

Original Fried Pie Shop Franchise Application

Please complete this application and attach resume and verification of liquid assets. This application is confidential, used for purchasing a new franchise, and does not obligate either party in any manner. Fax completed application to 972-226-3193, email <u>franchise@theoriginalfriedpieshop.com</u> OR mail hard copy to The Original Fried Pie Shop, 488 W. I-30, Garland, TX 75043

Personal Information

Name	Social Security # 	Birth Date (MM/DD/YYYY) //
Address	City	State Zip
Home Phone	Business Phone	Cell Phone
Email Address		
Spouse's Name	Spouse's Social Security # 	Spouse's Birth Date //
<i>Education</i> : School Attended	Dates Attended	Degree Obtained
School Attended	Dates Attended	Degree Obtained
Are you a U.S. Citizen? If No, which country are you a citizen?	Have you ever been convicted	d of a felony or its equivalent?
Are you involved in any legal action: criminal, civil, bankruptcy, li	tigation, etc? If Yes, please expl	ain.

Business Experience

Present Employer		Present Position		Dates Employed (From/To)
Company Address				
Describe Duties and	Responsibilities			
Previous Busines	s Experience (List most recer	nt first)		
Dates Employed	Employer	Title	Responsibilities	Annual Income
Have you ever owne	ed a franchise? If so, please explai	n.		
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Do you have any res	staurant management experience	? Have you ever owned a res	staurant? If so, please explain	1.

Why do you want to own The Original Fried Pie Shop?							
References: Please li	st three (3) personal references that	it we may contact.					
Name	Address	Phone	# Years Known				

Financial Information

Please attach any additional information such as financial statements or tax returns that may assist us in evaluating you for a franchise opportunity.

Assets

Cash	\$
Securities	\$
Receivables, Notes	\$
Automobiles	\$
Personal Property	\$
Real Estate	\$
Life Insurance (cash value)	\$
Other Assets (describe)	\$
Total Assets A	\$

Annual Sources of Income

Salary	\$
Bonus and Commissions	\$
Dividends & Interest	\$
Real Estate Income	\$
Other Income (describe)	\$
	\$
	\$
Total	\$

Liabilities

Notes Payable/Loan	\$
Real Estate Mortgages	\$
Accounts Payable /Bills	\$
Due on Automobiles	\$
Other debts (itemize)	\$
Total Liabilities B	\$
Total Net Worth C (A-B)	\$

Estimate of Annual Expenses

Mortgage Payments	\$
Rent	\$
Automobile Payments	\$
Insurance Premiums	\$
Taxes	\$
Other Expenses	\$
	\$
Total	\$

Cash Accounts

Name/Location of Bank	Phone #	Type of Account	Account #	Balance

Life Insurance

Company	Policy #	Face Amount	Cash Value	Loan if any

Real Estate Holdings

Location/Description	Market Value	Monthly Income	Titled To	Original Amount	Balance

Stocks, Bonds & Securities

Name of Issuer	# of Shares	Par Value	Market Value	Total Value	Pledged (Y/N)	Where Traded

Loans, Notes Payable

Lender	Nature of Debt	Maturity Date	Original Face Value	Monthly payments	Interest Rate	Present Balance

I acknowledge all the information above is true and complete and I agree to advise The Original Fried Pie Shop if there is a material change in any of the above information or any subsequent information provided to The Original Fried Pie Shop. I acknowledge that The Original Fried Pie Shop may check my credit, employment history, reports from consumer reporting agencies and may conduct a criminal background check to consider my application to become a franchisee.

Signature (Applicant)

Date

Signature (Spouse)

Date