

ColorWash International Pte Ltd
Franchise Evaluation Form





This application is provided to assist ColorWash in determining your suitability as a Franchisee and is not binding on either party. It should be completed by you and the information should be current and accurate. All information will be treated confidentially and will only be used in consideration of your application.

ColorWash is aware that the information sought is personal. If you have any objection to answering a specific question, please mark it with a cross (X).

To verify your financial position, you may be required to produce appropriate forms of proof.

Whilst it is necessary for us to contact your personal referees, we will not disclose the nature of your intended proposition.



PERSONAL DETAILS

Name (Mr./Mrs./Miss./Ms): _____

Address: _____

Telephone: _____ (Home/Mobile) _____ (Office)

E-mail address: _____

Date of Birth: _____ Marital Status: _____

Spouse/Partner's Name: _____

Spouse/Partner's Occupation: _____

Number of dependents: _____

Ages of dependent children: _____

Have you ever been convicted of any offense? Yes/No



Health: Please describe any physical or health problems that may restrict your ability to manage and operate a territory

Personal References: Name two people you have known for at least two years. All enquiries will remain confidential.

Name	Phone number	Position	Relationship
.....
.....

Activities and Interest:



PURPOSE OF APPLICATION

What are your reasons for wanting to go into your own business?

What particularly appeals to you about the ColorWash opportunity?

What are your future goals?



What would you like to achieve from your investment with ColorWash?

In what way will being self-employed affect your lifestyle?

Is this a joint application Yes/No

If yes, please provide following details and complete a separate evaluation form for each party.

Person's Name:

Person's Address:

.....

.....

.....

In what capacity do you envisage yourself and the other person working?

Myself? _____

Other party? _____



What is the proposed extent of the ownership of the business?



EMPLOYMENT HISTORY

Company: _____

Address: _____

Type of Business: _____

Employed from: _____ to: _____

Position held: _____

Annual Income: _____

Reason for leaving: _____

Company: _____

Address: _____

Type of Business: _____

Employed from: _____ to: _____

Position held: _____

Annual Income: _____

Reason for leaving: _____



Company: _____

Address: _____

Type of Business: _____

Employed from: _____ to: _____

Position held: _____

Annual Income: _____

Reason for leaving: _____

Company: _____

Address: _____

Type of Business: _____

Employed from: _____ to: _____

Position held: _____

Annual Income: _____

Reason for leaving: _____



GENERAL INFORMATION

How did you come to be introduced to franchising and ColorWash in particular?

Have you ever been involved in a franchised business before? Yes/No If so, which Company and where?

What do you consider are the benefits of joining a franchised group in comparison with setting up your own business?



The success of the franchise is dependent on adherence to an established operating system. How do you rate your ability to follow directed guidelines?

What qualities will you be able to bring to the ColorWash franchise?

What do you consider to be your greatest strength?



What do most people criticise you for?

Will you devote your full time to the business?

How does your spouse/partner feel about your interest in this opportunity?



FINANCIAL INFORMATION

Solicitor: _____

Address: _____

Phone: _____

Accountant: _____

Address: _____

Phone: _____



Average Monthly Income from present occupation / business: _____

(Inclusive of all allowances, commission, perks, fees and bonuses)

Other Income (Please indicate breakdown of source/s of other income below):

Total Amount of Funds Available For The Franchise: _____

Source of Funds: _____

Assets

Cash on Hand (unrestricted in banks):

Accounts and Loan Receivables:

Notes Receivable, Not Discounted:

Notes Receivables, Discounted with banks, finance companies, etc.:

Life Insurance, Cash Surrender Value (Do not deduct loans):



Other Stocks and Bonds:

Real Estate:

Automobiles, Registered in Own Name:

Other Assets, Enumerate)

Liabilities and Net Worth

Notes Payable to Banks. Unsecured Direct Borrowings Only

Notes Payable to Banks. Secured Direct Borrowings Only

Notes Receivables. Discounted with banks, financial institutions, etc.

Notes Payable to Others, Unsecured



Notes Payable to Others, Secured

Loans Against Life Insurance

Accounts Payable

Interests Payable

Taxes and Assessments Payable

Mortgages Payable on Real Estate

Other Liabilities (Itemize)

NET WORTH (Please state currency)

TOTAL LIABILITIES and NET WORTH (Please state currency)



I understand that the purpose of this application is to assess my suitability as a Franchisee. It does not obligate me or ColorWash.

I do hereby represent that all of the above answers are true and complete to the best of my knowledge and belief. I recognise that ColorWash is *not in any way obligated* to franchise an outlet to me because of our execution of this document. I acknowledge that any false statement on this application shall be considered sufficient cause to deny any further consideration or cause revocation of any signed agreement with ColorWash. I understand that an inquiry regarding my character, general reputation, personal characteristics, financial background and general fitness for being a ColorWash franchisee may be made as a result of this application.

In addition, by signing below I release any and all former and / or present employers, and any other personal or business references, from any liability whatsoever in connection with ColorWash attempts to investigate my background and determine my fitness to become a franchisee. I hereby authorise the release of any and all documents, records, and other information pertaining to me to ColorWash. A copy of this authorisation may be used in place of and shall be valid as the original.

I understand that ColorWash reserve the right to reject my application without assigning any reasons whatsoever.

Signature

Date