



FRANCHISE APPLICATION

The filing of this Franchise Application does not obligate the applicant to purchase or the franchisor to sell a franchise.

Please complete in full and do not use abbreviations. Please Print Clearly or Type.
Once completed, please fax this form along with the Personal Financial Statement to Gandolfo's
Corporate Office at (770) 513-7849.

GENERAL CONTACT INFORMATION

Name _____ Date ____/____/____
Last First Middle

Other names known by _____

Credit Score _____

Spouse's Name _____
Last First Middle

Other names known by _____

Present Address:

Street _____

City _____ State _____

Zip Code _____ Email Address _____

Telephone:

Day (____) ____ - ____ Night (____) ____ - ____

Cell (____) ____ - ____ Fax (____) ____ - ____

When is the best time to contact you? _____

Are you a citizen of the U.S.? Yes _____ No _____

Are you of legal age in your state and/or area of residence? Yes _____ No _____

Have you ever been convicted of a felony? Yes _____ No _____

PERSONAL INFORMATION

(Please List Figures in U.S. Dollars)

Income from present occupation \$ _____ per year.

Other income \$ _____ per year.

If other income, please explain _____

SPECIFIC DATA

(Please List Figures in U.S. Dollars)

Would this business be your sole source of income? Yes _____ No _____

Own home or rent? Rent _____ Own _____ If own, current value \$ _____

Mortgage / Rent Payment \$ _____

Your Total Assets \$ _____ Your Total Liabilities \$ _____

Amount of cash available for investing \$ _____ Net Worth \$ _____

Do you have a financing source? Yes _____ No _____

Amount of financing available \$ _____

If qualified, when ready to franchise? Date ____/____/____

Area Preference _____

Will you be the sole owner of this business? Yes _____ No _____

****Note: All persons, as individuals or members of a corporation, to be included on the Franchise Agreement(s) who are not listed on this form as a spouse must complete and submit a separate Franchise Application form as well as a Personal Financial Statement.**

I understand the granting of a Franchise is at the sole discretion of the Franchisor (Gandolfo’s DeliBoys, LLC).

I understand that the information I receive from the Franchisor, or from any employee, agent, or franchisee of the Franchisor, is highly confidential (“Confidential Information”) and has been developed with a great deal of effort and expense to the Franchisor and is being made available to me solely because of this Franchise Application. I agree that I shall treat and maintain all Confidential Information as confidential, and I shall not, at any time, without the express written consent of the board of directors of the Franchisor, disclose, publish, or divulge any Confidential Information to any person, firm, corporation or entity, or use any Confidential Information,

directly or indirectly, for my own benefit or the benefit of any person, firm, corporation or other entity, other than the Franchisor.

I authorize the procurement of an investigative consumer report and understand that it may contain information about my background, character, general reputation, mode of living, credit worthiness and job performance. I understand that, upon written request within a reasonable period of time, I am entitled to additional information concerning the nature and scope of this investigation. I hereby release a credit bureau or security consultant selected by the franchisor and Gandolfo's DeliBoys, LLC, their officers, agents, employees and servants from any liability arising from preparation of this report or investigation relating thereto.

This authorization for release of information includes, but is not limited to, matters of opinion relating to my character, ability, reputation, and past performance. I authorize all persons, schools, companies, corporations, credit bureaus, and law enforcement agencies to release such information without restriction or qualification to a credit bureau or security consultant selected by the franchisor and Gandolfo's DeliBoys, LLC, and any of their officers, agents, employees and servants. I voluntarily waive all recourse and release them from liability for complying with this authorization. This authorization/release shall apply to this as well as any future request for an investigative consumer report by the above named firm. I authorize that a photocopy or facsimile of this release be considered as valid as the original.

I agree that I will settle any and all previously unasserted claims, disputes or controversies arising out of or relating to my Franchise Application or candidacy for the grant of a Gandolfo's New York Delicatessen franchise from Franchisor, exclusively final and binding arbitration in accordance with the Commercial Arbitration Rules of the American Arbitration Association (the "AAA") at a hearing to be administered by the AAA to be held at Atlanta, Georgia or in such location in the state of Georgia designated by the AAA. Such claims include, but are not limited to, claims under federal, state, and local statutory or common law, such as the Age Discrimination in Employment Act; Title VII of the Civil Rights Act of 1964, as amended, including the amendments of the Civil Rights Act of 1991; the Americans with Disabilities Act; the law of contract and law of tort.

Everything that I have stated in this application is true and I understand that the information provided by me will be relied upon by the Franchisor. I read, understand, and agree to all of the above.

Date ____/____/____
(Required)

Signature _____

Date ____/____/____
(Required)

Spouse's Signature _____

Please fax the Franchise Application and Personal Financial Statement to (770) 513-7849.