

franchisee evaluation form

PRIVACY POLICY: ALL INFORMATION PROVIDED IS KEPT CONFIDENTIAL AND WILL NOT BE DISCLOSED EXCEPT FOR PURPOSES OF VERIFICATION

Primary Contact Information

First name

Middle name

Last name

Date of application

Phone number

Email

Current address

City

Country

Applicant's Franchise Plan

Active/passive franchise ownership?

Company name

Date of establishment

Type of business

Products/services

Website

Please explain ownership structure/shareholders of the franchise

Amount of capital available for this business

Territory for which application is made

Would you consider any other area?

Area(s)

+962 6 592 9100

info@shopkama.com

6 Khalif Al Sumayhat St.

5th Circle, Jabal Amman

Amman 11181, Jordan

@kama_local

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The Management Team

Give a complete record of your position, contact information, and responsibilities within the organization.

Full name

Position title and duties

Phone number

Email

Address

Length of service to the company

Applicant's Financials

Current assets available to support the business

Yes

No

Current liabilities/mortgage

Yes

No

In submitting the foregoing application and statement, the undersigned guarantees its accuracy with the intent that it be relied upon in granting a franchise 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 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. The undersigned consents and authorizes Franchisor to conduct a background check which may include investigation credit history. All information derived from the above shall be kept confidential and be used by Franchisor for internal evaluation purposes only. The undersigned certifies that each part of the application and financial statements hereof and the information inserted herein has been carefully read and is true and correct.

Date

Name

Signed and Stamped

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