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ADDRESS Cafe De Khan
6400 Millcreek Drive, Unit #13
Mississauga, ON, L5N 6A3

Applicant's Name _____

**CAFE DE KHAN
FRANCHISE APPLICATION**

CONFIDENTIAL

This application does not obligate either party in any way. We will not contact your employer or references without your approval. See our privacy policy on the last page.

(Please provide additional details on a separate sheet as applicable.)

Personal Information

Name	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	First	Last	Middle Initial	Social Insurance Number
Home Address	<input type="text"/>		Country of Citizenship /Status in Canada	<input type="text"/>
City	<input type="text"/>	Province	<input type="text"/>	Postal Code <input type="text"/>
Home Phone	<input type="text"/>		Business Phone	<input type="text"/>
Date of Birth	<input type="text"/>		Email Address	<input type="text"/>
Best time to contact	<input type="text"/>		May we contact you at your business phone?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Marital Status	<input type="checkbox"/> Married <input type="checkbox"/> Single <input type="checkbox"/> Divorced		Number of Children	<input type="text"/>
			How many people, including yourself, are dependent on you for support? <input type="text"/>	
Is your spouse employed?	<input type="checkbox"/>	Spouse's Position/Job Description.	<input type="text"/>	Spouse's Annual Salary
				<input type="text"/>
Have you ever been convicted of anything other than minor traffic violations? Has any judgment ever been entered against you or your company or your employer where you were one of the litigants? Are you involved in pending litigation? If yes, explain.			<input type="text"/>	
Have you or your spouse ever declared personal bankruptcy? Has any business in which you were an officer, director, or shareholder ever failed, filed bankruptcy, or become insolvent or compromised debts? If yes, explain.			<input type="text"/>	

EDUCATION

Last year of school completed	Name of university and/or graduate school	Degree
<input type="text"/>	<input type="text"/>	<input type="text"/>

Work History

Present Occupation	<input type="text"/>	Position	<input type="text"/>	Dates employed	<input type="text"/>
Describe duties, number of employees supervised and responsibilities		<input type="text"/>			
Previous business experience (list most recent first)					
Occupation	Position	Dates Employed	Reason left		
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>		
Company	<input type="text"/>	Address	<input type="text"/>		
Describe duties, number of employees supervised and responsibilities		<input type="text"/>			

Occupation	Position	Dates Employed	Reason left
Company		Address	
Describe duties, number of employees supervised and responsibilities			

PERSONAL FINANCIAL INFORMATION

ASSETS

Cash (Checking & Savings)	
Investments	
Stocks, Bonds, CD's	
Accounts and Notes Receivable	
Real Estate Owned (Market Value)	
Home	
Other	
Automobile(s): Year, Make, Model	
Personal Property and Furniture	
Face Value of Life Insurance	
Cash Surrender Value of Life Insurance	
Retirement Accounts	
RRSP	
401K	
IRA	
Other Assets – Itemize	
(Attach additional sheets if necessary)	
TOTAL ASSETS	

LIABILITIES

Notes Payable: Name Payee Below	
to Banks	
Others	
Instalment Credit Card Debts	
Automobile(s) Debt	
Other Accounts Payable	
Mortgage(s) Payable on Real Estate	
First Mortgage(s)	
Home Equity Line of Credit	
Unpaid Real Estate Taxes	
Unpaid Income Taxes	
Secured Loans	
Other Liabilities & Debts	
(Attach additional sheets if necessary)	
TOTAL LIABILITIES	
NET WORTH	
(Total Assets minus Total Liabilities)	

OTHER INFORMATION

Does your spouse or another person have any interest in any of the assets listed above?

If yes, explain and list the assets.

How much cash will you have available to invest in and operate your franchise?

What sources of investment and operating capital will be available to you?

Relatives Home Equity Loan Bank Loan Partner(s) Other

Will you have any other source of income during the first year of your franchise? What is the source?

Do you intend to devote your full time to your franchise?

Yes NO

Have you ever owned your own business (including another franchise)? If so, describe it in detail.

Do you have any management experience? If so, describe it in detail.

Do you have any sales or marketing experience? If so, describe it in detail.

Do you have any experience in the restaurant or food industry? If so, describe it in detail.

Have you ever worked for Cafe De Khan? If so, provide full details.

What is your commitment to success and what are your goals for the franchise?

Have you ever been involved in a business failure? If so, explain.

Why are you interested in a Cafe De Khan franchise?

Why do you believe you will be a good franchisee?

Why are you interested in our industry?

Will you have a partner? If so, list each partner's name.
EACH PARTNER MUST COMPLETE A SEPARATE APPLICATION

Do you have a preference for a particular franchise territory? Which Town/City/Province/Country?

When will you be available to purchase a Cafe De Khan franchise?

PERSONAL REFERENCES (other than employers or relatives – at least One)

Full Name	<input type="text"/>	Address	<input type="text"/>		
Home Phone	<input type="text"/>	Occupation	<input type="text"/>	Years known	<input type="text"/>
Full Name	<input type="text"/>	Address	<input type="text"/>		
Home Phone	<input type="text"/>	Occupation	<input type="text"/>	Years known	<input type="text"/>
Full Name	<input type="text"/>	Address	<input type="text"/>		
Home Phone	<input type="text"/>	Occupation	<input type="text"/>	Years known	<input type="text"/>

I understand that this is not a contract and does not obligate me in any way, except that I agree not to use or disclose any confidential or proprietary information I may receive from Cafe De Khan or its employees, agents, or franchisees. I certify that all the information given above is true and complete to the best of my knowledge, and I understand that my franchise agreement may be terminated if I have made any false or incomplete statements in this application. I will promptly notify Cafe De Khan of any material change in any of the above information or any subsequent information provided to Cafe De Khan. I understand that this is an application to purchase a franchise, and that this is not a franchise agreement and does not obligate Cafe De Khan to grant me a franchise or to enter into a franchise or other agreement with me. I authorize Cafe De Khan and its' agents to verify the information in this application from my credit sources, current and former employers, and personal references. I authorize each bank, financial institution, creditor, employer and others named in this application to provide Cafe De Khan or its' agents with all information necessary to verify the information in this application, and I release each of them from, and waive all claims against each of them for, any liability for damages that may result from their provision of true and accurate information. I acknowledge that I have received a copy of this application.

Signature (Applicant)

Date

Signature (Spouse/Second Applicant)

Date

PRIVACY POLICY. Cafe De Khan may share personal information with our affiliates. Any use of this information by us or our affiliates will comply with this policy. We may engage companies to perform a variety of functions, such as fulfilling orders, assisting with promotions, providing technical services for our web site, etc. These companies may have access to your personal information if needed to perform their functions for us. However, these companies may only use your personal information for the purpose of performing that function and may not use it for any other purpose. We do not sell, transfer, or disclose personal information to third parties other than our affiliates. We reserve the right to use or disclose any information as needed to satisfy any law, regulation or legal request, to fulfil your requests, or to cooperate in any law enforcement investigation or an investigation on a matter of public safety.