



# FRANCHISE APPLICATION

This Application and the information supplied by you will be held in the strictest confidence. Neither party is bound in any way by its submission of this form nor does it constitute an agreement by either party. This form will help determine mutual compatibility and your financial responsibility for the specific purpose of obtaining a Monarch & Misfits franchise. If you have a partner, they must also complete a separate Application form, once complete attach all the partner forms together previous remittance.

Please print clearly. Thank you for your application.

## PERSONAL INFORMATION

APPLICANT'S NAME:		BIRTH DATE:	
HOME OF PARTNER(S) / PRINCIPAL(S):			
HOME ADDRESS:			
CITY:			
HOME PHONE:		OFFICE PHONE:	
		EMAIL:	
BEST TIME TO CALL:			
DO YOU OWN A HOME? <input type="checkbox"/> YES <input type="checkbox"/> NO		RENT? <input type="checkbox"/> YES <input type="checkbox"/> NO	
		YEARS AT PRESENT ADDRESS:	
SOCIAL INSURANCE NUMBER:		MARITAL STATUS:	
SPOUSE'S NAME:		SPOUSE'S OCCUPATION:	
EDUCATION (HIGHEST LEVEL ATTAINED):		DEGREES OR DIPLOMAS:	

## EMPLOYMENT HISTORY

[illegible]

FINANCIAL INFORMATION

DURING THE LAST (10) YEARS (LIST MOST RECENT JOBS FIRST):

MONTH:

YEAR:

ASSETS		LIABILITIES AND NET WORTH	
CASH (ON HAND AND IN BANKS)	\$	NOTES PAYABLE TO BANKS DIRECT BORROWING ONLY	\$
ACCOUNTS AND LOANS RECEIVABLE		NOTES PAYABLE TO OTHERS	
STOCKS AND BONDS		LOANS AGAINST LIFE INSURANCE	
REAL ESTATE: PRINCIPAL RESIDENCE		ACCOUNTS PAYABLE	
OTHER		MORTGAGES PAYABLE ON REAL ESTATE: PRINCIPAL RESIDENCE	
AUTOMOBILES REGISTERED IN OWN NAME		LOANS AGAINST LIFE INSURANCE	
LIFE INSURANCE (CASH SURRENDER VALUE)		OTHER REAL ESTATE	
OTHER ASSETS (ITEMIZED)		OTHER LIABILITIES (ITEMIZED)	
		TOTAL LIABILITIES	(2) \$
TOTAL ASSETS	(1) \$	NET WORTH	SUBTRACT AMOUNT (2) FROM (1) (3) \$

BANK RELATIONS (ALL MY ACCOUNTS INCL. SAVINGS & LOANS)			SOURCE OF INCOME	
NAME AND LOCATION	CASH	AMT. OF LOAN	SALARY	\$
	\$	\$	BONUS AND COMMISSIONS	\$
			DIVIDENDS	
			REAL ESTATE INCOME	
			OTHER INCOME (ITEMIZED)	
TOTAL	\$	\$	TOTAL	\$

STOCK AND BONDS					
FACE VALUES (BONDS) NO. OF SHARES (STOCKS)	DESCRIPTION OF SECURITY	REGISTERED IN NAME OF	COST	PRESENT MARKET VALUE	INCOME REC'D LAST YEAR
			\$	\$	\$

REAL ESTATE THE LEGAL AND EQUITABLE TITLE TO REAL ESTATE LISTED IN THE STATEMENT IS SOLELY IN THE NAME OF THE UNDERSIGNED EXCEPT AS FOLLOWS:						
DESCRIPTION AND ADDRESS	DIMENSIONS OF ACRES	IMPROVEMENTS CONSIST OF	MORTGAGE OR LIENS	DUE DATES AND AMOUNT/PAYMENT	ASSESSED VALUE	PRESENT VALUE
			\$		\$	\$

LIFE INSURANCE							
NAME OF PERSON INSURED	NAME OF BENEFICIARY	NAME OF INSURANCE CO.	TYPE OF POLICY	FACE VALUE OF POLICY	TOTAL CASH SURRDR. VALUE	TOTAL LOANS AGAINST POLICY	YEARLY AMOUNT
				\$	\$	\$	\$

# GENERAL INFORMATION

HOW DID YOU FIND OUT ABOUT THE FRANCHISE OPPORTUNITY WITH MONARCH & MISFITS?

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DO YOU OWN OR HAVE ACCESS TO A LOCATION SUITABLE FOR A MONARCH & MISFITS FRANCHISE? IF SO, WHERE?

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GEOGRAPHIC REFERENCE:	1ST CHOICE
	2ND CHOICE
	3RD CHOICE

HOW MUCH CAPITAL ARE YOU ABLE TO INVEST?

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DO YOU CURRENTLY HAVE A SOURCE OF ADDITIONAL FINANCING? IF YES, FROM WHAT SOURCE?

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DESCRIBE ANY TRAINING AND EXPERIENCE IN MANAGEMENT OR SALES THAT YOU HAVE.

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WHY ARE YOU INTERESTED IN A FRANCHISE WITH MONARCH & MISFITS?

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ADDITIONAL INFORMATION THAT MAY BE HELPFUL:

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LIST THREE CHARACTER REFERENCES:				
	NAME	ADDRESS	OCCUPATION	CONTACT NUMBER
1.				
2.				
3.				

  

LIST THREE CREDIT REFERENCES:				
	NAME	ADDRESS	OCCUPATION	CONTACT NUMBER
1.				
2.				
3.				

  

The undersigned certifies that the information in this Application is a true and correct statement of my (our) financial condition on the date indicated. The Application is a notice in writing of and consent to the obtaining by MONARCH & MISFITS or persons authorized by it, from any credit reporting agency, bank, credit guarantor and any other party with which I have financial relations (including those set out in this Application), such information concerning me as MONARCH & MISFITS may require at any time in connection with the franchise hereby applied for. I hereby authorize MONARCH & MISFITS to take any actions as it considers necessary to verify and confirm the information contained in this Application or any accompanying documents or otherwise provided by me. I acknowledge that the Application is a true, accurate, and complete representation of my financial and operational qualifications and background.

  

DATE \_\_\_\_\_ SIGNATURE \_\_\_\_\_

MAIL, FAX OR DELIVER TO:



**MONARCH & MISFITS**  
 44 UPJOHN ROAD  
 TORONTO, ONTARIO M3B 2W1  
 TEL: 416-385-7705  
 FAX: 416-385-1718  
 WWW.MONARCHANDMISFITS.COM