

# Confidential Preliminary Franchise Opportunity Application

This application form must be printed and completed in full as far as possible.

Full Name: \_\_\_\_\_ ID No: \_\_\_\_\_

Physical Address: \_\_\_\_\_

\_\_\_\_\_ Email Address: \_\_\_\_\_

Business Phone: \_\_\_\_\_ Cellular Phone: \_\_\_\_\_

Age: \_\_\_\_\_ Occupation: \_\_\_\_\_

Employed  Self Employed

Employed By / Name of your business: \_\_\_\_\_

How long at present occupation? \_\_\_\_\_

Married  Single

Spouse Name If married: \_\_\_\_\_ ID No: \_\_\_\_\_

Spouse Employment: \_\_\_\_\_

Number of Dependants: \_\_\_\_\_ Ages: \_\_\_\_\_

Previous Physical Address: \_\_\_\_\_ How long?: \_\_\_\_\_

Do you own your own home?:  Yes  No If owned, outstanding bond amount: R \_\_\_\_\_

Do you have a minimum of R1.3 million unencumbered cash to invest?  Yes  No

Name of Bank: \_\_\_\_\_

Type of Account: Current  Savings  Both

Have you ever had a judgement against you? \_\_\_\_\_ If so, for what amount? \_\_\_\_\_

Have you ever been refused finance? \_\_\_\_\_ If so, how long ago? \_\_\_\_\_

Have you ever been convicted of a crime? \_\_\_\_\_

If so, for what? \_\_\_\_\_

Have you ever owned your own business? \_\_\_\_\_

If so, please describe: \_\_\_\_\_

Have you ever failed in business? \_\_\_\_\_

if so, why? \_\_\_\_\_

Will you be able to devote the time that is needed for a new business?  Yes  No

If not, who do you have in mind for your operational partner? \_\_\_\_\_

In what district / town are you considering establishing your new franchise? \_\_\_\_\_

If accepted, how soon would you be available to operate your franchise full time? \_\_\_\_\_

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continued

<b>Asset Values:</b>		<b>Liabilities:</b>		<b>Net Worth:</b>	
Property Owned:	R	Mortgage Bond:	R		
Savings Account:	R	Overdraft:	R		
Pension Fund:	R			Surrender Value:	R
Cash Investments:	R			Surrender Value:	R
Public Company Shares:	R				
Other:	R				
<b>Total:</b>	<b>R</b>	<b>Total:</b>	<b>R</b>	<b>Net Worth:</b>	<b>R</b>

Monthly Cost of Living: R \_\_\_\_\_  
*(eg: Utilities, School fees, Transport, Groceries, Bond, Accounts/other)*

## Personal information

List educational background (note: you may attach a resumé for education and employment details)

School: \_\_\_\_\_ Attended: \_\_\_\_\_ to \_\_\_\_\_

Tertiary: \_\_\_\_\_ Attended: \_\_\_\_\_ to \_\_\_\_\_

Other: \_\_\_\_\_

List employment history for the past 5 years (note: you may attach a resumé for this and education)

Employer: \_\_\_\_\_ Attended: \_\_\_\_\_ to \_\_\_\_\_

Employer: \_\_\_\_\_ Attended: \_\_\_\_\_ to \_\_\_\_\_

Employer: \_\_\_\_\_ Attended: \_\_\_\_\_ to \_\_\_\_\_

Give complete names and addresses of three credit references:

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

Give complete names and phone numbers of three character references:

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

*This application is not to be construed as a binding agreement for either party, but does give Cash Converters the right to check the information provided within.*

Do you consent to credit check?  Yes  No

Applicant's signature: \_\_\_\_\_ Date: \_\_\_\_\_