



## FRANCHISE APPLICATION FORM

This Application is kept confidential. Neither party is bound in any way by its submission of this Application. This Application must be completed in full and returned to receive further contact and information from Loaded Pierogi. Please type or print clearly and attach additional documents or schedules, if necessary, to provide full disclosure.

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

### **PERSONAL INFORMATION**

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Name: \_\_\_\_\_ Social Insurance No. \_\_\_\_/\_\_\_\_/\_\_\_\_

Address: \_\_\_\_\_ Unit # \_\_\_\_\_

City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Res Tel: (\_\_\_\_) \_\_\_\_ - \_\_\_\_\_ Bus Tel: (\_\_\_\_) \_\_\_\_ - \_\_\_\_\_

Cell No: (\_\_\_\_) \_\_\_\_ - \_\_\_\_\_ Fax No: (\_\_\_\_) \_\_\_\_ - \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Date of birth: \_\_\_\_\_ Marital status: \_\_\_\_\_ No. of dependents: \_\_\_\_\_

Spouse's name: \_\_\_\_\_ Spouse's occupation: \_\_\_\_\_

Country of citizenship: \_\_\_\_\_ Place of permanent residency: \_\_\_\_\_

Have you ever been convicted of a criminal offence or have any criminal charge pending or being appealed, or are you under indictment? Yes (\_\_\_) No (\_\_\_) If yes, please state details:

\_\_\_\_\_  
\_\_\_\_\_

### **BUSINESS INTEREST**

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How did you become interested in a Loaded Pierogi franchise and why? \_\_\_\_\_

\_\_\_\_\_

Have you ever owned or had an interest in any operation within the food service industry? Yes (\_\_\_)  
No (\_\_\_) if yes, please give details:

\_\_\_\_\_

Have you ever been involved in any litigation or arbitration/mediation with respect to your previous business history? Yes (\_\_\_) No (\_\_\_) If yes, please explain:

\_\_\_\_\_

What percent of the business will you own? \_\_\_% Will you work in the business full time? Yes (\_\_\_) No (\_\_\_) If no, please explain: \_\_\_\_\_

Who will be responsible for the day-to-day operations? \_\_\_\_\_



Will you have a business partner? Yes (\_\_\_) No (\_\_\_) if yes, please give name of each partner:

- 1) \_\_\_\_\_
- 2) \_\_\_\_\_

Note: A separate application and financial statements are required for each partner.

**LOCATION PREFERENCES**

1st Preference: \_\_\_\_\_

Location City Province

2nd Preference: \_\_\_\_\_

Location City Province

3rd Preference: \_\_\_\_\_

Location City Province

**EMPLOYMENT HISTORY** (Give present or most recent position first) \_\_\_\_\_

May we contact your present employer? Yes (\_\_\_) No (\_\_\_)

Name of Firm: \_\_\_\_\_

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

Type of business: \_\_\_\_\_ Employed from: \_\_\_\_\_ to \_\_\_\_\_

Supervisor: \_\_\_\_\_ Telephone: (\_\_\_\_) \_\_\_\_ - \_\_\_\_\_

Position: \_\_\_\_\_ Annual Compensation: \$ \_\_\_\_\_

Duties and Responsibilities: \_\_\_\_\_

Name of Firm: \_\_\_\_\_

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

Type of business: \_\_\_\_\_ Employed from: \_\_\_\_\_ to \_\_\_\_\_

Supervisor: \_\_\_\_\_ Telephone: (\_\_\_\_) \_\_\_\_ - \_\_\_\_\_

Position: \_\_\_\_\_ Annual Compensation: \$ \_\_\_\_\_

Duties and Responsibilities: \_\_\_\_\_

Have you ever worked within the food service industry? Yes (\_\_\_) No (\_\_\_) if yes, when & where?

