



FRANCHISE APPLICATION

Name
PO Box..... City..... Country.....
Physical Address.....
Telephone..... Fax..... Email.....
Qualifications..... Profession.....
Franchise experience
Business experience

Please provide a detailed CV of the applicant , Trade license (if any),Passport copy Details about the proposed location like size, drawings etc.

Preferred type of franchise (please circle) Single Unit/Area franchise/Master franchise
The country of proposed franchise..... City Area.....
What is your available capital for this project
Any available locations for franchise.....
Expected date to start the business.....

Is there any other information you wish to provide in support of your application

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Reference 1).....

2).....

Signature.....

Date.....