



APPLICATION FOR FRANCHISE

CONFIDENTIAL *To be completed personally by Applicant*

NAME First name/s _____

Surname _____

WIFE/PARTNER _____

ADDRESS _____

PHONE _____ Home Mobile _____

Email _____ DOB _____

MARITAL STATUS _____ **DEPENDENTS** _____

DO YOU OWN YOUR OWN HOME YES/NO

HOW LONG AT CURRENT ADDRESS _____ YRS

WORK HISTORY FOR THE LAST 5 YEARS

VEHICLE TO BE USED FOR WORK

DRIVERS LICENCE NUMBER _____ **EXPIRY** _____

What class's _____

**DO YOU HAVE ANY PRESENT OR PENDING FINANCIAL OR
CRIMINAL CONVICATIONS** (not traffic - except Alcohol related))

YES/NO

DETAILS

(We may need to complete a security check)

QUALIFICATIONS

INTERESTS/HOBBIES _____

HEALTH

Do you have any health related issues that may impact on your ability
to perform the tasks asked of as a Franchisee of Mr Green Home
Services **YES/NO**

If yes, please detail

CREDIT CHECK

Do you consent to the Company retaining the information contained in this
application form for the purposes of considering your suitability of your credit
worthiness for the successful operation and viability of your franchise?

YES/NO

YOU SHOULD SEEK INDEPENDENT LEGAL ADVICE BEFORE SIGNING A FRANCHISE AGREEMENT.

HAVE YOU SPOKEN TO A

SOLICITOR	YES/NO
ACCOUNTANT	YES/NO

IF NEEDED, HOW ARE YOU FINANCING THE PURCHASE

GST REGISTRATION IS RECOMMENDED ... PLEASE CHECK WITH AN ACCOUNTANT REGARDING THE LEGAL ISSUES SURROUNDING REGISTRATION

If Registered, your GST No. _____

YOU MUST TAKE YOUR BUSINESS INSURANCE THROUGH THE MR GREEN SCHEME. WE WOULD ARRANGE FOR THE COVER TO BE PUT IN PLACE AS SOON AS ACCEPTANCE AS A FRANCHISEE OF MR GREEN HOME SERVICES. THE BROKER WOULD FORWARD THE RELEVANT DOCUMENTS FOR COMPLETION.

A DEPOSIT OF \$2000-00 IS REQUIRED AS SOON AS ACCEPTANCE BY BOTH PARTIES IS AGREED TO. THIS IS TO COVER COSTS IN GETTING THE CONTRACT DRAWN UP, STATIONARY, UNIFORM AND OTHER ASSOCIATED COSTS.

FIFTY PERCENT (50%) OF THE DEPOSIT IS NOT REFUNDABLE SHOULD YOU NOT PROCEED WITH THE PURCHASE.

THE DEPOSIT IS PAYABLE BY THE PURCHASER TO "MR GREEN FRANCHISE GROUP.

ONCE A DEPOSIT IS PAID THE FRANCHISE AGREEMENTS WILL BE PREPARED BY MR GREEN HEAD OFFICE, PLEASE ENSURE THAT THE DOCUMENT IS SIGNED BY THE NATIONAL FRANCHISOR, IF IT IS NOT THE DOCUMENT IS INVALID

DECLARATION

I _____ (full name)

Declare that to the best of my knowledge the information provided in this application is accurate and I understand that if any false or misleading information is given, or any material fact suppressed, this application will be rescinded in its entirety.

SIGNED _____ **DATE** _____

FRANCHISE APPLICATION DETAILS

MASTER FRANCHISEE _____

FRANCHISEE SELLING _____

PURCHASERERS TRADING NAME *(if any)*

GUARANTOR *(if required in case of a Company)*

PURCHASE PRICE **CLIENT LIST** \$ _____ attached

EQUIPMENT \$ _____ attached

TOTAL \$ _____

GUARANTEED WORKLIST \$ _____ per week

WEEKLY ROYALTY \$ _____ GST incl.

COMMENCEMENT DATE _____

STARTUP STATIONARY AND UNIFORM

500 Business Cards

2 x invoice books

1 x quote book

3 x Mr Green polo Shirts size _____

____ x Shorts size _____

____ x Trackpants size _____

1 x Sweatshirt (polo) size _____

1 x Polo vest size _____

1 x cap

1 x Safety vest size _____