



Franchise Application Form

1. Personal Information

- **Full Name:** _____
- **Date of Birth:** _____
- **Gender:** Male Female Other
- **Phone Number:** _____
- **Email Address:** _____
- **Residential Address:**

2. Co-Applicant Information (if applicable)

- **Full Name:** _____
- **Date of Birth:** _____
- **Gender:** Male Female Other
- **Phone Number:** _____
- **Email Address:** _____
- **Residential Address:**

3. Business Interest

- **Why are you interested in franchising with our restaurant?**

- **Preferred location(s) for franchise operation:**

- **Do you currently own or operate any other businesses?**

Yes No

If yes, please specify:

- **Have you ever owned a franchise before?**

Yes No

If yes, which brand and for how long?

4. Financial Information

- **Net Worth:** \$ _____
 - **Liquid Capital Available for Investment:** \$ _____
 - **Source of Capital (e.g. savings, loan, investor):**
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- **Do you have a business partner for this franchise?**

Yes No

If yes, please provide name and contact info:

5. Business Experience

- **Current Occupation/Job Title:** _____
 - **Company Name:** _____
 - **Years of Experience in Business/Management:** _____
 - **Briefly describe your management or food service experience:**
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6. Operational Commitment

- **Will you be directly involved in the day-to-day operation?**

Yes No

If no, who will manage operations?

- **How soon would you be ready to open a franchise?**

Immediately 1–3 Months 3–6 Months Other: _____

7. References

- **Professional Reference Name:** _____
- **Relationship:** _____
- **Phone/Email:** _____
- **Personal Reference Name:** _____
- **Relationship:** _____
- **Phone/Email:** _____

8. Additional Information

- **How did you hear about our franchise opportunity?**
 Website Social Media Referral Other: _____
- **Any other information you'd like us to consider:**

Signature: _____

Date: _____
