



Mediterranean Sandwich Co. – Franchise Application

8791 S Lamhatty Lane, Daphne, AL 36526 ~ Telephone (251) 508-1674

The information on this application will be treated discreetly. Neither the applicant nor MSC Franchise, Inc. is obligated in any way by submission of this application. If necessary, attach additional sheets. Please keep a copy for your files.

(Please print or type) Date: _____ E-Mail Address: _____

Name: _____ Preferred Tele #: _____
Last First Middle Cell - Work - Home (Please circle)

Spouse: _____ Preferred Tele #: _____
Last First Middle Cell - Work - Home (Please circle)

Address: _____
City State Zip Code

Territory Preferences: Please be as specific as possible:

1. _____ 2. _____ 3. _____

PERSONAL INFORMATION

Date of Birth: _____ Marital Status: Single/Married (Circle) Are you a citizen of the United States YES / NO
If "No", what country? _____

Home: Own: _____ Rent: _____ How Long? _____

Last Residence: _____ How Long? _____

BUSINESS EXPERIENCE

Current Employment: _____
Position Company Address Phone

How Long? Years: _____ Months: _____ Current Annual Salary: _____

Supervisor: Title: _____ May we contact? _____

Previous Employment: _____
Position Company Address Phone

How Long? Years: _____ Months: _____ Previous Annual Salary: _____

Supervisor: Title: _____ May we contact? _____

Current Employment (Spouse): _____
If Applicable Position Company Address Phone

How Long? Years: _____ Months: _____ Current Annual Salary: _____

Previous Employment: _____
Position Company Address Phone

How Long? Years: _____ Months: _____ Previous Annual Salary: _____

Annual Total Income (All Sources): \$ _____ (Please attach copies of tax returns for the last two years)

EDUCATION

Circle last year of school completed: High School 1 – 2 – 3 – 4 College 1 – 2 – 3 – 4 Graduate Studies 1 – 2 – 3 – 4

If college graduate, provide name of school: _____ Year graduated _____ Major _____

Describe any training in sales, management, retailing or postgraduate study: _____

Hobbies, or outside interests you'd like to share: _____

Memberships (civic, business, professional): _____



BUSINESS INFORMATION

1. How did you hear about Mediterranean Sandwich Co.? _____
2. Were you referred by someone connected to Mediterranean Sandwich Co.? _____ If Yes, who? _____
3. Have you ever owned a franchise? _____ If yes, give name(s) of franchise: _____
4. Are you still involved with this franchise: _____ If not, why not? _____
5. How much time do you anticipate devoting to the Mediterranean Sandwich Co. franchise? _____
6. Do you regard this franchise as a career choice, or as an investment? _____
7. If you anticipate owning & operating a Mediterranean Sandwich Co. franchise, please describe your multi-unit restaurant experience (use additional sheets if necessary): _____
8. If you will not be involved in the daily operations of the restaurants will your operator have an equity position in the Mediterranean Sandwich Co. franchise? _____. Please explain: _____
9. Are you applying as an Individual, Partnership or Corporation (circle one)?
10. Do you represent (individually or collectively) capital sufficient to commit to a multi-location development agreement? _____
If No, please explain: _____
11. Do you have a business plan (if yes, please attach a copy)? _____
12. Do you have specific background and/or experience that you would like us to consider during our evaluation?
Explain: _____
13. Have you ever filed for bankruptcy? _____ If yes, please give date and details: _____

REFERENCES AND FINANCIAL INFORMATION

Bank Reference:

1. _____
Name Address Acct. # Contact Phone
2. _____
Name Address Acct. # Contact Phone

Business Reference:

1. _____
Name Address Occupation Contact Phone
2. _____
Name Address Occupation Contact Phone

Personal Reference:

1. _____
Name Address Occupation Contact Phone
2. _____
Name Address Occupation Contact Phone

Assets:	Current Date	Liabilities and Net Worth	Current Date
Cash on Hand (unrestricted in banks)		Notes payable to Bank	
Savings, Funds and certificates, etc.		Notes payable to others	
Accounts and Loans receivable		Loans against life insurance	
Home – Fair market Value (Location)		Accounts payable	
Other real estate		Mortgages payable on real estate	



Life insurance (cash surrender value)		Home	
Other stocks and bonds		Other	
Equity in business ventures – liquid (Note 1)		Other liabilities (Note 2)	
Other assets (itemize) (Note 1)		Total Liabilities	\$
TOTAL ASSETS:	\$	TOTAL NET WORTH (assets minus liabilities)	\$

Note 1 – If you own a majority interest in a business, please attach copies of *financial* statements for current and prior years.

Note 2 – Please list guarantees and/or other contingent liabilities.

Applicant please read and sign:

I/We certify that the information given is true, correct and complete and is given for the purpose of obtaining credit information for evaluation purposes. By signature below, applicant acknowledges he/she authorizes any company references or consumer reporting/credit agencies to furnish MSC Franchise, Inc. with verification of deposits and/or credit records/history.

The undersigned certifies that the information supplied on this personal financial statement and any financial information submitted on other forms is true and correct. Also, please submit Tax Returns for the previous 2 years. Processing of this application will not begin until information is complete and submitted.

DATE: _____ SIGNATURE: _____

PRINTED NAME: _____

DATE: _____ SIGNATURE: _____

PRINTED NAME: _____

THIS INFORMATION IS NOT INTENDED AS AN OFFER TO SELL, OR THE SOLICITATION OF AN OFFER TO BUY A FRANCHISE. IT IS FOR INFORMATION PURPOSES ONLY. SEVERAL STATES REGULATE THE OFFER AND SALE OF FRANCHISES, AND THEREFORE MAY REQUIRE ADDITIONAL INFORMATION FROM US. IF YOU ARE A RESIDENT, OR DESIRE A FRANCHISE IN ONE OF THESE STATES, WE WILL NOT OFFER YOU A FRANCHISE UNLESS AND UNTIL WE HAVE COMPLIED WITH APPLICABLE.