

Franchise Application



Please complete all sections of this form thoroughly

Application Information

First Name	Middle Name	Last Name	Social Security Number		
Current Home Address	<input type="checkbox"/> Own <input type="checkbox"/> Rent	City	State	Zip	How Long?
Home Phone	Personal Cell Phone	Home Fax		Personal Email	
Current Business Address		City	State	Zip	How Long?
Business Phone	Business Cell Phone	Business Fax		Business Email	
Date of Birth	<input type="checkbox"/> Single <input type="checkbox"/> Married	No. of Dependents	Country of Citizenship		

Education Employment

High School	Currently Employed <input type="checkbox"/> Yes <input type="checkbox"/> No
Years Attended	Most Recent Employer
Year Graduated	Address
College	Position
Years Attended	Annual Income
Year Graduated	Phone Fax Dates of Employment

General Information

Why are you looking for a franchise business opportunity? _____

What is your primary reason for wanting to own your own franchise? _____

What concerns, if any, do you have about owning your own franchise? _____

OFFER AND SALE BY PROSPECTUS ONLY. We are not presently authorized to offer and sell franchises in Florida, Illinois, Indiana, Kentucky, Maryland, Michigan, Minnesota, Nebraska, New York, North Dakota, Rhode Island, South Dakota, Virginia and Wisconsin.

GENERAL INFORMATION

How did you learn about Teddy's Bigger Burgers? _____

How many hours a week do you anticipate working in your business? _____

Will the franchise be your sole source of income? Yes No

Have you ever been involved in bankruptcy? Yes No

Have you ever been involved in a felony or other serious crime? Yes No

PREFERRED GEOGRAPHICAL LOCATION

What area(s) are you interested in opening a Teddy's? _____ Would you be willing to relocate? Yes No

1. _____
2. _____
3. _____

FINANCIAL STATEMENT

see next page of application to fill out schedules

ASSETS

Cash _____
Stocks (list Separately) _____
Retirement Accounts (401k, IRAs) _____
Personal Property _____
Automobiles (FMV Value) _____
Home _____
Other Residencies _____
Real Estate _____
Business Assets _____
Other Assets (Please List) _____

LIABILITIES

Credit Cards _____
Automobiles (Amount Owed) _____
Secured Loans _____
Unsecured Loans _____
Taxes _____
Home Mortgage _____
Other Mortgages _____
Business Liabilities _____
Other Debts _____
Other Debts (Itemized) _____

Total Assets (A)

Total Liabilities (B)

** Attach copies of recent bank or brokerage statements verifying liquid assets.*

Net Worth (C) (A-B=C)

SOURCE OF ANNUAL INCOME

Salary _____
Bonus and Commissions _____
Dividends _____
Real Estate Income _____
Other Income (Itemized) _____

Total

ESTIMATE OF ANNUAL EXPENSES

Mortgage Payments _____
Rent _____
Automobile Payments _____
Insurance Premiums _____
Taxes _____
Other Expenses _____

Total

GENERAL INFORMATION

Personal bank accounts carried at: _____

Are any assets pledged? Yes No If yes, please explain: _____

Are you a defendant in any legal actions? Yes No If yes, please explain: _____

Do you have any contingent liabilities? Yes No If yes, please explain: _____

Are you now or have you ever been the principle owner of a business or franchise? Yes No

If Yes, please list them:

Business Name	Location	Dates	Still in Operation?

Schedule I - Stocks, Bonds and Securities

Description	No. of Shares	Bond Face Value	Market Value

Schedule II - Real Estate Owned

Description	Market Value	Terms/Maturity Balance	Mo. Payment

References

Name	Relationship	Phone Number	Email Address

How do you anticipate financing the balance of the total investment? _____

What percent of the equity of this business will you own? _____%

What amount of cash will you personally invest in this franchise? \$_____

What is the source of these funds? _____

Who will be the Operating Partner* (or Managing Owner*, if applicable)? _____

% of ownership: _____%

Will you have a business partner(s)** ? Yes No

What is the total amount of cash your business partners will invest in this franchise? \$_____

Will any partner's interest in the franchise be encumbered in any way or subject to an agreement between partners? (If so, please describe) _____

Will any person or entity other than the partners be entitled to receive, directly or indirectly, part of the profits from the operation of the Teddy's Bigger Burgers Franchised Business? (If so, please describe) _____

GENERAL INFORMATION

Please list business partners:

Name	Estimated Net Worth	% of Ownership	Investment

I hereby certify that the information supplied in this Franchise Evaluation Form and other financial statements made by me are true and correct. I agree to have all information confirmed by one of your representatives and I authorize you to check references and conduct such additional credit checks as deemed necessary. I further understand that submission of this information does not obligate either of the parties to purchase or sell a franchise.

Signature _____ Date _____

FRANCHISE AUTHORIZATION FORM FOR CONSUMER REPORTS

Please complete and return this form to:

Teddy's Bigger Burgers

Bigger Franchises
 c/o Franchise Development Northwest LLC
 PO Box 602
 Seattle, WA 98045

Direct: 888.501.0393

Fax: 866.963.8348

email: info@teddysbiggerburgers.com



In connection with your application for franchising, understand that consumer reports or investigative consumer reports, which may contain public record information, may be requested or made on you including consumer credit, criminal records, driving record, education, prior employer verification, workers compensation claims and others. These reports will include experience information along with reasons for termination of past employment. Further, understand that information from various Federal, State, local and other agencies which contain your past activities will be requested.

By signing below, you hereby authorize without reservation, any party or agency contacted by this franchisor to furnish the above mentioned information. You further authorize ongoing procurement of the above mentioned reports at any time during your contract. You also agree that a fax or photocopy of this authorization with your signature be accepted with the same authority as the original.

You have the right to make a request of Bigger Franchises, LLC, upon proper identification and the payment of any legally permissible fees, for the information in its files on you at the time of your request.

You hereby authorize and request, without any reservation, any present or former employer, school, police department, financial institution, division of motor vehicles, consumer reporting agencies, or other persons having knowledge about you to furnish Bigger Franchises with all background information in their possession regarding you, in order that your franchising qualifications may be evaluated.

PERSONAL INFORMATION TO PROCESS AUTHORIZATION

First Name	Middle Name	Last Name	Social Security Number
Address		City	State
Driver's License State and Number		City	State
Other Former Names			
Signature			Date