

Deli South USA Inc.
Michael's DELI & Seafood
Franchise Application

Personal Information

Name _____
(First, Middle, Last)

Date _____
Date of Application

Address List your current address. If less than 5 years list your previous address.

Current Street Address

Previous Address

Apartment Number

Apartment Number

City

City

State & Zip Code

State & Zip Code

How Long?

How Long?

Date of Birth

Social Security Number

Citizenship

Home Telephone Number

Business Telephone Number

Fax Number

E-mail Address

May we contact you at work? _____
Yes

_____ No

What is the best way to contact you ?

What is the best time to contact you?

Marital Status

Number of Dependants

List the ages of your dependents

Spouse's Name

Spouse's Social Security Number

Spouse's Date of Birth

Spouse's Citizenship

General Information

Why are you interested in Michael's DELI franchise?

List your geographical area of interest.

How many stores are you interested in opening?

Give a brief explanation of why you think you would be a successful Michael's DELI franchisee.

What percentage of time would you be able to devote to operating the business?

FULL TIME PERCENTAGE INVESTOR ONLY

What amount of cash do you have available to begin the business?

Do you have a plan and the ability to finance the balance of the funds required to open a Michael's DELI?

When would you like to open a franchise?

Have you ever been a party to a lawsuit or other legal action?

YES NO

If the answer is yes, please disclose the circumstances.

Assets

Current Liquid Assets

Cash on Hand \$ _____
Checking Account \$ _____
Savings Account \$ _____
Certificates \$ _____
Money Owed to You \$ _____
Tax Refund Due \$ _____
Cash Value-Life Ins. \$ _____
Stocks / Bonds \$ _____
Mutual Fund Shares \$ _____
Other _____
\$ _____
\$ _____

Liabilities

Current Liabilities

Auto Loan(s) \$ _____
Installment Debt \$ _____
Personal Loans (Total) \$ _____
Charge Accounts (Total) \$ _____
Credit Cards (Balance Total) \$ _____
Mortgage Loan \$ _____
Insurance Due \$ _____
Taxes Due \$ _____
Other (List) _____
\$ _____
\$ _____
\$ _____

Fixed Assets

Automobiles \$ _____
Home \$ _____
Personal Property \$ _____
Other (List) _____
\$ _____
\$ _____

Deferred Assets

Retirement Plan \$ _____
I.R.A. \$ _____
Other (List) _____
\$ _____
\$ _____
\$ _____

Total Assets \$ _____

Total Liabilities \$ _____

Employment History

Current Employer _____ Current Position _____

Employer Address _____

Telephone Number _____

Dates of Employment

From _____ to _____

Current Duties

Previous Employer _____ Position Held _____

Employer Address _____ Salary Level _____

Telephone Number _____

Dates of Employment

From _____ to _____

Current Duties

Previous Employer _____ Position Held _____

Employer Address _____ Salary Level _____

Telephone Number _____

Dates of Employment

From _____ to _____

Current Duties

We appreciate your interest in our company. This application does not obligate either party to move forward with a franchise. This information is being supplied for the purposes of applying for a Michael's DELI franchise and shall be kept in the strictest confidence by Deli South USA.

The information supplied by me on this application is true to the best of my knowledge. I understand that necessary credit and reference inquiries will be made and I hereby authorize the release of such information to Deli South USA.

Applicant Name

Co-Applicant Name

Applicant Signature

Co-Applicant Signature

Date

Date