# **Franchise Evaluation Form**

This is not a contract and supplying or completing this form incurs no obligation by either party

Name (full legal):	Spouse (full legal):
Business Name:	Business Name:
Social Security Number:	Spouse Social Security Number:
Home Address:	
City, State, Zip:	Own Rent Number of Years
Previous Address:	
City, State, Zip	Own Rent Number of Years
Home Phone:	
Cell Phone:	E-mail address:
Present Occupation:	Spouse Occupation:
Business Phone:	Business Phone:
Who will operate the franchise?	
Amount of Capital available?	
Source of Capital:	
Desired Region:	
U.S. Citizen or Permanent U.S. Resident?	If not, what is your status?
Yes No	
Education and Degrees:	
Have you ever filed bankruptcy? Yes No	Explain:
Have you ever owned your own business, restaurant	If yes, please explain
	<b>J</b> =
or franchise? Yes <u>No</u>	
Will you devote your full-time attention to this	
business?	Yes No
If not full-time, what percentage of time will you	
devote to this business?	%
Is this application being submitted for an existing	//
franchise?	*Yes No *Location:
Is this application being submitted with one person,	
partnership or corporation?	
If so, what is/are their name(s)	
(All partners are required to submit an application) Will this franchise be your sole source of income?	Yes No
will this tranchise be your sole source of Income?	Yes No

Name(s):		Home Phone:		
		Work Phone:		
		Cell Phone:		
Address				
Desired Region: CA, TX or AZ		Desired Population:		
		•		
Desired (	Counties:			
Previous	Experience:	Available Investment amount:		
	•			
DATE		ITEM		
	Initial contact (circle: telephone, inte	ernet, person or letter)		
	Deliver brochure (circle: Hand delivered U.S. mail or overnight express)			
	Secondary Contact (circle initiated by applicant or franchisor)			
	Schedule Appointment Date: Time:			
	Deliver Offering Circular ( circle territory specific to be determined) (10 days prior			
	to signature of any agreement)			
	Received signed Receipt of Offering Circular			
	Review Offering Circular			
	Deliver Franchise Agreement (5 days prior to signature of any agreement)			
	Received signed Receipt of Franchise Agreement (receipt must not be dated the			
	same day as signature of Franchise Agreement)			
	Disclosure Statement that no modifications will be made to the Franchise			
	Agreement			
	Received signed disclaimer of no financial promises made to franchisee			
	Audio Tape final meeting for signing of Franchise Agreement			
	Execution of Franchise Agreement			

# **Personal Financial Information**

Assets	Omit cents	Liabilities	Omit cents
Cash on hands in Bank		Accounts Payable	
Savings Accounts		Notes Payable to Banks and others	
IRA or other Retirement Account		Loan on Life Insurance	
Accounts and notes receivable		Mortgages on Real Estate	
		Unpaid Taxes	
Life Insurance – Cash Surrender Value only		Other Liabilities	
Stocks & Bonds		Total Liabilities	
Real Estate		Net Worth	
Automobile present value			
Other Personal Property			
Other Assets			
Total		Total	

\_\_\_\_\_ Provide a copy of your resume.

Provide a copy of your last two years tax returns.

\_\_\_\_\_ Provide a copy of your credit report within the last 30 days.

The undersigned certifies that each part of the evaluation and financial statements and the information inserted here has been carefully read and is true and correct.

Signed:	 Date:	
•		

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

### **Franchise Evaluation Form**

### CATERING

How many years experience do you have with catered events?

What types of events have you catered?

What was the largest group you ever catered?

What levels of function have you catered?

What types of catering menus have you created for special events?

Please enclose a sample copy of your catering menu.

#### MANAGEMENT

How many years experience do you have managing people?

What is the most amount of people you have managed or supervised at one time?

Have you ever trained employees on safety programs?

List the types of safety programs.

#### FOOD

Name some of the types of dishes you will have available as your daily lunch special at the grill station, hot entrée station and the breakfast special?

Breakfast Special Grill Station Hot Entrée

What types of ethnic cooking can you offer your customers?

#### COMPUTER

Do you have any computer experience?

List the operating systems and software applications you have used.

### Franchise Agreement Disclosure Statement

LunchStop Franchise or LunchStop Express will not make negotiations or modifications to the Franchise Agreement.

Dated

By:\_\_\_\_\_(Signature)

(Print your name)

Dear Potential Franchisee,

It is important for you to understand concerning the application and evaluation forms LunchStop, Inc. may require a report of credit regarding the individuals named in this application or evaluation. This information may be gathered from a consumer reporting agency and may be an investigative report covering such information as to the applicants' character and general reputation. Upon written request within a reasonable time after submission of this application or evaluation to LunchStop, Inc. the applicant may receive full disclosure of the nature and scope of the report requested.

The statements in this application and evaluation are warranted to be true, full and complete. No statements, written or verbal, furnished by any officers, employees or representative of LunchStop, Inc. shall be noticed unless same is contained in this application or evaluation. This application and evaluation and its entirety is made and delivered by applicant upon terms and conditions set forth herein as the inducement to LunchStop, Inc. to consider a franchise for the location expressed herein and UPON THE TERMS AND CONDITIONS SET FORTH IN THE CURRENT STANDARD LUNCHSTOP, INC. FRANCHISE AGREEMENT.

No representation, promises, oral or written, inducements, agreements or undertakings, express or implied, other than those set forth herein, have been made by LunchStop, Inc. or by any person acting on its behalf, nor relied upon by applicant in making this application or evaluation. The application and evaluation, consists of a total of three pages including any attachments and this letter, and shall constitute the entire application for a franchise.

Yours truly,

LunchStop, Inc.

I (we) acknowledge having read all of this application prior to its execution.

I (we) recognize that LunchStop, Inc. is not in any way obligated to franchise a store to me/us because of our execution of these documents. All information contained herein will be used solely by LunchStop, Inc. and remain confidential except to the extent disclosure is required by State or Federal Law.

ACKNOWLEDGE BY:

Print Name

Print Name

Date