



## **CHEF CREOLE FRANCHISE CORP.**

### **CONFIDENTIAL FRANCHISE APPLICATION**

This application, when completed, is an essential part of evaluating your background and ability to purchase a Chef Creole franchise business. Please print or type and give specific answers to all questions. All answers are held in strictest confidence. The completion of this form does not obligate you in any way or manner.

If more than one individual will be part of a group purchasing the franchise, each proposed member of the group must fill out this application and sign it.

**Personal Profile**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone #s: Home: \_\_\_\_\_ Office: \_\_\_\_\_ Cell: \_\_\_\_\_

Best Number to call: Home Office Cell Best Time To Call: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_ Fax No.: \_\_\_\_\_

Spouse's Name: \_\_\_\_\_ No. of Dependents: \_\_\_\_\_

U.S. Citizen  Yes  No If No, name country: \_\_\_\_\_

**Educational History**  High School  College  Graduate Degree \_\_\_\_\_

Name of last school attended: \_\_\_\_\_

**Business Experience**

Please give present or last position first and provide the last 5 years of work/business history; attach an additional sheet if necessary.

1. Company \_\_\_\_\_ City, State \_\_\_\_\_

Position \_\_\_\_\_ Employed From \_\_\_\_\_ To \_\_\_\_\_

Major Accomplishments \_\_\_\_\_

\_\_\_\_\_

2. Company \_\_\_\_\_ City, State \_\_\_\_\_

Position \_\_\_\_\_ Employed From \_\_\_\_\_ To \_\_\_\_\_

Major Accomplishments \_\_\_\_\_

\_\_\_\_\_

3. Company \_\_\_\_\_ City, State \_\_\_\_\_

Position \_\_\_\_\_ Employed From \_\_\_\_\_ To \_\_\_\_\_

Major Accomplishments \_\_\_\_\_

\_\_\_\_\_

Will you have partner[s] in the business?  Yes  No

If yes, please identify all partners:

<u>Name</u>	<u>Address</u>	<u>Telephone #</u>	<u>Active in Franchise?</u>

1. Have you ever owned or been a partner in a business?  Yes  No

If yes, what type:

\_\_\_\_\_

2. Have you ever failed in business, filed bankruptcy or compromised with creditors? If yes, please give details and include any remaining liabilities. \_\_\_\_\_

\_\_\_\_\_

3. Have you or any of your family ever owned or worked in a food truck or restaurant?  Yes  No

If Yes, elaborate: \_\_\_\_\_

\_\_\_\_\_

4. Are there, or have there ever been, any lawsuits against you? If yes, explain: \_\_\_\_\_

\_\_\_\_\_

5. Please tell us why you are looking for a business opportunity: \_\_\_\_\_

\_\_\_\_\_

6. Where did you hear about Chef Creole? \_\_\_\_\_

\_\_\_\_\_

7. What do you like about our business? \_\_\_\_\_

\_\_\_\_\_

8. What does "franchising" mean to you? \_\_\_\_\_

\_\_\_\_\_

9. In your opinion, how would you describe the roles of the Franchisor and Franchisee in a franchise system?

\_\_\_\_\_

\_\_\_\_\_

10. Do you understand that the success or failure of your business is primarily your responsibility? Please provide your comments. \_\_\_\_\_

\_\_\_\_\_

11. What are your goals and objectives for the next 5 years? \_\_\_\_\_  
\_\_\_\_\_

12. There are some basic ingredients to every successful business. If you are awarded a franchise, what would you do to make it successful [please describe in detail]? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

13. Please list your geographic preference for locations:  
A) \_\_\_\_\_ B) \_\_\_\_\_ C) \_\_\_\_\_

14. If there are not opportunities available in your preference markets are you willing to relocate in order to become a Chef Creole franchise owner?  Yes  No

If Yes, indicate which markets: 1) \_\_\_\_\_ 2) \_\_\_\_\_

15. When will you be available to open the business?  
 Immediately  Within 3 months  Within 6 months  Within 1 year

16. When would you be available for training?  
 Immediately  Within 3 months  Within 6 months  Within 1 year

17. Do you plan to devote full time to this business venture?  Yes  No

18. Will your spouse be active in the franchise?  Yes  No

**PERSONAL REFERENCES**

Name	Telephone Number	Association
A. _____		
B. _____		
C. _____		

20. How will you finance this investment? [ ] Cash \_\_\_\_\_ [ ] Loan \_\_\_\_\_ [ ] Collateral \_\_\_\_\_

How much of the franchise investment will come from your own capital? \$ \_\_\_\_\_

