

**CAUTION:
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This application is your first step. Please fill this application out completely. Make sure you don't skip any questions or leave out any information. This is not a contract so there is no obligation for either of us. All information will be held in strictest confidence.

YOUR PERSONAL INFORMATION

Name: _____
Last First Middle Initial

Social Security Number: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Daytime Phone Number: _____ Evening Phone Number: _____

Birthplace: _____ Birth date / /

US Citizen? ☐ Yes ☐ No

Spouse's Name: _____ Social Security Number: _____

Any Children? ☐ Yes ☐ No

Names and Ages: _____

Last year attended school: _____ Name of School: _____ Degree: _____

Are you involved in any civic, social, scholastic or fraternal organizations? Please tell us about them.

What hobbies or activities do you enjoy in your spare time?

ONE The Cheese Steak Shop, LLC.

2300 Contra Costa Blvd., Ste 510

Pleasant Hill, CA 94523

Office: 510.724.7100

www.cheesesteakshop.com

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YOUR PERSONAL REFERENCES

Please list the name, relationship and daytime phone numbers of three personal references you have known for at least five years.

1. Name: _____ Phone Number: _____
2. Name: _____ Phone Number: _____
3. Name: _____ Phone Number: _____

YOUR BUSINESS INFORMATION

1. Your Most Recent Employer

Dates Employed: _____ / _____
From To

Company Name: _____ Phone Number: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Final Job Title: _____ Final Annual Compensation: _____

Name of Immediate Supervisor: _____ May We Contact Them? ☐ Yes ☐ No

Your Responsibilities: _____

2. Your Previous Employer (Most Recent)

Dates Employed: _____ / _____
From To

Company Name: _____ Phone Number: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Final Job Title: _____ Final Annual Compensation: _____

Name of Immediate Supervisor: _____ May We Contact Them? ☐ Yes ☐ No

Your Responsibilities: _____

Have you owned any other businesses not listed? ☐ Yes ☐ No

If yes, please tell us about them

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Have you had any previous restaurant experience? ☐ Yes ☐ No

If yes, please tell us about it

Any other current business interests?

Have you ever been convicted of a crime, other than a traffic violation, or have been refused bond or been involved in any legal action? ☐ Yes ☐ No If yes, please provide circumstances

YOUR BUSINESS REFERENCES

Please list the name and daytime phone numbers of three business references you have known for the past five years.

1. Name:_____ Phone Number:_____

2. Name:_____ Phone Number:_____

3. Name:_____ Phone Number:_____

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YOU AND THE CHEESE STEAK SHOP

How did you learn about The Cheese Steak Shop?

Why do you want to be a franchise owner of a Cheese Steak Shop restaurant?

Will you operate and manage your Cheese Steak Shop restaurant on a full time basis? ☐ Yes ☐ No

If no, please explain:

If your application is approved, when would you like to open your Cheese Steak Shop? / /

Are you willing to spend as much as four weeks attending our training class? ☐ Yes ☐ No

Where would you like your Cheese Steak Shop restaurant located? (Please list locations in order of preference)

1.Location:_____

2.Location:_____

3.Location:_____

How much capital are you prepared to invest in a Cheese Steak Shop restaurant? _____

How will you finance the remainder? _____

Name your financing sources and terms _____

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YOUR FINANCIAL INFORMATION

Statement of financial Condition as of: / /

ASSETS CASH

Bank Name(s)

_____ \$ _____
_____ \$ _____
_____ \$ _____
_____ \$ _____

Stocks, Bonds, Securities (itemize)

_____ \$ _____
_____ \$ _____
_____ \$ _____
_____ \$ _____

Real Estate (owned)

_____ \$ _____
_____ \$ _____

Other Notes Receivable

_____ \$ _____
_____ \$ _____

Automobiles

_____ \$ _____
_____ \$ _____

Other Personal Property

_____ \$ _____
_____ \$ _____

Life Insurance (cash value)

_____ \$ _____

Other Assets (itemize)

_____ \$ _____

TOTAL ASSETS

\$ _____

LIABILITIES NOTES PAYABLE

Bank Name(s)

_____ \$ _____
_____ \$ _____
_____ \$ _____
_____ \$ _____

Institution(s)

_____ \$ _____
_____ \$ _____

Others

_____ \$ _____
_____ \$ _____

Real Estate Mortgages Payable

_____ \$ _____
_____ \$ _____

Accounts and Bills Due

_____ \$ _____
_____ \$ _____

Unpaid Taxes

_____ \$ _____
_____ \$ _____

Other Debts (itemize)

_____ \$ _____
_____ \$ _____

Life Insurance Loans

_____ \$ _____

TOTAL LIABILITIES

\$ _____

| | |
|------------------------|-----------------|
| Total Liabilities | \$ _____ |
| Less Assets | \$ _____ |
| Total Net Worth | \$ _____ |

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YOUR ANNUAL INCOME

Salary \$ _____

Spouse's Salary \$ _____

Bonuses & Commissions \$ _____

Interest & Dividends \$ _____

Mortgage/Rent Payments \$ _____

Utility Payments \$ _____

Taxes \$ _____

Insurance Payments \$ _____

Other Income (itemize) _____

_____ \$ _____

_____ \$ _____

TOTAL INCOME \$ _____

YOUR ANNUAL EXPENDITURES

_____ \$ _____

_____ \$ _____

_____ \$ _____

_____ \$ _____

_____ \$ _____

_____ \$ _____

_____ \$ _____

_____ \$ _____

_____ \$ _____

_____ \$ _____

_____ \$ _____

TOTAL EXPENDITURES \$ _____

YOUR AUTHORIZATION

I understand that any information that I have received from “**One Cheese Steak Franchising, LLC**” is being made available to me as a result of this application. It shall be held in the strictest confidence. My signature below authorizes any bank, S&L, insurance company or other financial institution to release to “**One Cheese Steak Franchising, LLC.**” any and all information concerning my accounts, including deposits withdrawals or other financial transactions. I further authorize the release of any information regarding my character, credit standing or past employment. This authorization shall be valid for information up to the date hereof and for ninety days.

Signature: _____

Date: / /

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