



Application

(all information is secure and completely confidential)

PERSONAL INFORMATION:

Primary Applicant's Name: _____

Address: _____

City: _____

State: _____

Zip: _____

How long at present address? _____ years

Do you own or lease? Own Lease

Email Address: _____

Phone: _____

Alternate phone: _____

Best time to reach? _____

Date of Birth (month/day/year): _____

Marital Status: Single Married

Spouse's Name: _____

Number of children: _____

Applicant's current employer: _____

Salary: _____

Position: _____

Start date: _____

Spouse's current employer: _____

Salary: _____

Position: _____

Start date: _____

EDUCATION AND EXPERIENCE:

Primary Applicant's Education: _____

Spouse's Education: _____

Do you have experience in the Restaurant/Food Service/Hospitality industry?

Yes No

If yes, Explain:

Have you ever been a principal owner of a business before:

Yes No

If yes, Explain:

Have you ever been granted a franchise before:

Yes No

If yes, Explain:

Please add any additional comments regarding your business experience or personal skills you would like us to know about:

FINANCIAL INFORMATION:

Annual Income: _____

Amount of cash available for investment: _____

Estimated Total Net Worth: _____

Will this store be your sole source of income?
 Yes No

What income would you expect from your business?

First Year: _____

Second Year: _____

Will there be partners other than your spouse?
 Yes No

If yes, what will their involvement be? (Please have them fill out a separate application.)

LEGAL INFORMATION:

Have you or your spouse ever been convicted of a crime?
 Yes No

Are you or your spouse a defendant in any legal action?
 Yes No

Have you or your spouse had any judgements against you?
 Yes No

Do you or your spouse have any felony charges pending, being appealed, or are you under indictment?
 Yes No

Have you or your spouse ever been involved in a personal/business bankruptcy?
 Yes No

If you answered yes to any of the previous five questions, please explain:

BUSINESS PLANS:

General area you would like to own a Tappy's Yogurt?

City: _____

State: _____

Are you interested in multiple locations?

Yes No

Can you devote your full time to the business?

Yes No

If no, can you identify an experienced individual to be your operating partner?

Yes No

Which family members will be involved in Tappy's Yogurt?

The primary reason I would like to own a Tappy's Yogurt?

What skills/experience will make you excel as a business owner?

How did you learn about Tappy's Yogurt?

AUTHORIZATION:

I authorize Froyo Industries LLC dba Tappy's Yogurt to make inquiries as necessary to determine the accuracy of the statements made and to determine my creditworthiness. I release Froyo Industries LLC dba Tappy's Yogurt, its affiliates, agents and employees from any liability arising either from the receipt or use of any information obtained through these sources.

_____ signature

_____ date

Application Statement:

Everything stated in this confidential form is true to the best of my knowledge. It is understood and agreed that my submission of the Tappy's Yogurt Application does not create an obligation for Froyo Industries LLC dba Tappy's Yogurt to award me a store.

signature

date