

Franchise Application



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WING CO.





PERSONAL DATA

Name:		DOB:
Entity: \square LLC \square Corporation \square Not Yet Established	ed If Established, Entity Nam	e:
Home Address:		
City:		State: Zip:
Primary Phone:	Secondary Phone:	
Best Time to Call:		
E-Mail Address:	Fax:	
Number of Dependents:	Ages:	
U.S. Citizen: ☐ Yes ☐ No If No, Name Country Cit	tizenship or Describe US Immig	gration Status:
Name of Last School Attended: BUS Please give present or last position first, and provadditional sheet if necessary.	INESS EXPERIENCE ride the last 5 years of work/bu	usiness history; attach an
1.Company:	City:	State:
Position:	Employed from:	to:
Major Accomplishments:		
2.Company:	City:	State:
Position:	Employed from:	to:
Major Accomplishments:		
3.Company:	City:	State:
Position:	Employed from:	to:

Name	Address	Phone	Active In Franchise
L. Have vou ever owne	d or been a partner in a business? □\	'es □ No	
If Yes, what type:			
Have you ever failed	l in business, filed bankruptcy, or comp	romised with creditors? 🗆 Yes 🗆	No
-	letails and include any remaining liabi		
3. Are there, or have th	nere ever been, any lawsuits against yo	u? □ Yes □ No If Yes, explain:	
4. Have you ever been	convicted of a crime? □ Yes □ No	If Yes, explain:	
4. Have you ever been	convicted of a crime? □ Yes □ No	If Yes, explain:	
4. Have you ever been	convicted of a crime? □ Yes □ No	If Yes, explain:	
	convicted of a crime?	· ·	please elaborate:
		· ·	please elaborate:
		· ·	please elaborate:
5. Have you or any of y		nt industry? □ Yes □ No If Yes,	please elaborate:
5. Have you or any of y	our family ever worked in the restauran	nt industry? □ Yes □ No If Yes,	please elaborate:
5. Have you or any of y	our family ever worked in the restauran	nt industry? □ Yes □ No If Yes,	please elaborate:
5. Have you or any of y	our family ever worked in the restauran	nt industry?	please elaborate:
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5. Have you or any of y	our family ever worked in the restauran	nt industry?	please elaborate:
5. Have you or any of y	our family ever worked in the restauran ou are looking for a business opportuni about The Station Seafood Company / Ca	nt industry?	please elaborate:
5. Have you or any of y 6. Please tell us why yo	our family ever worked in the restauran ou are looking for a business opportuni about The Station Seafood Company / Ca	nt industry?	please elaborate:
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9. What does "franchising" mean to you?
10. In your opinion, how would you describe the roles of the Franchisor and Franchisee [Strategic-Partner]
in a Franchise System?
11. What are your goals and objectives for the next 5 years?
12. There are some basic ingredients to every successful business. If you are awarded a franchise, what would you do to make it successful? (Please describe in detail.)
13. Catfish Station's most successful franchisees are those that follow our systems as it relates to all aspects of restaraunt operations. Do you feel comfortable owning a business where you will receive direct instruction on how to successfully operate every aspect of your restaraunt? □Yes □ No If No, explain:
14. Please list your market preferences for locations (City/State):
1. 2. 3.
15. When will you be available to open the business?
☐ Immediately ☐ Within 3 months ☐ Within 6 months ☐ Within 1 year
16. When would you be available for training?
\square Immediately \square Within 3 months \square Within 6 months \square Within 1 year
17. Do you plan to devote full time to this business venture? ☐ Yes ☐ No
18. Will your spouse be active in the franchise? ☐ Yes ☐ No ☐ Not Applicable



