



Franchise Application Form

Personal Details

1. Name:

2. Place of residence:

3. Name & address of company:

4. Contact telephone number(s):

5. Email address:

6. Age of applicant:

7. Nationality:

8. Are you a full citizen of the country you are applying for a franchise?

If not, please provide evidence of residency and a valid copy of work and residency permits

Trading Entity

Do you intend to trade as

Please tick as appropriate

1. A Limited Company
2. A Partnership

Limited Companies

If you intend to trade as a limited company, please provide copies of the following in respective local language:

1. Certificate of Incorporation
2. Memorandum and Articles of Association
3. Details of company accountants

Please provide the following details:

1. Registered office address

2. Authorized Share Capital
3. Issued Share Capital
4. Residential addresses of the directors

5. A copy of the cap table

If you wish to operate under an existing entity please indicate

The type of business the company is currently involved in

Countries in which the company has business concerns

How long has the company been in operation?

Please attach a copy of the company accounts for the last three years in respective local language

List any holding or subsidiaries the company may have in domestic and overseas markets

Please attach a list the details of key directors and an organization chart of the company

Please state the number of employees

Please provide the following in Respective local language:

1. Certificate of Incorporation
2. Memorandum and Articles of Association

Please disclose any bankruptcy cases, outstanding litigation or legal suits against the applicant company

Please nominate one Director as the operating partner and indicate his /her equity ownership if applicable

Partnerships

If you intend to trade as a partnership, please provide

- 1. details (including names and addresses of all the partners

2. The type of business the company is currently involved in

3. Countries in which the company has business concerns

4. How long has the company been in operation?

5. Please attach a copy of the company accounts for the last three years in respective local language

Previous Experience

Have you or the Corporate applicant ever been a licensee or franchisee of any other organization?

If so please provide details, including the reason for ceasing to be a licensee or franchisee

Current position

When would you be able to take up a Street Stream Franchise?

Which country / region do you wish to take the Master franchise for?

What development schedule do you propose and within what time span?

What attracts you to Street Stream Franchise?

Why do you think you would be a successful Street Stream country Franchisee?

Have you a suitable existing infrastructure, which could be used for the launch, development and management of Street Stream Franchise in the territory?
If so, please provide details in a separate sheet.

If not, please indicate your proposed structure and the time frame for implementation

Professional advisors (for both company and individual applicants)
Please supply the names and addresses of your / Company applicants:

Solicitor:

Accountants:

Bankers:

Two Suppliers (in the case of a company applicant):

Financial position

What funds are available for this project?

Are these funds liquid?

Confidential Information

Have you or the corporate applicant ever been convicted of a felony or misdemeanor or criminal offence? If so, please provide details

Have you or any directors of the company ever been convicted of a criminal offence involving dishonesty? If so, please provide details

If you are applying on behalf of a company, has the company applicant been declared bankrupt or been associated with any business, which has been in voluntary or compulsory liquidation or which has ceased trading for any reason? If so, please provide details

Applicant signature (director on behalf of the corporate applicant)

I certify that the information given in this Application Form is true and complete

NAME: _____

SIGNATURE: _____

DATE: _____

The relevant sections of this application form should be completed by every applicant.

Thank you for taking the time to complete this Application Form which we hope you understand is to ensure high standard of franchise selection continues to be maintained within our business. We assure you that the information contained in this Application Form will be treated by us and all our representatives and officers, agents, professional advisors at Street Stream with utmost confidentiality.

