

Chatime – Franchisee Information Form

Thank you for your interest in a Chatime franchise. The purpose of this form is to collect initial information about potential franchisees. The submission and acceptance of this questionnaire should not be construed as an approval to become a Chatime store owner. We will follow up with qualified candidates to initiate a formal meeting/approval process.

Please complete one for each non-spousal partner

Personal Information		
Name:		
Birthday:		
Social Insurance Number:		
Address:		
City/Province/State:		
Country:		
Zip/Postal Code:		
Telephone Number:		
E-mail Address:		
Have you ever been convicted of a criminal offence for which a pardon has not been granted?	Yes	No
Have you or any company with which you were associated ever been adjudicated bankrupt?	Yes	No
If Yes, explain:		

Please do not combine information with partners

Interest in Chatime	
How did you become interested in opening a Chatime store?	
What locations/areas are you interested in?	

When do you want to open a store?	
Are you planning to be a full-time manager for your store? If no, please explain.	
Do you have previous experience in food/beverage service?	
Have you ever owned a business? If so, what type and for how long?	

Work Experience	
Present Employer:	
City/Province:	
Nature of Business:	
Start Date:	
Position:	
Salary:	
Name of Supervisor:	
Supervisor Title:	
Previous Employer:	
City/Province:	
Nature of Business:	
Start Date:	
End Date:	
Position:	
Salary:	
Name of Supervisor:	
Supervisor Title:	

Financial Statement			
<i>Present Annual Income</i>		What cash or assets will be used to meet the equity requirements in order to purchase a "CHATIME" franchise business?	
Salary			
Bonus and Commissions			
Spouse's Salary			
Real Estate Income			
Dividends			
Other Income			
Total Income			
Assets		Liabilities	
Cash on hand		Mortgages – Home	
Securities (mutual funds, GICs, etc.)		Mortgages – Other	
Market Value of Home		Loan Payable	
Other Real Estate		Credit Cards	
Personal Property		Line of Credit	
Business Interests		Other Liabilities	
Other Assets			
Total Assets		Total Liabilities	
		Total Net Worth (Total Assets – Total Liabilities)	

Personal References				
	Full Name	Occupation	Telephone	Years Known
1				
Address:				
2				
Address:				
3				
Address:				

Acknowledgement and Consent

The Applicant hereby submits this application for a "CHATIME" franchise and represents and warrants that all information set forth herein is true and correct, to the best of their knowledge. The Applicant hereby authorizes Kevito Ltd. to obtain a consumer credit report about Applicant and to exchange or receive personal information about Applicant with any personal information agent or agency towards establishing or verifying the financial standing of the Applicant in regards to the granting of a franchise.

It is understood by all parties that neither the Vendor nor its agent are under any obligation whatsoever to grant a franchise business.

Dated the _____ day of _____ year _____

Signature of Applicant: _____

Print Name: _____