

Spouse's Occupation

CONFIDENTIAL FRANCHISE APPLICATION

Please complete and return to: Bread Poets, 106 E. Thayer Avenue, Bismarck, ND 58501.

Should you have any questions, please don't hesitate to call Jon at 701.751.POET or e-mail jon@breadpoets.com.

MARKET AREA

PLEASE PRINT

First Choice			Second Choice			
State 5		State	State			
County		County				
•		City	City Towns			
		Towns				
	PERSONAL	INFORMA	ATION			
Last Name	First Name	First Name		lame	Date of Birth	
Street Address	City	City		Zip	Telephone	
How long at your present ac	ldress?	How lon	ng at your p	previous a	ddress?	
E-mail address		Social S	ecurity #	Citizenship		
Sex □ Male	☐ Female	Height			Weight	
Marital Status	☐ Single ☐ Marri	ied 🗆	Other			
Spouse's Last Name	First Name		Middle N	lame	Date of Birth	
Number of Children	Children's Ages				1	
Occupation	Employer	Employer		ng?	Salary	

How Long?

Salary

Employer

	EDUCATION I	NFORMATIO	N		
School	Name & Location of School	Course of Study	No. of Years Completed	Did you graduate?	Degree or Diploma
	(Exclude those which may disclose your	race, color, religion	or national origin	.)	
	U.S. ARMED SERVIO				
Describe your duties and any special training		Brai	nch of service		
		Peri	od of active duty		
		Ran	k at discharge		
		Fina	al discharge date		

EMPLOYMENT HISTORY				
May we contact the employers li	isted below?	es □ No		
Have you ever been bonded?	D Y	es □ No		
If yes, on what jobs?				
List below al	l present and past e	employment, beginning with	n your most recent.	
Company	From To Mo. Yr. Mo. Yr.	Position Title	Reason for Leaving	Name & Title of Supervisor
Address		Describe Work		
Type of Business	Phone		Starting Salary	Last Salary
			+	
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				<u> </u>
Company	From To Mo. Yr. Mo. Yr.	Position Title	Reason for Leaving	Name & Title of Supervisor
Address		Describe Work		
Type of Business	Phone		Starting Salary	Last Salary

ASSETS	
Cash on hand in banks	
Deposits or down payments	
Bank names and account #s	
Government securities	
Securities:	
Account notes receivable	
Real estate owned-home	
Real estate owned-other	
Automobiles	
Cash surrender value-life insurance	
Beneficiary: Face value: \$	
Other assets, itemized:	
Total Assets	

LIABILITIES		
Notes payable to banks		
Bank names and account #s		
Notes payable to others		
Accounts and bills due		
Real estate mortgages payable acct.	. # - home	
Bank name:		
Real estate mortgages payable acct.	.#-other	
Bank name:		
Other debts, itemized:		
Total Lia	abilities	
Net Worth (Total Assets Less Total Li	abilities)	
Total Liabilities & Net	Worth	

SOURCES OF ANNUAL INCOME			
	Self	Spouse	
Salary			
Bonus & Commissions			
Dividends & Interest			
Real Estate Income			
Other Income, itemized:			
Total			

REFERENC	CES
	Reference Check
Banking:	
Name	
Address	
Business:	
Name	
Address	
Personal:	
Name	
Address	

ADDITIONAL INFORMATION

Where did you hear about Bread Poets?	_
	_
Have you any judgements or legal proceedings pending against you? ☐ Yes ☐ No If so, give particulars	
	_
Describe any health problems or physical disability	_
	_
What do you like to do in your spare time?	
	_
Please explain in detail why you are choosing a Bread Poets specialty bread shop and how you see your bread store fulfilling your future goals.	_
	_
	_
	_
In submitting the foregoing information and financial statement the undersigned guarantees its accuracy with the knowledge and intent that it will be relied upon in granting a franchise and extending credit to the undersigned. The undersigned agrees that, if requested, assets and liabilities verification information will be provided. The undersigned warrants that he/she/it has not knowingly witheld any information that might affect him/her/it as credit risk, and expressly agrees to notify Bread Poets, LCC immediately in writing of any material change in his/her/its financial condition whether or not application for further credit is made, and in the absence of such written notice, it is expressly agreed that Bread Poets, LLC in granting a franchise or credit, may rely on this statement as having the same force and effect as if delivered upon the date the franchise is granted or credit is granted, continued or renewed.	a- a
The undersigned certifies that each part of this evaluation form and any attachment hereto has been carefully read and is true and correct.	
Date: Sign Here	
This notice is to inform you that Bread Poets, LLC, ("We or Us") intends to obtain credit reports, consumer reports and investigative consumer reports as defined in the Fair Credit Reporting Act. We will use these reports in connectino with our decision of whether to grant you (or the entity whose obligations you are guaranteeing) a license and to extend credit in connection with the grant. This disclosure and release form is provided in compliance with the Fair Credit Reporting Act.	1
By signing this form, You consent to the release of any consumer information and authorize Us to obtain credit reports, consumer credit reports and investigative consumer reports.	t
Date: Sign Here	