



# APPLICATION



28381 Davis Parkway, Suite 701 • Warrenville, IL 60555 • 630-393-2280

## SECTION ONE - PERSONAL INFORMATION

LAST NAME		FIRST NAME		MIDDLE NAME		SOCIAL SECURITY NUMBER				
DATE OF APPLICATION		BIRTH DATE		AGE		HOME PHONE		WORK PHONE		
CURRENT ADDRESS			CITY			STATE		ZIP		HOW LONG?
PREVIOUS ADDRESS			CITY			STATE		ZIP		HOW LONG?
HEIGHT		WEIGHT		SINGLE		MARRIED		WIDOWED		
FULL NAME OF SPOUSE					OCCUPATION OF SPOUSE					
NAMES AND AGES OF DEPENDENT CHILDREN										

NOTE: IF APPLICANT IS A CORPORATION OR PARTNERSHIP, SEPARATE DATA MUST BE PROVIDED FOR ALL PARTNERS, SHAREHOLDERS, DIRECTORS AND OFFICERS.

## SECTION TWO - APPLICANTS FRANCHISE PLANS

FORM OF BUSINESS ORGANIZATION (Please state the type of business entity in which you intend to operate the licensed business. If a corporation, please indicate names of all partners, shareholders, officers, directors and any other principles involved. Also indicate the state in which the partnership or corporation was formed, or pursuant to the laws of which said business exists.)

Sole Proprietorship  Corporation  LLC

\_\_\_\_\_

Because of the nature of this business, Rosati's requires store owners to be involved in the daily operations of the business.

Will you devote your full-time to this business?  Yes  No

If no, indicate who will run the business, and how many hours you plan to spend at your store per week. \_\_\_\_\_

Have you ever owned a food establishment?  Yes  No

If yes, describe \_\_\_\_\_

Amount of cash available for this business. \$ \_\_\_\_\_

Explain \_\_\_\_\_

Have you ever owned a business?  Yes  No

If yes, explain \_\_\_\_\_

Do you own or have you ever owned a franchise?  Yes  No If yes, name of franchise \_\_\_\_\_

Have you ever operated or participated in the operation of a fast food business?  Yes  No A pizza business?  Yes  No

If yes, name and location of operation \_\_\_\_\_

List date on which you would be prepared to start franchise operations \_\_\_\_\_

Area for which application is being made \_\_\_\_\_ Would you consider any other location?  Yes  No

If yes, First Choice \_\_\_\_\_ Second Choice \_\_\_\_\_ Third Choice \_\_\_\_\_

THIS IS NOT A CONTRACT OR AN OFFER TO PURCHASE A FRANCHISE

AN OFFER TO PURCHASE A FRANCHISE CAN ONLY BE MADE AFTER YOU HAVE REVIEWED DISCLOSURE INFORMATION REQUIRED BY THE FEDERAL TRADE COMMISSION.

**SECTION THREE - EDUCATION**

PLEASE LIST ALL EDUCATION YOU HAVE RECEIVED INCLUDING HIGH SCHOOL, COLLEGE, MILITARY OR SPECIAL TRAINING

NAME OF SCHOOL	DATES OF ATTENDANCE	MAJOR AND MINOR FIELDS	% OF EXPENSES EARNED
LOCATION OF SCHOOL	GRADE AVERAGE OR CLASS STANDING	DIPLOMA OR DEGREE	DATE OF GRADUATION
NAME OF SCHOOL	DATES OF ATTENDANCE	MAJOR AND MINOR FIELDS	% OF EXPENSES EARNED
LOCATION OF SCHOOL	GRADE AVERAGE OR CLASS STANDING	DIPLOMA OR DEGREE	DATE OF GRADUATION
NAME OF SCHOOL	DATES OF ATTENDANCE	MAJOR AND MINOR FIELDS	% OF EXPENSES EARNED
LOCATION OF SCHOOL	GRADE AVERAGE OR CLASS STANDING	DIPLOMA OR DEGREE	DATE OF GRADUATION

**SECTION FOUR - BUSINESS EXPERIENCE RECORD**

GIVE A COMPLETE RECORD OF YOUR EXPERIENCE BEGINNING WITH YOUR PRESENT OR LAST POSITION. INCLUDE MILITARY SERVICE. INDICATE BY ASTERISK (\*) THOSE EMPLOYERS YOU DO NOT WISH US TO CONTACT.

