

FRANCHISE APPLICATION

(Each Owner/ Partner associated with the purchase of the Franchise must complete a Franchise Application)

PERSONAL INFORMATION:

Name of Applicant:		Date of Birth:		
Marital Status:		Name of Spouse:		
Home Address:	_ City:	Province:	Postal Code:	
Home Phone #: ()		Cell Phone #: ()		
Email:				
Business Address:	City: _	Province:	Postal Code:	
Business Phone #: ()		_		
Are you a citizen of Canada?				
Are you legally entitled to work in Canada?				
D				
Have you ever owned your own business?				
Are you currently involved in any pending legal action?				
If "YES", please provide details:				

Have you ever filed for bankruptcy protection	n?	
If "YES", please provide details:		
Do you currently have ownership or are you	employed by Food Services	based Franchise/ Company?
If "YES", please provide details:		
Will you have partners? If so, please provide	details:	
Will die breimage vormeel(?)		
Will you run this business yourself?		
If "NO", please provide details:		
EDUCATION:		
High School (Last Attended):	Address	Did you Graduate?
		Y/N
Callana an University (Lost Attended).	Address	
College or University (Last Attended):	Address	Did you Graduate?
Major:		Y/N
Other, e.g. Trade School:	Address	Did you Graduate?

EMPLOYMENT HISTORY: Please provide the information in the table below for your last 5 years of employment history, starting with the most recent employer.

Name and Address of Employer	Dates of Employment	Type of Business	Name of Supervisor	Supervisor's Phone #.	Salary	Position	Reason for Leaving
Employer	Emproyment	Dusiness	Supervisor				Leaving

PERSONAL NET WORTH:

Bank and Credit References: Please provide a list of all financial institutions where you have conducted business.

Name of Financial Institution	Phone Number	Contact Name	Account No.

ASSETS	LIABILITIES	
Cash	Notes Payable to Banks	
Investments (Stocks, Bonds)	Credit Cards	
Real Estate (Value)	Mortgages Payable	
RRSP'S	Notes Payable to Others	
Automobiles	Unpaid Taxes (Income and Property)	
Other Assets	Other Liabilities	
Total Assets	Total Liabilities	
Total Assets	<u> </u>	
-) Total Liabilities	<u></u>	
- Net worth		

REFERENCES	(Please	provide 3	References
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Full Name	Address	Occupation	Phone No.	Years Acquainted

GEOGRAPHIC AREA OF INTEREST:	
FIRST CHOICE:	
SECOND CHOICE:	
THIRD CHOICE:	

MISCELLANEOUS INFORMATION:

1.	When you will be able to start this venture?
2.	Do you expect to devote your full time attention to this business?
3.	If not full time, how often?
4.	Will you employ a full time Manager?
5.	Are you related to any Director/ Employee or Franchisee of Pizza Depot?
	If "YES", please provide details:
6.	Do you or your Employer have a business relationship and supply goods or services to Pizza Depot?
	If "YES", please provide details:
7.	Will you be operating this Franchise as a Corporation/ Partnership?
	If "YES", please provide details:

ACKNOWLEDGEMENT, AUTHORIZATION AND RELEASE

The Applicant understands that submitting this application does not bind or commit Pizza Depot to accept him/ h e r as a Franchisee. The Applicant authorizes Pizza Depot and their respective agents to start an investigative report including credit investigation based on the information voluntarily provided to them.

The Applicant hereby certifies that the information contained in this Franchise Application including the financial statements and any additional pages submitted are true and complete and that Pizza Depot may consider this statement as true and complete until further written notice of change is provided to Pizza Depot.

Furthermore, Pizza Depot and its agents are authorized to make any and all inquiries as it deems necessary to verify the accuracy of the information submitted in this application and financial statements. Pizza Depot may conduct any additional background and financial investigation.

Applicant, for him/herself and on behalf of any partners or shareholders, hereby agrees to hold Pizza Depot, its parent, subsidiaries, affiliated directors, employees, and agents harmless and indemnify each of them from any and all claims, liabilities, damages, expenses, including legal fees and costs which may arise or in a way be connected with information supplied by applicant or others, including the verification by Pizza Depot and its agents of any such information.

Name:	
Date:	
Signature:	

It is the policy of Pizza Depot to make no discrimination in granting franchise because of Race, Colour, Religion, Age, Sex, Ancestry, National Origin or Marital Status, of the presence of a disability or handicap that is not related to operating a Pizza Depot.