



## FRANCHISE PRELIMINARY APPLICATION FORM

Thank you for your interest in Ant Ventures brands. To properly evaluate your application, complete this preliminary application and email it to [franchise@antventures.com](mailto:franchise@antventures.com)

Attach any additional information such as resume or letters of recommendation that you wish us to consider when evaluating your application. All information will be treated as confidential and does not obligate either party. Thank you for taking time to complete and return your application.

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### Personal Information

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|                   |                                   |                                     |
|-------------------|-----------------------------------|-------------------------------------|
| First Name        | <input type="text"/>              |                                     |
| Last Name         | <input type="text"/>              |                                     |
| Gender            | <input type="text" value="Male"/> | <input type="text" value="Female"/> |
| Email             | <input type="text"/>              |                                     |
| Present Address   | <input type="text"/>              |                                     |
|                   | <input type="text"/>              |                                     |
|                   | <input type="text"/>              |                                     |
|                   | <input type="text"/>              |                                     |
|                   | <input type="text"/>              |                                     |
| Home Phone        | <input type="text"/>              | <input type="text"/>                |
| Work Phone        | <input type="text"/>              | <input type="text"/>                |
| Mobile Phone      | <input type="text"/>              | <input type="text"/>                |
| Date of Birth     | <input type="text"/>              |                                     |
| Best Time To Call | <input type="text"/>              |                                     |

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## Business Experience

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Present Occupation

Position

Date Employed

Company

Type of Business

Address

Number of Employees

Responsibilities

Achievements

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## Previous Business Experience (most recent first)

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**1.** Position

Date employed

Company

Type of Business

Address

Reason Left

Responsibilities

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## Previous Business Experience continued

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### 2. Position

Date employed

Company

Type of Business

Address

Reason Left

Responsibilities

Have You Ever Been Self Employed?

☐ Yes☐ No

If So Explain?

Explain any participation on your part as franchisee or licensee in any other business activity

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## Assets & Liabilities

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Cash on Hand &amp; in Banks (\$)

Loans (\$)

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## Annual Sources of Income

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Salary (\$)

Investments (\$)

Real Estate Income (\$)

Others (\$)

Description

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## Specific Data

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When would you be ready to invest in your franchise if you were approved?

What skills/experience will help you be successful in this business?

Why do you think this franchise will enable you to reach your personal goals?

Who will be responsible for the daily operation of your store ?

Amount of cash available for investment?

Have you been approved for financing ?

Amount approved (\$)

Would this business be your sole income insource?

Do you have any contingent liabilities for guarantees, endorsements, leases?

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## Area/Location Preferences

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Is this a ready to own location?

if so, precise city, province/state

Is this a new build out?

if so, precise city, province/state

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## General Information

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If selected, what would be your involvement? (select one)

Full-time (active owner/operator)

Part-time (with other business interests)

Absentee owner (investment only)

Landlord (owner of land/building)

Where did you learn about Ant Ventures Brands?

Have you visited Ant Ventures operations ?  
if yes, where?

Yes

No

Would you explain why you became interested in Ant Ventures brands?

Have you or anyone in your family ever been affiliated with  
or employed by Ant Ventures? If so, precise

Yes

No

Are you related to any officer, director or employee of Ant Ventures?  
If so, precise

Yes

No

Do you have a business relationship and/or supply goods and/or services  
to Ant Ventures? If so, precise

Yes

No

Will any shareholder or any person join you in forming a corporation to  
operate Ant Ventures franchise, or share in the profit or loss involved in  
the operation of Ant Ventures franchise? If so, explain

Yes

No

Please list the names and addresses of professional advisors and attach references from each

Attorney

Accountant

Banker

Personal 1

Personal 2

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### Please List The Three Main Questions You Have About This Business Opportunity

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Question 1

Question 2

Question 3

#### Privacy Policy:

Ant Ventures is a multi-concept franchisor. The information you provide as part of your application may be shared with and between our affiliate brands. In addition, we may share your information with companies affiliated with us, vendors and partners as necessary for those companies, vendors and partners to perform business functions, such as fulfilling orders, assisting with promotions, providing marketing or advertising services, providing technical services for our website, etc. Except as described in this privacy policy, Ant Ventures does not sell, transfer, or disclose personal information to third parties outside Ant Ventures brand portfolio.

Except as stated in this privacy policy, all correspondence from you with Ant Ventures, its parents or affiliates, is considered non-confidential except to the extent that such correspondence is subject to a separate confidentiality or non-disclosure agreement. If you have any questions about this privacy policy, please feel free to contact us.

I certify that the information I have provided to Ant Ventures is true and correct. I authorize Ant Ventures to verify the information I have provided on this and any attached forms including, but not limited to, acquiring a credit verification report from a credit agency, acquiring a background check from a registered state agency, and to contact my named references and other sources for information about me. I hold Ant Ventures, its affiliates, agents and employees harmless for any damages or liability arising either from the receipt or use of any information obtained through these sources I have provided.

Electronic Signature

Date