

APPLICATION

For inquiry franchise business

FD0001-1

SECTION 1

PERSONAL DETAILS

Full Name

Email

Mobile

Telephone

Address

SECTION 2

PREFERRED LOCATION & BUDGET

1st Location:

2nd Location:

3rd Location:

Budget:

SECTION 3

BUSINESS EXPECTATION

Expectation of sales turnover (/Month)

Expectation of profit (/Month)

SECTION 4

PREVIOUS EXPERIENCE DETAIL & TRAINING REQUIREMENT

Please describe your previous experience or employment details.

Training Required (Training Agreement Form required to be submitted.)

SECTION 5

FINANCIAL INFORMATION

Please provide the supporting documents

1. How will your business be operated?

2. Business TYPE Company Partnership Sole trader

Directors/Partner's name

ABN if applicable

3. Financial Information – Statement of asset and liabilities

Assets	Details/Amount	Liabilities	Details/Amount
Cash at bank		Bank overdraft	
Other		Creditor/Others	
Real estate: Address		Mortgage Amount	
Other Assets		Other Liabilities	
Home Contents		Business Loan	
Motor Vehicles		Motor Vehicle Leasing	
Other Investment		Tax Liability	
Total Assets		Total Liabilities	

I hereby certify that the above information given are true and correct.

Applicant Name

Signature

Date