

FRANCHISE APPLICATION FORM

(for Current Employee Only. For External applicant, please call us)

| essential f | or our consider | g PT PHO EXPRESS Franchise. This ap ation in granting Licenses. Please compl her party in any manner. | plication will help yo ete all items comple | ou present your personal and business information which is tely and clearly. The information you provide is confidential |
|-------------|-----------------|---|--|--|
| | | GENER | AL INFORMATI | ION |
| Full name | : | | | |
| Date of bi | rth: | | Male | Female |
| Address: | | | | |
| Home pho | one: | | Cell phone: | |
| Email: | | | | |
| Business | Name (if any): | | | |
| Registere | d Business Ad | dress: | | |
| Business | License Numb | er: | | |
| Type of b | usiness: | | | |
| Liquid as | sets: | | | |
| Estimated | business asse | ets: | | |
| Business | number: | | Fax number: | |
| Best time | to contact: | | AM | PM |
| | | EXPERIENCE A | ND BUSINESS | S HISTORY |
| From | to current | Working company or business name: | _ | |
| | | Type of business: | | |
| | | Address: | | |
| | | Position held: | | |
| | | Main duties: | | |
| | | | | |
| | | | | |
| | | | | |
| From | to | Working company or business name: | | |
| | | Type of business: | | |
| | | Address: | | |
| | | Position held: | | |
| | | Main duties: | | |
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| | | | | |
| | | | | |
| From | to | Working company or business name: | | |
| | | Type of business: | | |
| | | Address: | | |
| | | Position held: | | |
| | | Main duties: | | |
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| | | | | |
| | | | | |

| EDUCATION | | | | | | | | | | |
|--|----------------|------------------------|----------------------|--------------------|-----------------------------------|---------------------------|--|--|--|--|
| | Year | Major | Degree award | led N | lame and address of school/ colle | ge | | | | |
| 1. | | | | | | | | | | |
| 2. | | | | | | | | | | |
| 3. | | | | | | | | | | |
| REFERENCES | | | | | | | | | | |
| Please provide details of three personal or business references: | | | | | | | | | | |
| | Name | Add | ress | Contact No. | Relationship | No. of years acquaintance | | | | |
| 1. | | | | | | | | | | |
| | | | | | | | | | | |
| 2. | | | | | | | | | | |
| | | | | | | | | | | |
| 3. | | | EINANCI | | | | | | | |
| FINANCIAL STATEMENT | | | | | | | | | | |
| | financial Stat | ement (for the last fu | ill financial year): | | | | | | | |
| Salary: | | | | \$ | | | | | | |
| Bonus: Dividends: | | | | \$ | | | | | | |
| | om property: | | | پ \$ | | | | | | |
| | our business: | | | \$ | | | | | | |
| Other inco | | | | \$ | | | | | | |
| <u>Tota</u> l | | | | \$ | | | | | | |
| | | | | t | | | | | | |
| Assets | | Amo | ount | Liabilities | | Amount | | | | |
| Cash: | | \$ | | Loans: | | \$ | | | | |
| Shares: | | \$ | | Mortgages: | | \$ | | | | |
| Real Estat | e: | \$ | | Current liabiliti | es: | \$ | | | | |
| Current as | sets: | \$ | | Other liabilities | : | \$ | | | | |
| Inventory: | | \$ | | | | | | | | |
| Net busine | ess value: | \$ | | | | | | | | |
| Total asse | ts: | \$ | | Total liabilities: | | \$ | | | | |
| | | | FRANCHIS | SE INFORM | ATION | | | | | |
| What area | (s) are you in | terested in? | | | | | | | | |
| 1st choic | | | | | | | | | | |
| 2nd choi | | | | | | | | | | |
| 3rd choic | e: | | | | | | | | | |
| | | | | | | | | | | |
| Will you de | | to this business? | | | | | | | | |
| If no place | Yes | No | | | | | | | | |
| If no, pleas | se explain: | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| Will vour s | pouse he inve | olved in this business | ? | | | | | | | |
| | Yes | <u>No</u> <u>No</u> | | | | | | | | |
| | | | | | | | | | | |

| Are you considering a partner? | | Yes | No | | | | | |
|---|---------------------------------|-----|----|--|--|--|--|--|
| If yes, who is your potential partner? Please explain | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| Do you have a financial source? | | | | | | | | |
| Yes | No | | | | | | | |
| If yes, please provide contact information: | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| If awarded a franchise, when would you plan to open? | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| I authorize the release and verification of all credit information to PT Noodles Holdings Inc., I understand that the release of such information does not constitute a consumer transaction and this information will remain in the strict confidence of PT Noodles Holdings Inc., I certify that the information provided in this application is true and complete. | | | | | | | | |
| The person completing the form: | The person completing the form: | | | | | | | |
| | | | | | | | | |
| Signature | | | | | | | | |
| | | | | | | | | |
| Full Name | | | | | | | | |
| | | | | | | | | |
| Date | | | | | | | | |
| Date | | | | | | | | |
| 4 | | | | | | | | |