*	State*	Zip / Postal Code*
Phone Number*			

First Name*	Last Name*		
Address*	City*	State*	Zip / Postal Code*
Phone Number*			

Do you have experience operating a restaurant?\*

Yes  No

If Yes, please explain:

Who will run day-to-day operations?

## FINANCIAL INFORMATION \* = REQUIRED FIELD

Please indicate the following: (check one)\*

- Existing Entity  
 New Entity to be formed

Will your business entity be: (check one)\*

- Sole proprietorship  Partnership  
 Limited Partnership  Limited Liability Company (LLC)  
 Corporation

Name of Business Entity	State of Formation	Date of Legal Existence
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Primary Business Performed By Business Entity

Name of Owner(s), Partner(s) or Member(s)	Percentage of Ownership %
Name of Owner(s), Partner(s) or Member(s)	Percentage of Ownership %
Name of Owner(s), Partner(s) or Member(s)	Percentage of Ownership %



# FRANCHISE APPLICATION

## FINANCIAL INFORMATION CONTINUED \* = REQUIRED FIELD

Have you (and, if applicable, any partners, officers, directors, or shareholders) been subject to a or convicted of any criminal or civil action alleging a violation of any franchise law, fraud, embezzlement, fraudulent conversation, restraint or trade, unfair or deceptive practices, missappropriation of property, or comparable allegations? (Check one)\*  Yes  No

If Yes, please explain:

Have you (and, if applicable, any partners, officers, directors, or shareholders) ever been adjudged bankrupt or reorganized due to insolvency, or been a principle officer of any company of a partner in a partnership that was adjudged bankrupt or reorganized due to insolvency? (Check one)\*  Yes  No

If Yes, please explain:

Will your franchise investment come from your own capital?\*

Yes  No

### PERSONAL FINANCIAL INFORMATION

#### Assets

Cash on hand and in banks	\$
U.S. Government Securities	\$
Trade accounts and loans receivable	\$
Notes receivable - secured and unsecured	\$
Life insurance - cash surrender value	\$
Stocks & Bonds	\$
Real Estate	\$
Automobiles-market value	\$
Other assets, property, or investments (please itemize below)	
	\$
	\$
	\$
	\$
	\$
<b>Total Assets*</b>	<b>\$</b>

#### Liabilities

Notes payable to banks	\$
Notes, loans, accounts payable to others	\$
Credit card debt	\$
Loans against life insurance, 401k	\$
Property taxes & assessments payable	\$
Mortgages payable on real estate	\$
Liens on real estate	\$
Federal & state taxes on current income	\$
Other debts (please itemize below)	
	\$
	\$
	\$
	\$
	\$
<b>Total Liabilities*</b>	<b>\$</b>



# FRANCHISE APPLICATION

## FINANCIAL INFORMATION CONTINUED \* = REQUIRED FIELD

### Net Worth

Total assets	\$
Less total liabilities	- \$
<b>Net Worth*</b>	<b>\$</b>

### Annual Sources of Income

Salary	\$
Bonuses and commissions	\$
Dividends and Interests	\$
Real estate income	\$
Business income	\$
Other income (please itemize below)	
	\$
	\$
	\$
	\$
<b>Total Income*</b>	<b>\$</b>

Once you complete the application, please fax the form to

**1-704-825-4336**

Once your franchise application is received, Neil Newcomb, Principal of Franchise Sales, will be contacting you to discuss next steps.