

APPLICATION FOR FRANCHISE





BRAND INTEREST:

(Please indicate with \times)



	(Prospective Franchisee)
	(i rospective transmisee)
ate:	
	of
	(Please Provide Full Address including Country)
	How did you get to know of our Franchising Opportunity?
	riow did you get to know of our frameliising Opportunity:



PRELIMINAF			SPECTIVE FR	ANCHISEE:	
Nature of Franchisee					
	Sole Proprietorship				
□ F	Partnership				
- 1	imited Corporation	1			
	Close Corporation				
If other than a Sole P Details of Partners/M	-	ers			
Nam	ie		Address	Contact N	lumber
Who will be the franc	hisees?				
1					
2					
3					
	Naı	me	Address	Conta	ct Number
Bookkeeper					
Accounting Officer					
Auditor					
Postal Address:					
Dharical Address					
Physical Address:					



PRELIMINARY DETAILS OF PROSPECTIVE FRANCHISEE:

Contact	Numl	pers:	
Business	()	
Cellular	()	
Home	()	
Fax	()	
Current I	Busin	ess Interests/Employment:	
Provide f	our (4) areas/Locations where you would like to o	oen a franchise:
1.			
2.			
3.			
4.			



PERSONAL DETAILS OF FRANCHISEE:

These details must be completed for all partners, members or shareholders.

Surname:
First Name/s:
Date of Birth:
ID Number:
Marital Status:
Number of Dependents:
Nationality:
Physical Address:
How long at this address?
Postal Address:
Business Address:
Contact Numbers:
Business()
Cellular ()



PE	RSONAL	DETAILS	OF FR	ANCHISEE:
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These details must be completed for all partners, members or shareholders.

Current Business Interests/Employment:

Net Worth per Personal Balance Sheet

Current monthly income

Unencumbered cash available for investment
(Proof to be submitted together with the application form)

\$

Personal References:

Name	Relationship	Address	Contact Number



BUSINESS DETAILS OF FRANCHISEE:

Trade References:

Name	Relationship	Address	Contact Number

Lease/Hire Purchase Agreements - Past and Current:

Institution	Asset Acquired	Total Amount	Monthly Payment	Period of Agreement	Dates

Present Bankers:

Bank	Branch	Account Type	Account Number	Current Balance

Financing Institution	Nature of Finance	Secured By	Repayment Period	Amount	Monthly Repayment



BUSINESS DETAILS OF FRANCHISEE:

Record of Previous Business Interests/Employment

Name of Business/Employment		Period of Involvement
Have you ever been declared insolvent?	☐ Yes	□ No
If Yes, are you now rehabilitated?	☐ Yes	□ No
What experience do you have in the QSR/Food Industry?		
p		
Will someone other than yourself manage the outlet?	□Yes	□ No
If Yes, name of such Manager:		
What experience does the proposed Manager have in the QSF	R/Food Indust	ry?



BUSINESS DETAILS OF FRANCHISEE:

If you were to be awarded a franchise, do you undertake to pay the joining fee and the monthly royalty and advertising fees as required by the Franchise Agreement as well as any other required monies for the development of the site if this is applicable?

□ Yes □ No	
Comments:	
, the undersigned, hereby declare that the above information as well as that submitted on the Statement of Asso iabilities is, to the best of my knowledge and belief, entirely correct.	ets &
lame:	
ignature:	
Date:	
Vitness 1:	
Vitnase 2	



STATEMENT OF ASSETS AND LIABILITIES:

Note: Income and Expenditure to be detailed on back page. Should space not permit, please attach applicable schedules.

Assets	Fixed Property	
Previous	(Registered In Your Name)	Current
Year	Give particulars of each property separately stating whether Freehold, Leasehold etc. and state if	Year
	affected by any Servitude, Usufruct or Fiduciary Interests.	
	Name of Farm or Plot Number Size District Date Purchased Price Paid MCV/DCV	
	Machinery, plant etc.	
	Specify important items only.	
	Vehicles, implements	
	Specify important items only.	
	Furniture & Fittings	
	Investments (Loans, Private Company Shares etc.)	
	By Whom Due Rate of Interest Date Recoverable Amount	
	Life Policies (Payable to the undersigned and not to any third party)	
	Date Issued Company Number Maturity Date Amount Surrender Value Less Loans	
	Shares	
	Number Held Company Market Value	
	Stock In Trade	
	Book Debts	

Cash

\$

(Specify)

Balance Sheet of___

Goodwill and Other Assets

TOTAL ASSETS

Bills Receivable (Not Discounted)

Bank Balances

(Note: State if any assets are encumbered.)

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STATEMENT OF ASSETS AND LIABILITIES:

Liabilities Previous	Bonds and/or Amounts Owing Under Deeds of Sale	Current
Year	Name of Farm or Plot Number Name of Bondholder/Seller Annual Capital Reductions Maturity Date	Year
	Bank Overdrafts Specify security given.	
	Owing Under Sale Transaction and Leasing Transaction Agreements Moveable Encumbered To Whom Instalments Payable Amount Still Owing	
	Bills Payable	
	Sundry Creditors	
	Loans Including Insurance Companies To Whom Due Rate of Interest Date Repayable Amount	
	Other Liabilities Specify	
	Liability for Income Tax Date to which assessment paid.	
	TOTAL LIABILITIES Note: State if any of the above liabilities are covered by a Notarial Bond.	
\$	Contingent Liabilities as Guarantor, Surety or Otherwise - Specify Below:	\$

\$ TOTAL ASSETS	\$
\$ LESS: TOTAL LIABILITIES	\$
\$ NET WORTH	\$

and that my/our assets are not encumbered other than as stated above.						
Dated at	on					
SIGNATURE						

I/We hereby declare that this is a full, true and correct statement of my/our assets and liabilities at the above date



STATEMENT OF INCOME AND EXPENDITURE:

Listing of	as at
MONTHLY INCOME	
Salary - Self Salary - Spouse Commissions	
Investment Other	
Total Income	\$
MONTHLY EXPENDITURE	
Taxation Pension UIF Medical Aid Rent/Bond Payment Electricity & Water Rates & Taxes Hire Purchase Instalments Lease Agreements Credit Card Accounts Insurance Premiums Life Assurance Premiums Transport Loan Repayments Donations Alimony/Maintenance Children's Education Clothing Entertainment Groceries Clothing Accounts Telephone & Cellular Medical Domestic Worker/Gardener Security DSTV/M-Net Total Expenditure Surplus Available I/We hereby declare that this is a full, true and correct statem Dated at	
SIGNATURE	



MOTIVATION:		
PLEASE GIVE A BRIEF MOTIVA	TION FOR YOUR FRANCHISE APPLICATION:	
PLEASE PROVIDE A BRIEF P	ERSONAL PROFILE INDICATING MANAGEMENT PHILOSOPHI	ES, BUSINESS AND
PERSONAL GOALS:		,
I understand that if this applicatio regulating all aspects of my franc	on for a Franchise is accepted, I will be required to sign a comprehensive Chise relationship with Simbisa Brands Limited.	e Franchise Agreement
I also hereby declare that the info best of my knowledge and belief.	rmation given in this application is correct and fully disclose my asse	ts and liabilities to the
Dated at	on	
Signature		