



SAKER Executive Resources, Inc.  
299 W. Hillcrest Drive, Suite 200  
Thousand Oaks, CA 91360  
Telephone (866) 859-0085  
Fax (805) 557-0615

### **FRANCHISE APPLICATION**

1. The undersigned (“Applicant”), having received a copy of the SAKER EXECUTIVE RESOURCES, INC. Franchise Corporation (“Company”) Uniform Franchise Offering Circular (“Offering Circular”), hereby applies to purchase:
2. Applicant understands that evaluation of this application and supporting credentials is a subjective process and left to Company’s absolute discretion, and that Company may consider all aspects of Applicant’s character, experience and background (and, if Applicant is an entity, the character, experience and background of Applicant’s officers, directors and owners) that Company deems relevant. As a part of this application, Applicant shall submit documentation to support Applicant’s business experience and personal, financial, and credit history. Company has the right to request additional information and the names of references to support this application. Applicant understands that this application will not be complete until Company receives all requested information. Applicant represents that the information set forth in this application and in all supporting documentation is, or when submitted will be, true and complete.
3. Applicant understands that Company will have 30 days from the date this application is complete to review the application. Applicant understands and agrees that Company has absolute discretion to accept or deny this application or to extend the period for making its decision.
4. If this application is approved, Applicant must, within 30 days of being notified of such approval, as applicable:
  - (i) Sign the SAKER EXECUTIVE RESOURCES, INC. Franchise Agreement(s) and all other agreements that Company requires new franchisees to sign simultaneous therewith, and pay the balance of the Initial Franchise Fee(s); and/or
5. If Applicant fails to sign all documents required by Company within 30 days after being notified of approval, Company may withdraw its acceptance of this application.
6. Applicant understands that it may withdraw this application by written notice given at any time, even after the application is approved, but before applicant signs a binding contract.

*NOTE: This is NOT a contract and creates no obligation on either party.*

7. Applicant understands and agrees that it may not transfer or assign this application voluntarily or by operation of law and that any attempt to make an assignment shall be void and of no legal effect.
8. Applicant understands and agrees that Company may extend any time period in its sole discretion, but may not shorten any time period. No extension will be binding against Company or Applicant unless set forth in writing.
9. Applicant understands and agrees that it has had a copy of the Offering Circular, including all of the exhibits identified in the Offering Circular, in its possession for at least 10 business days before signing this application and paying any consideration to Company.
10. Applicant understands and agrees that it has read the Offering Circular and been given the opportunity to ask questions about its contents and to consult with an attorney or other professional advisor of Applicant's own choosing about SAKER EXECUTIVE RESOURCES, INC. franchise opportunity. Applicant understands and accepts the terms, conditions and obligations of this application. Applicant makes this application based upon an independent investigation of the franchise opportunity and recognizes that the investment involves business risks. Applicant represents that it is not relying upon any promise or guarantee, express or implied, about the potential revenues, profits, sales, costs or success of the SAKER EXECUTIVE RESOURCES, INC. franchise opportunity, and that no promises or representations of any kind have been made to Applicant that are contrary to any statements in the Offering Circular.

***ALL INFORMATION SHALL BE FULLY COMPLETED, INCLUDING ATTACHMENTS IN SECTION 5, FOR APPLICATION TO BE ACCEPTED FOR REVIEW.***

**Note: If Applicant is planning to form or is currently a corporation, partnership or other business entity, each person owning 25% or more of the equity or voting interests of the franchisee entity ("Principal Person") shall provide personal information in Section 1.A. below. For more than one Principal Person, please provide a completed Section 1.A. page for each.**

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Section 1. Information About Applicant:

A. Principal Person:

Full Name: \_\_\_\_\_  
*First Middle Last Date of Birth*

Social Security #: \_\_\_\_\_ Driver's License: \_\_\_\_\_  
*State License Number Exp. Date*

Residence Address: \_\_\_\_\_ How Long: \_\_\_\_\_  
\_\_\_\_\_ [ ] Own [ ] Rent

Residence Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Business Phone: \_\_\_\_\_ [ ] OK to contact you at Business Phone

Email Address: \_\_\_\_\_

Spouse's Name: \_\_\_\_\_  
*First Middle Last Date of Birth*

Spouse's SS#: \_\_\_\_\_ Driver's License: \_\_\_\_\_  
*State License Number*

Previous Address: \_\_\_\_\_ From: \_\_\_\_\_  
\_\_\_\_\_ *Month & Year*  
To: \_\_\_\_\_  
*Month & Year*

Employer: \_\_\_\_\_ [ ] Self-employed (list business name at left)

Title: \_\_\_\_\_ Length of Employment: \_\_\_\_\_

Education: \_\_\_\_\_  
*Name of School or Institution Grade or Degree Attained Year Granted*  
\_\_\_\_\_  
*Name of School or Institution Grade or Degree Attained Year Granted*

- (If married, these questions apply to both you and your spouse)**
- |  | Yes | No  |
|--|-----|-----|
| 1. Are you a U.S. Citizen? If no, provide alien registration #: _____                | [ ] | [ ] |
| 2. Have you ever filed for bankruptcy?   | [ ] | [ ] |
| 3. Have you ever been a principal or guarantor of a firm that declared bankruptcy?   | [ ] | [ ] |
| 4. Are you a party to any claims, lawsuits or outstanding judgments?                 | [ ] | [ ] |
| 5. Are you a cosigner or guarantor of any debt of another party or entity?           | [ ] | [ ] |
| 6. Have you previously been a party to a franchise agreement that was terminated?    | [ ] | [ ] |
| 7. Have you ever been arrested for, charged with or convicted of a criminal offense? | [ ] | [ ] |

