

Franchise Qualification Questionnaire

Grease Monkey Franchising, LLC
Monkey Shine Franchising, LLC
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Preventive Maintenance Pros



Car Wash

CONFIDENTIAL

PLEASE PRINT OR TYPE

Personal Information – Confidential

Name	Date of Birth	
Residence Address		
City	State	Zip Code
Home Phone ()	Business Phone ()	
E-Mail Address		
Education	Social Security Number	
Marital Status	Spouse's Name	Spouse's Social Security Number
List membership or affiliations in clubs and/or organizations:		

Business Experience

Present Employer	Phone ()
Present Employer's Address	
Present Title or Position	How Long?
Previous Title or Position	How Long?
Describe any experience in business or franchise ownership:	

Spouse's Employment

Background Information

I became interested in franchising because:

I am considering a automotive preventive maintenance franchise because:

I first learned of Grease Monkey / Monkey Shine from:

I am interested in developing: Grease Monkey Monkey Shine

If selected, my involvement would be: Full-Time Owner Operator Part-Time Owner Operator
 Absentee Owner (with other business interests)
(investment only)

My preference for location (city/state) of service center is:

1st Choice: Why?

2nd Choice: Why?

I would consider other locations: Yes No

I have a site location or business which may be adaptable to a Grease Monkey / Monkey Shine facility: Yes No

If "YES", please describe:

I understand that any associates who join me in the financing or operation of this venture must also complete a Franchise Qualification Questionnaire. Please send forms to:

Name	Phone ()	E-Mail
Address	City	Zip
	State	

Name	Phone ()	E-Mail
Address		
Address	City State	Zip
Total liquid capital readily available for investment: \$ Source:		
Do you have a source of financing for such an investment: <input type="checkbox"/> Yes <input type="checkbox"/> No		
Where?		
Have you ever been convicted of a felony in a court of federal or state jurisdiction: <input type="checkbox"/> Yes <input type="checkbox"/> No		
If "YES", explain:		
Have you declared bankruptcy in the past seven years: <input type="checkbox"/> Yes <input type="checkbox"/> No		
If "YES", explain:		
Any additional pertinent financial information:		
Briefly list any significant health problems:		

ASSETS		
	♦	
Cash on hand in banks		\$
Listed securities - see Schedule #1		
Accounts & notes receivable		
Due from relatives & friends		
Subtotal		\$
Real estate owned - see Schedule #3		
Real estate mortgages receivable		
Automobiles & other personal property		
Cash value - life insurance		
Other assets - see Schedule #4		
Unlisted securities		
TOTAL ASSETS		\$

LIABILITIES		
	♦	
Notes payable - see Schedule #2		\$
Accounts and bills due		
Unpaid income tax		
Other unpaid taxes & interest		
Subtotal		\$
Real estate mortgages payable - see Schedule #3		
Chattel mortgages and other liens payable		
Other debts - see Schedule #4		
TOTAL LIABILITIES		\$
NET WORTH		\$
TOTAL LIABILITY AND NET WORTH		\$

SCHEDULE #1 - LISTED SECURITIES*			
Number of Shares	Securities	♦	Current Market Value
			\$

SCHEDULE #2 - NOTES PAYABLE		
	♦	
		\$

TOTAL			\$

TOTAL			\$

*Any margin accounts? _____

SCHEDULE #3 – REAL ESTATE

Description of Property & Improvements	Date of Acquisition	Title in Name of:	Cost	Market Value	Mortgage	
					Amount	Monthly Payments
TOTAL						

SCHEDULE #4 – OTHER ASSETS/OTHER DEBTS

OTHER ASSETS	◆	OTHER DEBTS	◆
	\$		\$
TOTAL	\$	TOTAL	\$

OTHER DEBTS:	Type	Amount
	A.	_____
	B.	_____
	C.	_____
	D.	_____

◆ Please indicate whether assets are owned by husband (H), wife (W), or jointly (J). If assets are held jointly or by your spouse, then both should sign this application on the following page.

