

FRANCHISE APPLICATION FORM

DATE: Do you have a proposed site?		Yes No	Do you have a proposed site				
Proposed Site:			(Give at least 3)				
Applicant Personal	Informa	ition	(Give at least 3)				
Name of Applicant	Last N	ame	First Name			Middle Name	
Date of Birth	Month		Day		Year		
Place of Birth	City		Country		Zipcode		
Residential Address	City [(No	., Street, Br	rgy, City, Region, Country, 2	Zip Cod	·		
Email Address					Mobile Number		
Home Telephone No).				Civil Status		
Citizenship							
	es 🗖	No	gyupsalamat franchise?				
Single ▼							
Name of Mother	Last N	ame	 First Name			Middle Name	
Date of Birth	†					٦	
	Month		Day		Year	_	
Occupation					Business (if any)		
Married ▼							
Name of Spouse	Last N	ame	 First Name			Middle Name	
Date of Birth						٦	
	Month		Day		Year	_	
Occupation					Business (if any)		
		Na	ame of Children		Date of	Birth	



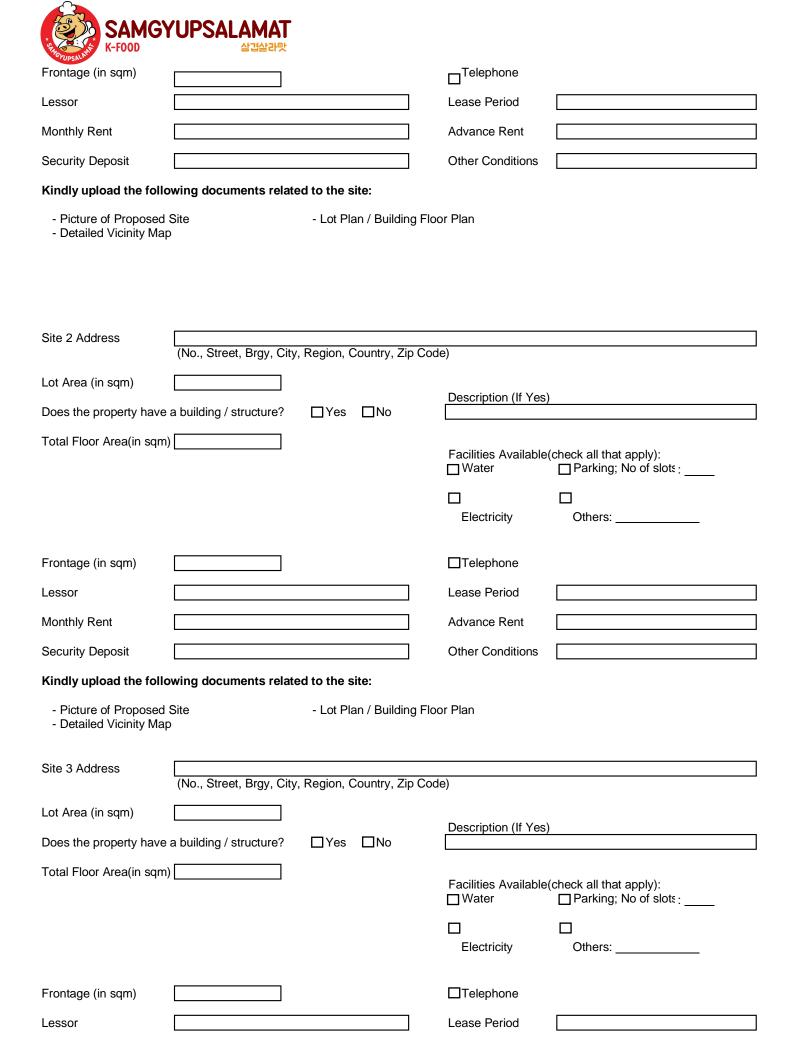
Do you or your family of a Korean BBQ Resyes, provide details.	member own or is par staurant Concept? If		Are you related by blood or marriage to any Samgyupsalamat employee, Franchisee or Managing Director? If yes, provide details.			
Has any judgment ever Yes Are you involved in per Have you ever declared	r been entered against ☐ No nding litigation? d personal bankruptcy		your employer where yo No No	□ No ou were one of the liti	gants?	
Educational Backgrou	und					
Educational Background	Name of School	School Address	Inclusive Years	Degree Completed	Awards / Citations	
Business Experience *List only Top 3 busine Business 1 Present Business Name						
Business Address						
Business / Idai ses	(No, Building Name	, Street, Brgy, City, Regi	on, Country, Zip Code)			
Position			Years in Business			
Telephone Number						
Nature of Business			Type of Business Ownership			
Business 2 Present Business Name						
Business Address	(No, Building Name	, Street, Brgy, City, Regi	on, Country, Zip Code)			
Position			Years in Bus	iness		
Telephone Number						
Nature of Business			Type of Busine	ess Ownership		



Present Business Name					
Business Address					
Business / tauress	(No, Building Name	, Street, Brgy, City, Region	on, Country, Zip Code)		
Position			Years in Bus	iness	
Telephone Number					
			Time of Busine		
Nature of Business			Type of Busine	ess Ownersnip	
Previous Work Experi	ence				
Name of Company	Position	Type of Business	Address	Date Employed (MM/DD/YYYY)	Responsibilities
Personal Financial Ba	ckground				
Salary, Wages		Bonus, Commission	is		
Business Interest					
To what extent will you	be actively involved in	the day-to-day operation	ns of the franchised bran	nch?	
What amount of cash w What will be the source	ill you personally inve of these funds?	usiness will you own? st in this franchise? gyupsalamat Franchise?			
References					
Г	Name	Position	Relationship	How long known	Contact No.
Bank / Credit	Namo	1 Control	rtolationiomp	Tiow long known	Contact IVe.
Applied Franchise Are	ea				
Site 1 Address	(No., Street, Brgy, City, Region, Country, Zip Code)				
Lot Area (in sqm)					
Does the property have	a building / structure?	P □Yes □No	Description (If Ye	es)	
Total Floor Area(in sqm					
Total Floor Alea(III Sqffi	<i>,</i>		Facilities Availab	le(check all that apply ☐ Parking; No of	/): slots :

Electricity

Others:





Monthly Rent	Advance Rent	
Security Deposit	Other Conditions	

Kindly upload the following documents related to the site:

- Picture of Proposed SiteDetailed Vicinity Map

- Lot Plan / Building Floor Plan

CERTIFICATION

By signing below, I confirm that the informand correct.	mation given by me in this form is current, true
I hereby authorize SAMGYUPSALA Agent(s)/Company(ies) to verify and investigate tappropriate and in accordancewith law.	•
I fully understand that any false, inaccur shall be considered sufficient ground for rejectio my undertakings, warranties and representations or agreement that may hereafter be executed undersigned franchise applicant.	s that will cause the termination of any contract
Signa	ature over Printed Name of Franchise Applicant
	Date