

cupcakes franchise application

The filing of this application does not obligate the potential Franchisee to purchase or the Franchisor to sell a Franchise. Complete in full and do not use abbreviation. Please print clearly or type. Fields marked in * are mandatory.

Personal Information

* Name (first/last/middle initial)	* Home Phone	* Cell Phone
* Current Mailing Address (street/city/postal code)		
* Country of Residence	* Email Address	
* Social Security Number (S.I.N)	* Date of Birth (MM/DD/YEAR)	
* Country of Citizenship	* Gender	
* Are you legal age in your State/Province/Residential Area? YES or NO		
* Have you been convicted of a felony? If YES, explain.		
* Have you been involved in any litigation proceeding within the last 5 years? If YES, explain.		
* Have you or your spouse ever declared personal bankruptcy? If YES, explain.		

Spouse Personal Information

* Name (first/last/middle initial)	* Home Phone	* Cell Phone
* Current Mailing Address (street/city/postal code)		
* Country of Residence	* Email Address	
* Social Security Number (S.I.N)	* Date of Birth (MM/DD/YEAR)	
* Country of Citizenship	* Gender	
* Are you legal age in your State/Province/Residential Area? YES or NO		
* Have you been convicted of a felony? If YES, explain.		
* Have you been involved in any litigation proceeding within the last 5 years? If YES, explain.		
* Have you or your spouse ever declared personal bankruptcy? If YES, explain.		

Educational Background

* Last year of school completed	* Name of College and/or Postgraduate School	* Degree
* Describe any specialized training and/or courses acquired		

Business Experience (complete all questions)

Present Occupation	Position	Dates Employed
Company Name		Address
Job description (include number of employees supervised)		
Previous Occupation	Position	Dates Employed
Company Name		Address
Job description (include number of employees supervised)		
Have you ever owned your own business or a Franchise? If YES, explain.		
Have you ever had a business fail? If YES, explain.		

Financial Information (please list figures in cdn dollars)

* Income from current occupation		
* Income from other sources		
* Explain all other sources of income		
* Personal Bank Name	* Branch and Account Number	* Address (street/city)
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* List Individual Liquid Assets (cash, stocks, etc)		
* List Individual Fixed Assets (home, car, etc.)		
* Individual Total Assets (liquid + fixed)		
* List Individual Liabilities (mortgages, loans, credit cards, etc.)		
* Your Individual Total Net Worth (total assets – liabilities)		
* Would this business be your sole income source?		

Partners

* Will you have a partner? If YES, please complete this section.			
* Partner Name (first/last/middle initial)	* Gender	* % of Ownership	* Active or Silent
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Miscellaneous Information

List any hobbies, community activities, special interests or other pertinent information
* Will you devote your full time to this business?
* Have you ever worked at Cupcakes before? If YES, explain.
* What city/location/geographical area are you applying for? * What is your timeline to open a Franchise?

References (exclude relatives)

* Name (first/last/middle initial)	* Home Phone	* Cell Phone
* Current Mailing Address (street/city/postal code)		
* Name (first/last/middle initial)	* Home Phone	* Cell Phone
* Current Mailing Address (street/city/postal code)		
* Name (first/last/middle initial)	* Home Phone	* Cell Phone
* Current Mailing Address (street/city/postal code)		

Disclaimer

I understand that the granting of a franchise is at the sole discretion of the Franchisor (Hangar Enterprises, Inc., dba Cupcakes by Heather & Lori). I understand that any information I receive from the Franchisor or from any employee, or agent is highly confidential ("Confidential Information"), has been developed with a great deal of effort and expense to the Franchisor, and is being made available to me solely because of this Application. I agree that I shall treat and maintain all Confidential Information as confidential, and I shall not, at any time, without the express written consent of the Directors of the Franchisor, disclose, publish, or divulge any Confidential Information to any person, firm, corporation or other entity, or use any Confidential Information, directly or indirectly, for my own benefit or the benefit of any person, firm, corporation or other entity, other than the benefit of the Franchisor. **I certify that the information presented in this Application is true and accurate.** I grant the Franchisor permission to perform usual inquiries, reference checks, credit, and criminal checks regarding the information provided in this application.

Print Name below to acknowledge you have read the disclaimer and to indicate consent to perform credit and criminal checks.

Signature will be required at time of sale.

Applicant's Name and Date (please print)	Spouse Name and Date (please print)