PERSONAL FINANCIAL STATEMENT

PRESENT ANNUAL INCOME		CONTINGENT LIABILITIES	
Salary (Self/Spouse)	(\$ _____ / \$ _____)	As Endorser, CoMaker or Guarantor	\$ _____
Bonus & Commissions		On Leases or Contracts	
Dividends		Legal Claims	
Real Estate Income		Provision for Federal Income Taxes	
Other Income - itemize		Other Special Debt	
TOTAL	\$ _____	TOTAL	\$ _____

Banking & Credit References
CHECKING
Name
Street
City & State
Phone Number
Account Number
SAVINGS
Name
Street
City & State
Phone Number
Account Number
BUSINESS
Name
Street
City & State
Phone Number
Account Number

Personal References	List three personal references (close friends or neighbors).			
	NAME	ADDRESS	PHONE	# OF YEARS KNOWN
1.			()	
2.			()	
3.			()	

NOTICE: Investigation may be made as to your character, general reputation, personal characteristics and mode of living.

I hereby certify that all information herein contained is true and correct, to the best of my knowledge and understanding, and that any substantial error in fact may be reason for future recall of a Grease Monkey / Monkey Shine Franchise, if awarded, as well as possible legal action for damage or inconvenience sustained as the result of said error in fact. This application does not obligate either party in any manner. I authorize Grease Monkey Franchising, LLC / Monkey Shine Franchising, LLC to perform whatever creditor or background check it deems necessary in reviewing my application.

Applicant Name (please print)

Spouse Name (please print)

Applicant Signature

Spouse Signature

Date

Date

Franchise Development Plan – Sources of Capital

One of the first steps in the decision to embark upon any business venture is to determine if you have adequate capital resources to develop the business. Capital resources include cash and other liquid assets you currently have available, your current available borrowing power, and any capital to be provided by partners or shareholders. To develop a Grease Monkey / Monkey Shine franchise you will need, at a minimum, the capital for the franchise fee, equipment, inventory, working capital and other items listed in our brochure. In addition, most franchise owners lease the building/property and your financial strength will have a bearing on your ability to enter into this type of arrangement.

We will help you analyze your financial condition to determine if you have the capital resources necessary to develop a franchise and obtain a lease.

To help us with this process, we ask that you provide us with a brief outline of your plan for raising capital. We will discuss the plan with you, ask and answer questions, and together we will attempt to come to a conclusion concerning your financial suitability for purchasing a Grease Monkey / Monkey Shine franchise.

The following worksheet may be helpful in developing your plan. It is not necessary that you use this worksheet, if you have another format that will provide the same basic information. If you have questions, please call the Franchising Development department.

Please make sure that you include in your plan only capital resources that you are willing to commit to the business.

SOURCE	AMOUNT
Cash, C.D.'s, Money Market Funds	\$ _____
Listed Stocks and/or Bonds	\$ _____
Unlisted Stocks and/or Bonds	\$ _____
Loans from Relatives or Friends	\$ _____
Credit Union Loan	\$ _____
Personal Bank Loan	\$ _____
Home Equity Loan	\$ _____
SBA Loan	\$ _____
Sale of Shares or Partnership Interests in the Business	\$ _____
Lump Sum Severance Pay (after withholding taxes)	\$ _____
Cash Surrender Value of Life Insurance Policies (not the benefit)	\$ _____
Retirement Accounts to be Cashed in	\$ _____
Sale of Personal Residence	\$ _____
Sale of Other Real Estate	\$ _____
Other (describe below)	\$ _____
.....	
TOTAL SOURCES OF CAPITAL	\$ _____

Please attach additional sheets, if necessary, to provide information concerning other potential sources of capital or to provide further information concerning any of the above items.

The above is an accurate representation of the funds available for this investment. Please consider my financial qualification in conjunction with the representations above.

Applicant Signature

Date

Spouse Signature

Date