



PERSONAL INFORMATION

Date: _____ Name: _____
SS#: _____ Date of Birth: _____
Address: _____
City: _____ State: _____ Zip: _____
Home Phone: _____ Business Phone: _____ Fax: _____
Spouse's Name: _____ Spouse's SS#: _____
Dependents/Ages: _____
Are you a citizen of the USA? _____ E-mail Address: _____
If no, are you US resident alien? _____ If no, what is your visa status? _____

EDUCATION RECORD

High School: _____ Last grade completed 8 9 10 11 12 _____ Year: _____
College/University: _____ Major: _____
Degree Received: _____ Year: _____
Other degrees or training courses: _____

BUSINESS EXPERIENCE (Work history and/or business owned)

(Please attach resume if available)

Present: Company: _____ Position: _____ Date Employed _____
Address: _____ Type of Business: _____
Responsibilities: _____

May we contact this co.? Yes No If Yes, contact name _____
Telephone _____

Previous: Company: _____ Position: _____ Date Employed _____
Address: _____ Type of Business: _____
Responsibilities: _____

May we contact this Co.? Yes No If Yes, contact name _____
Telephone _____

Have you ever been convicted of anything other than minor traffic violations? _____ Has any judgment ever been entered against you or your company or your employer where you were one of the litigants? If yes, explain.

Have you or any business entity in which you ever owned an interest been involved in bankruptcy proceedings? _____ If yes, explain.

OUR OPPORTUNITY

How did you become aware of this opportunity?
Magazine List: _____ Referral Whom: _____
Newspaper Specify: _____ Trade Show Where: _____
Store Visit Where: _____ Other Describe: _____

Where is the ideal location/town you would like to operate a shop? (In priority)

1. _____
2. _____
3. _____

PERSONAL FINANCIAL STATEMENT

ASSETS LIABILITIES

Cash, Checking, Savings Accounts \$ _____
Loans, Notes (non-real estate) \$ _____
Stocks, Bonds, Securities (non-IRAs) _____
Accounts and bills due _____
Accounts/Notes Receivable _____
Total Credit Card Liabilities _____
Other real estate-market value _____
Other real estate mortgage _____
Real estate - home market value _____
Real estate - home mortgage _____
Life insurance - cash value _____
Taxes Due _____
IRA, 401K or other retirement _____
Other liabilities (itemize) _____
Other Assets (itemize) _____
TOTAL ASSETS \$ _____ TOTAL LIABILITIES \$ _____
NET WORTH (Assets minus liabilities) \$ _____
Liquid capital available (non-borrowed) to invest in this Franchise?
\$ _____
Annual source of income:
Salary \$ _____
Bonus/Commissions \$ _____
Dividends/Interest \$ _____
Other Source \$ _____ (specify): _____
TOTAL \$ _____

Do you plan on being an owner-operator? . Yes . No
Do you plan to have a partner? . Yes . No
If so, will the partner be active? . Yes . No
(All partners will need to complete Franchisee Application)
Do you plan to have investors? . Yes . No
If so, to what extent? _____

STATEMENT OF CERTIFICATION

I/We represent and warrant that all of the statements made by me/us in this application are true and correct. I/We understand that submitting this form does not constitute an agreement by either party and neither party is under any obligation. By signing this application the individual(s) name(s) herein give BurritoVille or an assigned lender the right to contact all references and obtain whatever information deemed necessary to process this application. BurritoVille and/or it's assigned lender is authorized to investigate my background, including employment history, personal references and educational background, as well as public records, including credit history, civil/criminal history and motor vehicle data.

Signature of Applicant _____
Date _____

Note : Under the Electronic Signature and Global Commerce Act and the Uniform Electronic Transactions Act, you may type in the date and signature.