\_\_\_\_\_

Describe any training in sales, management or retailing: \_\_\_\_\_

\_\_\_\_\_

Have you ever been self-employed? Yes (\_\_\_) No (\_\_\_) if yes, explain \_\_\_\_\_

\_\_\_\_\_





How will you finance this business venture? Cash \$ \_\_\_\_\_ Loan \$ \_\_\_\_\_

What is the source of this Capital? \_\_\_\_\_

**BANKING INFORMATION**

Bank name \_\_\_\_\_ Location \_\_\_\_\_ Account Number/Type \_\_\_\_\_ How Long? \_\_\_\_\_

Bank name \_\_\_\_\_ Location \_\_\_\_\_ Account Number/Type \_\_\_\_\_ How Long? \_\_\_\_\_

**LISTED STOCKS, BONDS AND DEBENTURES**

_____	\$ _____	\$ _____	\$ _____	\$ _____
Description	Face Value	Cost	Present Value	Last Yr Income

_____	\$ _____	\$ _____	\$ _____	\$ _____
Description	Face Value	Cost	Present Value	Last Yr Income

_____	\$ _____	\$ _____	\$ _____	\$ _____
Description	Face Value	Cost	Present Value	Last Yr Income

**REAL ESTATE HOLDINGS**

Address _____	Registered Owner _____
_____ \$ _____	\$ _____ \$ _____
Mortgagee _____	Cost _____ Present Value _____ Mortgage Owing _____

Address _____	Registered Owner _____
_____ \$ _____	\$ _____ \$ _____
Mortgagee _____	Cost _____ Present Value _____ Mortgage Owing _____

Address _____	Registered Owner _____
_____ \$ _____	\$ _____ \$ _____
Mortgagee _____	Cost _____ Present Value _____ Mortgage Owing _____

**PERSONAL REFERENCES** (Please name three persons who have known you for at least two years) \_\_\_\_\_

1. \_\_\_\_\_ (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_  
 Name Address Occupation Telephone
2. \_\_\_\_\_ (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_  
 Name Address Occupation Telephone
3. \_\_\_\_\_ (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_  
 Name Address Occupation Telephone



**FRANCHISE APPLICATION ACKNOWLEDGEMENT**

Privacy Legislation deems that personal information collected by a corporation from any individual is considered confidential and may not be used or disclosed by the corporation for any purpose unless either the individual has consented to such disclosure or a legislative exception applies such that consent is not required. Your signature on this form constitutes consent for Loaded Pierogi to:

1. Use the personal information contained in this form to consider your application and, if your application is accepted, for internal use and for use in any documents promoting Loaded Pierogi franchise business.
2. Disclose the personal information contained in this form to any person, firm or corporation and collect additional personal information from such person(s), firm(s) or corporations(s) for the purposes of verifying the personal information contained in this form and determining whether or not you would be a suitable Loaded Pierogi franchisee.

In particular, the undersigned acknowledges that an investigation may be made with respect to the personal information contained in this form and that further information may be gathered with respect to the undersigned's financial status. The undersigned authorizes his or her former employers, educational institutions, financial institutions and references to release personal information in their possession regarding the undersigned to Loaded Pierogi. The undersigned voluntarily waives all recourse and releases Loaded Pierogi from any claim or liability whatsoever in any way relating to such an investigation or to the use of the results of such an investigation. The undersigned also releases any person, firm or corporation providing personal information to Loaded Pierogi. from any claim or liability whatsoever in any way relating to the information provided by them.

The undersigned further acknowledges that Loaded Pierogi has many criteria for accepting a franchisee, and has the right to reject any applicant without itemizing the reasons for such rejection.

The undersigned certifies that this form has been completed fully and accurately, to the best of his or her knowledge, and that it includes true and accurate information concerning the financial condition of the undersigned as of the date hereof. Any false information or material omission in this form could result in the disqualification of the application from consideration and immediate termination of any agreement reached between the undersigned and Loaded Pierogi if discovered after the application is accepted.

If an applicant's application is rejected, the applicant will be required to submit a new application if he/she wishes to re-apply Loaded Pierogi confirms that it will comply with all applicable privacy legislation in the retention and destruction of such information.

DATED THE \_\_\_\_\_ DAY OF \_\_\_\_\_, 20\_\_\_\_\_

\_\_\_\_\_  
APPLICANT'S SIGNATURE

\_\_\_\_\_  
APPLICANT'S NAME (please print)

\_\_\_\_\_  
SPOUSE'S SIGNATURE (if applicable)

\_\_\_\_\_  
SPOUSE'S NAME (please print)