



Are U Hungry, LLC
Request for Consideration
Please Fax Back to (814) 217-1337

The following information is provided to help us determine your qualifications as a prospective franchisee. The completion of this profile in NO WAY OBLIGATES YOU TO PURSUE THIS FRANCHISE OPPORTUNITY. All information contained herein shall be held in the strictest confidence and shall be used for no other purpose than determining your compatibility as a prospective franchisee.

I. PERSONAL INFORMATION

Name: _____ Age: _____
(Last, First, Middle)

Email: _____

Spouse's Name: _____ Age: _____

Home Address: _____ Home Long: _____

City: _____ State: _____ County: _____ Zip: _____

Home Phone: _____ Cell Phone: _____

Fax: _____ Number of Children/Dependents: _____

Are you planning to develop this business with a partner? Yes _____ No _____
(All partners must submit a separate information sheet).

Partner's Name: _____

Partner's Name: _____

Education: Applicant

High School: _____

College: _____ Degree: _____ Major: _____

Education: Spouse

High School: _____

College: _____ Degree: _____ Major: _____

II. EMPLOYMENT AND BUSINESS INFORMATION

APPLICANT: _____ SPOUSE: _____

Company: _____ Company: _____

Position/Title: _____ Position/Title: _____

Present Salary: _____ Date Started: _____ Present Salary: _____ Date Started: _____

What other businesses have you investigated? _____

III. FINANCIAL INFORMATION

Present Financial Status (or attach current Financial Statement):

<u>ASSETS</u>		<u>LIABILITIES</u>	
Cash on Hand & in Banks	\$ _____	Notes Payable	\$ _____
Savings Funds/Certificates	\$ _____	Revolving A/C Balance	\$ _____
Stocks, Bonds & Securities	\$ _____	Credit Card Balances	\$ _____
Retirement Plans,IRA,401K	\$ _____	Home Mortgage Balance	\$ _____
Home Market Value	\$ _____	Other Real Estate Debt	\$ _____
Other Real Estate (Market Value)	\$ _____	Auto Loans	\$ _____
Personal Property	\$ _____	Other Debts (Describe)	\$ _____
Auto(s) Market Value	\$ _____		
Other Assets (Describe)	\$ _____		

Total Assets \$ _____ Total Liabilities \$ _____

NET WORTH \$ _____

(Total Assets minus Total Liabilities)

Please be prepared to provide proof of assets and net worth upon request

Do you have sources of income other than salary? _____

If so, please list source and amount: _____

Your monthly expenses: Home: \$ _____ Auto: \$ _____ Living:

\$ _____

Other: \$ _____

Total Monthly Expenses:

\$ _____

Financial Statement Notes:

Cash available for investment in this business:

\$ _____

Are additional funds available to you?

Explain:

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IV. BACKGROUND INFORMATION

Have you or your spouse ever been involved in a personal or business bankruptcy?

Are you or your spouse part of any criminal investigation at this time?

Have you or your spouse ever been convicted of any crime?

Are there currently any civil judgments against you or your spouse?

Are there currently any civil suits pending against you or your spouse?

V. FUTURE PLANS

Preferred area of interest: 1) _____ 2) _____

3) _____

When would you like to begin a Sandwich U? _____

Do you have locations in mind for where you will place the restaurant? If so where?

1) _____

2) _____

What are some of the major questions you have concerning Sandwich U?

1) _____

2) _____

What skills and experience do you have that would give you the ability to be a success in this business?

Comments:

I certify that the enclosed information as given is complete, true and correct.

It is understood that the purpose of this questionnaire is for general information and is in no way binding upon either the Company or the applicant. It is, however, understood that the applicant supplies the information contained herein to the best of his or her knowledge and ability and that the Company relies on this fact.

Applicant's Signature _____ Date _____