



CONFIDENTIAL FRANCHISE QUALIFICATION QUESTIONNAIRE

Last Name _____ First Name _____
 Street Address _____ City _____ State _____ Zip _____
 Home Phone _____ Other Phone _____

REFERENCES

Credit References (loans, leases, credit cards)

Name _____	Account Number _____
Address _____	Phone _____
Name _____	Account Number _____
Address _____	Phone _____
Name _____	Account Number _____
Address _____	Phone _____

BANK REFERENCES

Name _____	Account Number _____
Address _____	Phone _____
<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Loan	
Name _____	Account Number _____
Address _____	Phone _____
<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Loan	

PERSONAL FINANCIAL STATEMENT

Assets	Amount
1. Checking Account	_____
2. Savings Accounts, Certificates	_____
3. U.S. Government Securities	_____
4. Listed Securities	_____
5. Unlisted Securities	_____
6. Accounts and Notes Receivable	_____
7. Real Estate Owned (home)	_____
8. Real Estate (other)	_____
9. Real Estate Mortgaged Receivables	_____
10. Automobile	_____
11. Other Personal Property	_____
12. Life Insurance	_____

How much available cash are you willing to put into the franchise? _____

Is any part of the purchase price being obtained from a source other than shown above? Yes No

If yes, please explain: _____

MISCELLANEOUS

Have you ever owned or do you currently own a business?
 Yes No

If yes, please explain: _____

I/We represent and warrant that all of the statements made by me/us in this application are true and correct. I/We understand that if I/we make a false statement, such action will terminate my/our application for consideration. I/We understand that by signing this statement, Country Style Ice Cream at some point through the interview process, will check my/our credit with a credit bureau. I/We agree that this application shall be and will remain your property whether or not this application is approved. This application does not obligate either party in any manner.

Applicant Signature _____ Date _____

Spouse's Signature _____ Date _____

Mail to:
 Kent Kindelsperger
 Country Style Ice Cream
 2140 16th Street
 Moline, IL 61265