



PERSONAL DATA AND BUSINESS HISTORY

PERSONAL INFORMATION (please print clearly):

Name _____
Spouse's First Name _____ Number of dependants _____
Home Address _____
City _____ State/Province _____
Zip/Postal Code _____ Telephone (home) _____

BUSINESS INFORMATION (where currently employed):

Business Name and Address _____
City _____ State/Province _____
Telephone (work) _____ Fax Number _____
Position and Duties _____

BUSINESS EXPERIENCE (beginning with the most recent to present employment):

- 1) Company Name _____
Position Held _____
Dates Employed From _____ To _____

- 2) Company Name _____
Position Held _____
Dates Employed From _____ To _____

Exact nature of management experience (including self-employment) _____

Do you currently (or have you ever) owned a franchise? (please circle one) **Yes** **No**

If yes, please give details _____

Would you expect to devote your full time to this Business? _____
If not, what percentage will you devote? _____
When would you be prepared to start this venture? _____
Current Citizenship _____





FINANCIAL DATA

Cash, term deposits and G.I.Cs \$ _____

Stocks and securities at current market value (exclude RSPs) \$ _____

Real Estate Equity (above mortgages at current market value) \$ _____

Equity in business ventures (liquid) \$ _____

Equity in business ventures (non-liquid) \$ _____

Other assets \$ _____

TOTAL ASSETS \$ _____

Liabilities (All debts exclusive of mortgages) \$ _____

NET WORTH \$ _____

Monthly salary and other sources of income _____

Monthly expenses including mortgages _____

Credit Card Debt _____

Legal Advisor _____ Telephone _____

Financial Advisor _____ Telephone _____

Bank Reference _____ Telephone _____

If accepted by Grower Direct Fresh Cut Flowers Inc., how will you finance your Grower Direct Store? _____

OTHER PRINCIPALS AND MANAGEMENT

My percent ownership of the store will be ____%. If less than 100% please have other partners complete another copy of this form.

OTHER BUSINESS EXPERIENCE

Have you ever failed in business or compromised with creditors? (circle one) **Yes** **No**

If yes, when and under what circumstances (including any remaining liabilities)?





Are any lawsuits pending against you? (please circle one) **Yes No**
If yes, please give particulars _____

Have you ever been convicted of a crime (except traffic misdemeanours)? **Yes No**

If yes, please give particulars _____

Have you ever been denied approval for a merchant account for Visa, MasterCard, American Express, or other major credit card companies? (please circle one) **Yes No**

If yes, reason _____

EDUCATIONAL BACKGROUND

High School _____ Year of Graduation _____
College/University _____ Degree _____ Year _____
Other Training _____

BUSINESS REFERENCES

- 1) Name _____ Title _____
Company _____ City _____
Telephone _____
- 2) Name _____ Title _____
Company _____ City _____
Telephone _____

Memberships (civic, business or professional) _____

I submit the foregoing with the knowledge that information herein will be relied upon by Grower Direct Fresh Cut Flowers Inc. in their analysis of my financial statements for the purchase and operation of a Grower Direct Fresh Cut Flowers Inc. franchise. The completion of this application in no way constitutes an agreement on my part to purchase a Grower Direct Franchise or on the part of Grower Direct Inc. to sell a franchise to any party. I hereby give my permission for Grower Direct to perform any inquiries that they feel are required to obtain credit information pertaining to all parties shown in this report.

Signature _____ Date _____

THIS IS NOT A CONTRACT