HAVE YOU EVER BEEN SELF EMPLOYED?		
NAME, ADDRESS AND PHONE NUMBER OF CURRENT EMPLOYER		
POSITION, TITLE AND DUTIES		
DATES OF EMPLOYMENT	SUPERVISOR'S NAME AND TITLE	
REASON FOR SEPARATION	BEGINNING SALARY	ENDING SALARY
NAME, ADDRESS AND PHONE NUMBER OF CURRENT EMPLOYER		
POSITION, TITLE AND DUTIES		
DATES OF EMPLOYMENT	SUPERVISOR'S NAME AND TITLE	
REASON FOR SEPARATION	BEGINNING SALARY	ENDING SALARY
NAME, ADDRESS AND PHONE NUMBER OF CURRENT EMPLOYER		
POSITION, TITLE AND DUTIES		
DATES OF EMPLOYMENT	SUPERVISOR'S NAME AND TITLE	
REASON FOR SEPARATION	BEGINNING SALARY	ENDING SALARY

**SECTION FIVE - INCOME**

CURRENT YEAR: 20_____		PREVIOUS YEAR: 20_____	
EARNED (salary, commissions, fees, etc.)	\$ _____	EARNED (salary, commissions, fees, etc.)	\$ _____
INTEREST & DIVIDENDS RECEIVED	\$ _____	INTEREST & DIVIDENDS RECEIVED	\$ _____
RENTS RECEIVED	\$ _____	RENTS RECEIVED	\$ _____
OTHER INCOME	_____	OTHER INCOME	_____
_____	\$ _____	_____	\$ _____
_____	\$ _____	_____	\$ _____
_____	\$ _____	_____	\$ _____
_____	\$ _____	_____	\$ _____
GROSS INCOME	\$ _____	GROSS INCOME	\$ _____

**SECTION SIX - REFERENCES**

PLEASE LIST THREE PROFESSIONAL AND CHARACTER REFERENCES - NAME, ADDRESS AND TELEPHONE  
(List name, address and telephone, and the nature of their association with you.)

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

LIST THREE CREDIT REFERENCES - NAME, ADDRESS AND TELEPHONE

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

BANK REFERENCES - NAME, ADDRESS  CHECKING ACCOUNT  SAVINGS ACCOUNT  OTHER

**SECTION SEVEN - CONTINGENCIES**

Do you have any contingent or future liabilities?  Yes  No If so, please itemize \_\_\_\_\_

\_\_\_\_\_ Are any of your assets pledged? \_\_\_\_\_

Are you a defendant in any suits or legal actions? \_\_\_\_\_

Have you ever taken bankruptcy? \_\_\_\_\_

\_\_\_\_\_

**SECTION EIGHT - CONFIDENTIAL FINANCIAL STATEMENT**

(PLEASE ANSWER ALL QUESTIONS USING "NO" OR "NONE" WHERE NECESSARY) Date \_\_\_\_\_

ASSETS		LIABILITIES AND NET WORTH	
Cash on hand, and unrestricted in banks	\$	Note payable to banks unsecured (direct borrowings only)	\$
U.S. Government Securities		Notes payable to banks secured (direct borrowings only)	
Accounts and Loans Receivable		Notes Receivable, Discounted (with banks, finance co., etc.)	
Notes Receivable, Not Discounted		Notes Payable to Others, Unsecured	
Notes Receivable, Discounted (with banks, finance co., etc.)		Notes Payable to Others, Secured	
Life Insurance, Cash Surrender Value ( Do not deduct loans)		Loans against Life Insurance	
Other Stocks and Bonds		Accounts Payable	
Real Estate		Interest Payable	
Automobiles (Registered in own name)		Taxes and Assessments Payable	
Other Assets (Itemize)		Mortgages Payable on Real Estate	
		Other Liabilities (Itemize)	
		NET WORTH	\$
<b>TOTAL ASSETS</b>	<b>\$</b>	<b>TOTAL LIABILITIES &amp; NET WORTH</b>	<b>\$</b>

