

FRANCHISE APPLICATION



1222 SOUTH MAIN AVENUE
Scranton, Pennsylvania 18504

Phone: 1 570-344-4660

The completion of this Franchise Application does not constitute any binding agreement between the applicant or Sparkle Carpet Cleaning Inc. Information provided herein will help us determine if you are qualified to become a member of our franchise organization. All disclosed information will be confidential. Please complete the entire application. Leave no empty spaces. If an item is not applicable to you, please enter NA.

PERSONAL INFORMATION:

NAME _____ SPOUSE'S NAME _____
LAST FIRST MIDDLE LAST FIRST MIDDLE

SOCIAL SECURITY # _____ SOCIAL SECURITY # _____

DATE OF BIRTH _____ DATE OF BIRTH _____

ARE YOU A U.S. CITIZEN? _____ ARE YOU A U.S. CITIZEN? _____

PRESENT ADDRESS _____ DO YOU OWN OR RENT _____

CITY AND STATE _____ ZIP _____ COUNTY _____

TELEPHONE (HOME) _____ (BUSINESS) _____ MAY WE CONTACT YOU HERE? _____

MARKET AREA PREFERRED:

COUNTY OR COUNTIES _____

NAME, CITY AND STATE COUNTIES ARE LOCATED _____

EDUCATION:

(Circle highest grade completed)

Elementary & High School 1 2 3 4 5 6 7 8 9 10 11 12 College 1 2 3 4 5 6 MAJOR _____

Name and address of last school attended _____

EMPLOYMENT HISTORY:

Name of present or last employer _____

Address _____ Dates of employment _____

City and State _____ Zip _____ Position held _____

Description of duties _____ Salary _____

Other compensation (Bonus, misc. income) _____ Reason for leaving _____

HAVE YOU EVER BEEN OR ARE YOU NOW SELF EMPLOYED? _____ (IF YES, EXPLAIN BELOW)

PLEASE FILL IN REVERSE SIDE

BANK REFERENCES:

1. _____
NAME ADDRESS PHONE
2. _____
NAME ADDRESS PHONE
-

CONFIDENTIAL INFORMATION:

1. Military Service (STATE BRANCH and Dates of service) _____
Can you furnish an Honorable Discharge? _____
2. Have you even made application for a bond which was refused? _____
If yes, explain _____
3. Have you ever been convicted of a felony offense? _____
If yes, explain _____
4. Have you ever been or are now a party to any law suits? _____
If yes, explain _____
5. Have you ever filed for bankruptcy? Had a real estate loan foreclosed? _____
If yes, explain _____
6. How did you hear about our Company? _____
7. Will you have any partners? If so state names and phone numbers. _____
8. Will you be willing to devote full-time to your business? _____
9. Will your spouse work in business? _____ Full or Part-Time _____
10. If qualified, when would you be ready to invest in your Sparkle Franchise? _____
11. Will you finance this business by cash or loan? _____
12. Amount of cash available for investment _____
TOTAL ASSETS _____ TOTAL LIABILITIES _____ NET WORTH _____

State reasons you are interested in a Sparkle Carpet Cleaning franchise, and why you feel you will be successful.

I CERTIFY THAT THE INFORMATION I HAVE PROVIDED ON THIS APPLICATION IS COMPLETE AND CORRECT. I AUTHORIZE SPARKLE CARPET CLEANING INC. TO OBTAIN VERIFICATION OF ANY OF THE INFORMATION AND I AUTHORIZE THE RELEASE OF SUCH INFORMATION.

Signature of Applicant _____ Date: _____