



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.

Please download this form and email to tonyb@cheesesteakshop.com

YOUR PERSONAL INFORMATION			
Name:	Middle Initial	Social Security	y Number:
Street Address:			
City:	State:		Zip:
Daytime Phone Number:	Even	Evening Phone Number:	
Birthplace:			Birth date / /
US Citizen? [] Yes [] No			
Spouse's Name:		Social Security	y Number:
Any Children? [] Yes [] No			
Names and Ages:			
Last year attended school: N	Same of School:		_ Degree:
Are you involved in any civic, social, sch	olastic or fraternal org	anizations? Plea	se tell us about them.
What hobbies or activities do you enjoy i	n your spare time?		





## 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: / To To		
Company Name:			
Street Address:			
	e: Zip:		
Final Job Title: Final An	Final Annual Compensation:		
Name of Immediate Supervisor:	May We Contact Them? [] Yes [] No		
Your Responsibilities:			
2. Your Previous Employer (Most Recent)	Dates Employed: /		
Company Name:	Phone Number:		
Street Address:			
City: State	e: Zip:		
Final Job Title: Final An	Final Annual Compensation:		
Name of Immediate Supervisor:	May We Contact Them? [] Yes [] No		
Your Responsibilities:			
Have you owned any other businesses not listed? [] Yes [] If yes, please tell us about them	No		
If yes, please tell us about them			





Have you had any previous restaurant experience? $\[]$ Yes $\[]$ N	0
If yes, please tell us about it	
Any other current business interests?	
Have you ever been convicted of a crime, other than a traffic violative involved in any legal action? [] Yes [] No If yes, please provided in the convicted of a crime, other than a traffic violation.	
YOUR BUSINESS REFERENCES	
Please list the name and daytime phone numbers of three busine five years.	ss references you have known for the past
1. Name:	Phone Number:
2. Name:	Phone Number:
3. Name:	Phone Number:





YUU AND THE CHEESE STEAK SHUP
How did you learn about The Cheese Steak Shop?
Why do you want to be a franchise owner of a Cheese Steak Shop restaurant?
TAT: Il anno an anno and anno an anno Change
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





YOUR FINANCIAL INFORMATION	Statement of financial Condition as of:	/ /
ASSETS CASH	<b>LIABILITIES</b> NOTES PAYABLE	
Bank Name(s)	Bank Name(s)	
\$		\$
\$		\$
\$		\$
\$		\$
Stocks, Bonds, Securities (itemize)	Institution(s)	
\$		\$
\$		\$
\$	Others	\$
\$		\$
Real Estate (owned)	Real Estate Mortgages Payable	
\$		\$
\$		\$
Other Notes Receivable	Accounts and Bills Due	
\$		\$
\$	<u> </u>	\$
Automobiles \$	Unpaid Taxes	
\$		\$
\$		\$
Other Personal Property	Other Debts (itemize)	
\$		\$
Life Insurance (cash value)	 Life Insurance Loans	\$
the insurance (cash varae)	Elle Illourance Bouris	\$
Other Assets (itemize)		Ψ
\$	TOTAL LIABILITIES	\$
TOTAL ASSETS \$	T. 11:1:1:	
	Total Liabilities Less Assets	\$
	Total Net Worth	\$ <b>\$</b>





YOUR ANNUAL INCOME		YOUR ANNUAL EXPENDITUR	ES
Salary	\$		\$
Spouse's Salary	\$		\$
Bonuses & Commissions	\$		\$
Interest & Dividends	\$		\$
Mortgage/Rent Payments	\$		\$
Utility Payments	\$		\$
Taxes	\$		\$
Insurance Payments	\$		\$
Other Income (itemize)			\$
	_ \$		\$
	_ \$		\$
TOTAL INCOME	\$	TOTAL EXPENDITURES	\$
YOUR AUTHORIZATION			
being made available to me as a r signature below authorizes any be to "One Cheese Steak Franchisis deposits withdrawals or other fina	result of this applica ank, S&L, insurance ang, LLC." any and a ancial transactions. anding or past emp	ed from "One Cheese Steak Franchation. It shall be held in the strictest e company or other financial instituall information concerning my according further authorize the release of ar loyment. This authorization shall be seen.	confidence. My tion to release unts, including by information
Signature:		Date:	/ /

Email this form to tonyb@cheesesteakshop.com