What is your annual income requirement? \$ \_\_\_\_\_

Please provide the financial information set forth in the schedules on the next page:

Yearly Income	
Salary, Wages	\$
Bonus, Commissions	\$
Dividends, Interest	\$
Other Income	\$
<b>Total Yearly Income</b>	<b>\$</b>

Personal Balance Sheet			
Assets		Liabilities	
Cash	\$	Secured/Unsecured Notes Payable to others	\$
Marketable Securities	\$	Accounts Payable	\$
Non-Readily Marketable Securities	\$	Margin Accounts	\$
Net Cash Surrender Value of Life Insurance	\$	Notes due: Partnership	\$
Primary Residence Real Estate	\$	Mortgage Debt	\$
Real Estate Investments	\$	Life Insurance Loans	\$
IRA, Profit Sharing, other Vested Retirement Accts	\$	Other Liabilities	\$
Deferred Income	\$		
<b>Total Assets</b>	<b>\$</b>	<b>Total Liabilities</b>	<b>\$</b>
		<b>Total Net Worth</b>	<b>\$</b>

**In lieu of filling out the Personal Balance Sheet above, attach your most recent Financial Statement.**

Access to Capital		
Type	Name	Amount
Letter of Credit		\$
Bank		\$
Family		\$
Other		\$

\* Chef Creole Franchise Corp. reserves the right to request confirmation from parties named above to verify fund availability.

**Attach Resume, If Available.**

The information supplied by me/us on this application is true to the best of my/our knowledge.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Authorization:**

In connection with this application for a franchise with Chef Creole Franchise Corp. (“Chef Creole”), Applicant(s) hereby authorizes Chef Creole or its agents, to contact any present or past employer, school, financial institution, law enforcement agency, reference or any other person, firm or corporation.

Applicant(s) authorize and request any of the firms or persons contacted to provide all information concerning them, and hereby release said firms, institutions and their agents and employees from all liability and responsibility for releasing this information. Applicant(s) understand such reports may contain information concerning their credit history or criminal history. Applicant(s) agrees to restrict the use of this information only to the evaluation of Applicant(s) application for a Chef Creole franchise. With respect to any credit report pertaining to Applicant(s) credit history that is obtained in connection with this application, the permission granted herein to obtain a copy of Applicant(s) credit report shall be on-going, should Applicant(s) become a Chef Creole franchisee, and shall relate to any legitimate purpose associated with Applicant(s) status as a Chef Creole franchisee.

Applicant(s) is willing and requests that a photocopy of this Authorization be accepted with the same authority as the original. Applicant(s) further authorizes Chef Creole Franchise Corp, or its agents, to release to prospective financial sources such financial and other information concerning Applicant(s) in their files as may be requested.

Notice: The federal Equal Credit Opportunity Act prohibits creditors from discriminating against credit applicants on the basis of race, color, religion, national origin, sex, marital status, or age (provided the applicant has the capacity to enter into a binding contract); or because all or part of the applicant’s income derives from any public assistance program or because the applicant has in good faith exercised any right under the Consumer Credit Protection Act. The federal agency that administers compliance with this law concerning creditors is the Federal Trade Commission, Equal Credit Opportunity, Washington, DC 20580.

WITH THIS AUTHORIZATION INCLUDE A COPY OF THE APPLICANT’S DRIVERS LICENSE AND SOCIAL SECURITY CARD (if no social security card is available, provide a copy of the first page of such person’s last filed tax return).

By signing below, Applicant(s) agrees to keep all Confidential Information disclosed by the Chef Creole Franchise, Corp. strictly confidential and shall not use any Confidential Information for any purpose other than to determine whether to proceed as a Chef Creole franchisee. Applicant(s) agrees to limit access to Confidential Information to its legal advisors and/or business consultants. Applicant(s) agree not reproduce or transcribe Confidential Information. The term “**Confidential Information**” means: (a) the Chef Creole Franchise Disclosure Document and exhibits; and (b) any information in written, electronic or other tangible form communicated that is identified as confidential or proprietary or that, based on its nature and the circumstances surrounding its disclosure or receipt, a reasonable person would understand is proprietary or confidential (including Chef Creole Franchise Corp’s franchise business, advertising and marketing strategies, geographical locations, vendors, contacts, and websites, and client lists).

APPLICANT:

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_