



## Confidential Franchise Application

COMPLETION OF THIS APPLICATION DOES NOT CREATE AN OBLIGATION ON EITHER PARTY'S BEHALF. ALL INFORMATION YOU PROVIDE IS HELD IN THE STRICTEST CONFIDENCE. THIS APPLICATION IS NOT A CONTRACT.

Personal Profile			
Name:		Date of Birth:	
Current Address:			
City:	State:	Zip:	How Long:
Home Phone:	Cell Phone:		Best Time to Call:
Email Address:		Marital Status:	
Are you legally authorized to work in the United States?			
Have you ever been convicted of a felony?			
Have you ever filed for bankruptcy? (If yes, please explain)			
Please List Residential Addresses Past 3 Years: (If different than above)			

Employment Information	
Current or Last Employer:	How Long:
Address:	Annual Salary:
Position or Duties:	

### Financial Information

Assets		Liabilities	
Cash on Hand or in Banks:		Notes Due to Banks:	
Notes & Accounts Receivable:		Notes Due to Others:	
Assets Readily Convertible to Cash:		Accounts & Bills Payable:	
Real Estate Owned:		Real Estate Mortgages Payable:	
Personal Property:		Unpaid Taxes:	
Automobiles:		Liens & Assessments Payable:	
Other Assets:		Other Liabilities:	
<b>Total Assets:</b>		<b>Total Liabilities:</b>	
<p><b>NOTE:</b> If you have a current Financial Statement, you may attach it to this application and skip this section.</p>		<b>Net Worth:</b>	
		<b>Total Liabilities &amp; Net Worth:</b>	

### Other Income

Please tell us your source of income during the start-up phase of your new business:

Personal References	
Name:	City/State
Name:	City/State
Name:	City/State

### List the Areas You Are Primarily Interested In

1. City:	State:	County or Counties:
2. City:	State:	County or Counties:
3. City:	State:	County or Counties:
Are you interested in developing multiple territories?		
When would you like to open your new business?		

**Would You Like To Add Anything Else?**

Thank you for taking the time to complete our application. Please read the information below and sign and date the application in the space provided.

ALL INFORMATION PROVIDED IS A TRUE AND CORRECT REPRESENTATION OF MY PERSONAL AND FINANCIAL CONDITION. I UNDERSTAND THAT COMPLETION OF THIS APPLICATION DOES NOT CREATE AN OBLIGATION ON EITHER PARTY'S BEHALF. FRANCHISE TERRITORIES ARE OFFERED BY PROSPECTUS ONLY.

Print Name:
*Sign Name:
Date:

\*You may sign electronically by printing your name between forward slashes, i.e. /John Smith/, and return it to us as a PDF or mail it to:

SDGB Franchise, LLC  
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