CONFIDENTIAL PERSONAL FINANCIAL STATEMENT

PLEASE ENTER IN ALL VALUES

. WITHOUT COMMAS

Accounts/Notes Receivable Stocks Job Takes Payable Job Total Real Estate AUTHORITH Liabilities TOTAL ASSETS Job Total Liabilities Spuse Name: ANNUAL INCOME Salary Spuse Sa	ASSETS	LIABILITIES	
Accounts/Notes Receivable Stocks OO Taxes Payable OO Ther Liabilities OO Ther Liabilities OO Total Liabilities OO Total Liabilities OO Total Liabilities OO Total Expense OO Total Lindows OO Tot	Bank Accounts	.00 Mortgage Payable	.00
Stocks 401K	Accounts/Notes Receivable		.00
401K IRA	Stocks	.00 Taxes Payable	.00
Real Estate Automobiles Business Assets Other Assets Please Specify Other Assets TOTAL ASSETS Oo TOTAL LIABILITIES OO NET WORTH (Total Assets - Total Liabilities) Is the financial information the same as your spouse? Yes No Not Applicable Spouse Name: ANNUAL INCOME ANNUAL EXPENDITURES Salary OO Mortgage/Rent Expense Solonus & Commission OO Accounts Payable Oo Dividend Income Oo Income®ites Real Estate Income Other OO Other OO Other OO OTAL LIABILITIES OO OO OO TOTAL LIABILITIES OO OO NOT Applicable SSN: ANNUAL INCOME ANNUAL EXPENDITURES OO ONE Payable OO OO OTOTAL SPAYABLE OO OO OTOTAL STANDARD OO OO OTOTAL STANDARD OO OO OTOTAL STANDARD OO OO OTOTAL STANDARD OO OO OTOTAL LIQUID CAPITAL/CASH AWAILABLE OO TOTAL LIQUID CAPITAL/CASH AWAILABLE OO TOTAL LIQUID CAPITAL/CASH AWAILABLE OO TOTAL AMOUNT WILLING TO INVEST OO OO OORMAN, LLC and its affiliates to yall financial institutions, credit bureaus, other public and private reporting organizations, government regulatory entities, employers, and other references in connection with this application.	401K		.00
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Step Company Cartish Station Seafood Company Cartish Station to obtain verification of all information provided in this personal financial statement. The undersigned also authorizes release of personal information to CFS Franchising Company, LLC and its affiliates by all financial institutions, credit bureaus, over the company connection with this application.	TOTAL ASSETS	.00 TOTAL LIABILITIES	.00
State Total Liabilities	NET WORTH	00	
ANNUAL INCOME ANNUAL EXPENDITURES Salary .00 Mortgage/Rent Expense .00 Spouse Salary .00 Notes Payable .00 Notes Payable .00 Dividend Income .00 Incomexes .00 Incomexes .00 Insurance .00 Insurance .00 Other .00 Other .00 Other .00 TOTAL INCOME .00 TOTAL EXPENSES .00 ANNUAL NET CASH FLOW (Income Expenses) TOTALLIQUID CAPITAL/CASH AVAILABLE .00 TOTAL AMOUNT WILLING TO INVEST .00 Your signature below authorizes The Station Seafood Company / Catfish Station to obtain verification of all information provided in this personal financial statement. The undersigned also authorizes release of personal information to CFS Franchising Company, LLC and its affiliates by all financial institutions, credit bureaus, other public and private reporting organizations, government regulatory entities, employers, and other references in connection with this application.	-		
ANNUAL INCOME Salary OO Mortgage/Rent Expense OO Spouse Salary OO Notes Payable OO Bonus & Commission OO Accounts Payable OO Dividend Income OO Incomeaxes OO OTOTAL INCOME OO OTOTAL INCOME OO OTOTAL INCOME OO OTOTAL LIQUID CAPITAL/CASH AVAILABLE OO OTOTAL LIQUID CAPITAL/CASH AVAILABLE OO OTOTAL INCOME OO OTOTAL AMOUNT WILLING TO INVEST OO OTOTAL LIQUID CAPITAL/CASH AVAILABLE OO OTOTAL INCOME OO OTOTAL INCOME OO OTOTAL INCOME OO OTOTAL INCOME OO OTOTAL AMOUNT WILLING TO INVEST OO OTOTAL LIQUID CAPITAL/CASH AVAILABLE OO OTOTAL INCOME OO OTOTAL INCOME OO OTOTAL AMOUNT WILLING TO INVEST OO OTOTAL INCOME OO OTOTAL INCOME OO OTOTAL AMOUNT WILLING TO INVEST OO OTOTAL INCOME OO OTOTA	Is the financial information the same a	as your spouse? Yes No Not Applicable	
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Spouse Salary Bonus & Commission .00 Accounts Payable .00 Dividend Income Real Estate Income .00 IncomexTes .00 Insurance .00 Other .00 Other .00 Other .00 TOTAL EXPENSES .00 ANNUAL NET CASH FLOW (Income Expenses) TOTAL LIQUID CAPITAL/CASH AVAILABLE .00 TOTAL AMOUNT WILLING TO INVEST .00 Your signature below authorizes The Station Seafood Company / Catfish Station to obtain verification of all information provided in this personal financial statement. The undersigned also authorizes release of personal information to CFS Franchising Company, LLC and its affiliates by all financial institutions, credit bureaus, other public and private reporting organizations, government regulatory entities, employers, and other references in connection with this application.	ANNUAL INCOME	ANNUAL EXPENDITURES	
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TOTAL LIQUID CAPITAL/CASH AVAILABLE OO TOTAL AMOUNT WILLING TO INVEST OO TOTAL AMOUN	ANNUAL NET CASH FLOW	.00	
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organization in the control of the c	in this personal financial statement. The under Company, LLC and its affiliates by all financial government regulatory entities, employers, and	ersigned also authorizes release of personal information to CFS Franchising institutions, credit bureaus, other public and private reporting organization other references in connection with this application.	
Print Name:	Required:		