**Please attach written explanation for any of Questions 2-7 that were answered "Yes"**

*NOTE: This is NOT a contract and creates no obligation on either party.*

**B. If a Corporation/Partnership:**

Check one: [ ] Existing [ ] Entity to be formed Type of Entity: \_\_\_\_\_

Full Name of Entity: \_\_\_\_\_

Date of Formation: \_\_\_\_\_ Tax ID Number: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

State of Incorporation or Formation: \_\_\_\_\_

Name of Principal Contact: \_\_\_\_\_ Title: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

Identify all Officers and Directors of the entity:

| <b>Officers:</b> | <b>Names</b> | <b>Title</b> |
|------------------|--------------|--------------|
|                  | _____        | _____        |
|                  | _____        | _____        |
|                  | _____        | _____        |
|                  | _____        | _____        |

| <b>Directors:</b> | <b>Names</b> | <b>Names</b> |
|-------------------|--------------|--------------|
|                   | _____        | _____        |
|                   | _____        | _____        |
|                   | _____        | _____        |

**Identify all owners/partners of the entity (if a partner, whether general or limited):**

| <b>Name:</b> | <b>Nature of Interest:</b> | <b>Percentage Held</b> |
|--------------|----------------------------|------------------------|
| _____        | _____                      | _____                  |
| _____        | _____                      | _____                  |
| _____        | _____                      | _____                  |
| _____        | _____                      | _____                  |
| _____        | _____                      | _____                  |

*NOTE: This is NOT a contract and creates no obligation on either party.*





**Section 3. Franchise Interests:**

**A. Describe the specific industry / geographic area in which you are interested for a SAKER EXECUTIVE RESOURCES, INC. franchise:**

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**B. Describe your knowledge of and reason for choosing this industry / geographic area (i.e., residence or other existing business interests in the area):**

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**C. Would you currently consider any other industries / geographic areas? \_\_\_\_\_ If so, list:**

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**D. Describe your reasons for choosing a SAKER EXECUTIVE RESOURCES, INC. franchise:**

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**Section 4. References:**

**Personal References:**

| <b>Name</b>         | <b>Address</b> | <b>Phone</b> |
|---------------------|----------------|--------------|
| _____               | _____          | _____        |
| Relationship: _____ | _____          |              |
|                     | _____          |              |
| _____               | _____          | _____        |
| Relationship: _____ | _____          |              |
|                     | _____          |              |
| _____               | _____          | _____        |
| Relationship: _____ | _____          |              |
|                     | _____          |              |

**Trade/Business References:**

| <b>Name</b>         | <b>Address</b> | <b>Phone</b> |
|---------------------|----------------|--------------|
| _____               | _____          | _____        |
| Relationship: _____ | _____          |              |
|                     | _____          |              |
| _____               | _____          | _____        |
| Relationship: _____ | _____          |              |
|                     | _____          |              |
| _____               | _____          | _____        |
| Relationship: _____ | _____          |              |
|                     | _____          |              |

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**Credit References:**

| <b>Name</b>          | <b>Address</b> | <b>Phone</b> |
|----------------------|----------------|--------------|
| _____                | _____          | _____        |
| Creditor Type: _____ | _____          |              |
| Acct. #: _____       | _____          |              |
| _____                | _____          | _____        |
| Creditor Type: _____ | _____          |              |
| Acct. #: _____       | _____          |              |
| _____                | _____          | _____        |
| Creditor Type: _____ | _____          |              |
| Acct. #: _____       | _____          |              |

**Banking References:**

| <b>Name</b>       | <b>Address</b> | <b>Phone</b> |
|-------------------|----------------|--------------|
| _____             | _____          | _____        |
| Acct. Type: _____ | _____          |              |
| Acct. #: _____    | _____          |              |
| _____             | _____          | _____        |
| Acct. Type: _____ | _____          |              |
| Acct. #: _____    | _____          |              |
| _____             | _____          | _____        |
| Acct. Type: _____ | _____          |              |
| Acct. #: _____    | _____          |              |

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**Section 5. Attachments:**

**Please attach the following items to this application:**

- [ ] Personal financial statement (if individual applicant or any partner with 25% or greater interest)
- [ ] Financial statement of entity (if corporate/partnership applicant)
- [ ] Documentation of financial resources (verification of funds)
- [ ] Personal resume for each key applicant

**Certification and Authorization:**

I hereby certify that the information contained in this Application and in the attachments described in Section 5 is true, correct and complete as of this date. I authorize SAKER Executive Resources, Inc. and/or its related entities to make all inquiries necessary to verify the accuracy of the statements made in this Application, to contact all persons listed by me as references and to determine my creditworthiness. I understand that SAKER Executive Resources, Inc. and/or its related entities will be relying on the information provided in this Application in connection with the potential grant of a franchise. I agree to the terms and conditions of this Franchise Application Agreement. I also understand that this Application is not to be construed as an offer of a franchise or as a commitment or binding agreement on either party.

***TO BE EXECUTED BY ALL PARTIES PROVIDING INFORMATION HEREIN:***

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
Print Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
Print Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
Print Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
Print Name: \_\_\_\_\_

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