**SUPPLEMENTARY SCHEDULES**

No. 1 Banking Relations (A list of all my bank accounts, including savings and loans.)

Name and Location of Bank	Cash Balance	Amt. of Loan	Maturity of Loan	How Endorsed, Guaranteed or Secured

No. 2 Accounts, Loans and Notes Receivable (A list of the largest amounts owing to me.)					
Name and Address of Debtor	Amt. Owing	Age of Debt	Description and Nature of Debt	Description of Security Hold	Date Payment Expected

No. 3 Life Insurance								
Name of Person Insured	Name of Beneficiary	Name of Insurance Co.	Type of Policy	Face Amount of Policy	Total Cash Surrender Value	Total Loans Against Policy	Amount of Yearly Premium	Is Policy Assigned?

No. 4 Other Stocks and Bonds						
Face Value (Bonds) No. Shares (Stocks)	Description of Security	Registered in Name of	Cost	Present Market Value	Income Rec. Last Year	To Whom Pledged

No. 5 Real Estate - The legal equitable title to all the real estate in this statement is solely in the name of the undersigned, except as noted:								
Description or Street No.	Dimensions or Acres	Improvements Consist of	Mortgages or Liens	Due Dates and Amounts of Payments	Original Cost	Present Market Value	Unpaid Taxes	
							Year	Amount

No. 6 Your current monthly income and expenses			
Current Monthly Gross Income		Current Monthly Expenses	
Salary	\$ _____	Mortgage/Rent	\$ _____
Commissions/Bonus	\$ _____	Car Payment	\$ _____
Rental Income	\$ _____	Credit Cards	\$ _____
Other	\$ _____	Other	\$ _____
Total Monthly Income	\$ _____	Total Monthly Expenses	\$ _____

In submitting the foregoing application and statement the undersigned guarantees the accuracy with the intent that it be relied upon in granting a franchise and extending credit to the Undersigned and warrants that he/she has not knowingly withheld any information that might affect his/her credit risk, and the Undersigned expressly agrees to notify Franchisor immediately in writing of any material change in his/her financial condition whether application for further credit is made or not and in the absence of such written notice, it is expressly agreed that Franchisor in granting a franchise or credit may rely on this statement as having the same force and effect as if delivered upon the date additional credit is requested or existing credit is extended or continued.

I hereby give Rosati's and their duly authorized representatives permission to check the above references and to make a credit check with the credit bureau in any county or municipality where I have lived, or worked, or where they feel such a check is necessary.

**Applicant's Statement of Confidentiality**

IN CONSIDERATION of Rosati's evaluation of me or any of my business entity as an applicant to become a FRANCHISEE of Rosati's, and for other good and valuable consideration, I agree

THAT all financial records and projections of any kind to which I gain access or about which I gain knowledge during the application process are confidential trade secrets of Rosati's as defined in the Uniform Trade Secrets Act;

THAT all recipes, ingredients, mixing methods, baking methods, stand layouts, equipment specifications, trademarks, trade names, systems, and related matters constituting Rosati's business are also confidential and constitute trade secrets of Rosati's as defined in the Uniform Trade Secrets Act; and

THAT said information shall not be disclosed to any person not formally affiliated with Rosati's either during or after the application process.

Further, I will not participate in any activity considered detrimental to the business interests of Rosati's.

Date \_\_\_\_\_ Signed \_\_\_\_\_

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