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## ***Spouting-on-the-Spot*** **Franchisee Applicant Questionnaire**

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**PLEASE COMPLETE THIS QUESTIONNAIRE NEATLY IN YOUR OWN HANDWRITING**  
*You may also include a current copy of your Curriculum Vitae, but not in place of  
this booklet*

This confidential information will be used to help us assess your suitability as a **Spouting-on-the-Spot** Franchisee. This information will not be used or disclosed for any other purpose without your prior approval and may at your discretion be destroyed or returned to you if your application is unsuccessful. This application does not obligate either party in any way.

All Spouting-on-the-Spot Franchisees are selected on the basis of experience, character, integrity, financial stability and general suitability

## Personal Details

<b>Date:</b>		
<b>Name:</b>	(Title) (First Names) (Surname)	
<b>Physical Address:</b> (of company if more relevant)	_____ _____ _____	
<b>PO Box No:</b>		
<b>Telephone Nos.</b>	<b>(Home)</b>	<b>(Business)</b>
	<b>(Mobile)</b>	<b>(e-mail)</b>
<b>No. of Years at home address</b>		
<b>Are you legally authorised to work or purchase a business in this country?</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No (If 'No' do not complete rest of questionnaire)	
<b>Current Occupation of Applicant</b> (please tick and complete one):	<input type="checkbox"/> <b>Owner of Company/Self Employed -</b> Type of business: _____ Annual turnover: \$ _____ Number of staff employed: _____ Current income per annum: \$ _____	<input type="checkbox"/> <b>Employed by Company -</b> Company name: _____ Type: _____ Position: _____ Current income per annum: \$ _____
<b>If you have a partner, what involvement, if any, do you anticipate your partner will have in the business?</b>  (If your partner will be involved in the business, please have them complete their own Questionnaire)	_____ _____ _____ _____ _____ _____ _____	
<b>Number of days and hours you work weekly:</b>	Days p/w _____	Hours p/w _____
<b>Hobbies/Memberships</b> (Interests, Clubs, Businesses, Professional):	_____ _____ _____	
<b>Comments/additional information you may like to offer relating to the Personal Details section</b>	_____ _____ _____ _____	

# Education & Qualification Details

<b>Secondary/High Schools attended:</b>	<b>Name:</b>	
<b>Highest Qualification:</b>		<b>Year Obtained 19__</b>
<b>Tertiary Education – Institutions (University, Technical Institute etc attended:</b>	<b>Name:</b>	
<b>Highest Qualification:</b>		<b>Year Obtained 19__</b>
<b>List any other educational experiences which you feel may be relevant to determining your suitability as a Franchisee:</b>	<hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/>	

# Business/Work Experience

Please list your business experience including self employment (starting with the most recent)

<b>Period:</b>	19____ to 20____
<b>Position:</b>	
<b>Company Name:</b>	
<b>Type of Business:</b>	
<b>Responsibilities:</b>	<hr/> <hr/> <hr/> <hr/>
<b>Period:</b>	19____ to 19____
<b>Position:</b>	
<b>Company Name:</b>	
<b>Type of Business:</b>	
<b>Responsibilities:</b>	<hr/> <hr/> <hr/> <hr/>
<b>Period:</b>	19____ to 19____
<b>Position:</b>	
<b>Company Name:</b>	
<b>Type of Business:</b>	
<b>Responsibilities:</b>	<hr/> <hr/> <hr/> <hr/> <hr/>

<p><b>What relevant trade or practical experience have you had?</b></p>	<hr/> <hr/> <hr/>
<p><b>What relevant sales or marketing experience have you had?</b></p>	<hr/> <hr/> <hr/> <hr/> <hr/> <hr/>
<p><b>What customer service experience have you had?</b></p>	<hr/> <hr/> <hr/> <hr/> <hr/>
<p><b>What small business management experience have you had?</b></p>	<hr/> <hr/> <hr/> <hr/> <hr/>
<p><b>Are you comfortable working at heights?</b></p>	<hr/>
<p><b>Why are you seeking to become a <i>Spouting-on-the-Spot</i> Franchisee?</b></p>	<hr/> <hr/> <hr/> <hr/> <hr/>

<p>When could you commence operating your <i>Spouting-on-the-Spot</i> franchise?</p>	<hr/> <hr/> <hr/>
<p>Please list your preferred franchise locations.</p>	<p>1</p> <hr/>
	<p>2</p> <hr/>
	<p>3</p> <hr/>

## Experience Profile

It is important that you answer the following questions honestly. Extensive experience in all areas is not necessarily sought as **Spouting-on-the-Spot** will be providing appropriate training. The following aspects will be discussed in more depth with selected applicants at an interview.

Please assess your experience in the following areas by ticking the appropriate boxes:

	None	Some Exposure	Moderate	Extensive
<b>Business Development</b>				
Customer liaison / growth of a customer base	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
General sales	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Marketing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Building / trades / manual work experience	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Administration	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Self-employment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>General Experience</b>				
Managing budgets and cashflow	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Basic bookkeeping or accounting	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Preparing business/marketing plans	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Managing staff	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Computer literacy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

# Statement of Financial Position

<b>Assets:</b>	
Cash on hand, unencumbered:	\$ _____
Life Insurance, Cash Surrender Value (do not deduct loans):	\$ _____
Other Stocks and Bonds:	\$ _____
Real Estate:	\$ _____
	\$ _____
Automobiles (realisable net value):	\$ _____
Other Assets/Investments (please specify):	\$ _____
	\$ _____
	\$ _____
<b>Total Assets:</b>	\$ _____
<b>Liabilities:</b>	
Accounts payable:	\$ _____
Interest payable:	\$ _____
Credit Cards:	\$ _____
Taxes and assessments payable:	\$ _____
Mortgages payable on real estate:	\$ _____
	\$ _____
	\$ _____
Loans against Life Insurance:	\$ _____
Others (please specify):	\$ _____
	\$ _____
	\$ _____
<b>Total Liabilities:</b>	\$ _____
<b>Net Worth (total assets minus total liabilities):</b>	\$ <u>          </u>

<p><b>What amount of capital have you available to commit to this franchise?</b></p>	<p>\$ _____</p>
<p><b>If the required amount is not available, how would the investment be obtained?</b></p>	<p>(If needed, note the items in the attached Statement of Financial Position which you plan to convert to cash and use in the purchase and initial year's trading of your <i>Spouting-on-the-Spot</i> Franchise):</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>
<p><b>What net monthly income do you need to draw during the first twelve months trading?</b></p>	<p>(Per month) \$ _____</p>
<p><b>Bank details</b></p>	<p><b>Name/Branch</b></p> <p>_____</p> <p><b>Address</b></p> <p>_____</p> <p>_____</p> <p>_____</p> <p><b>Telephone:</b></p> <p>_____</p>
<p><b>How long have you banked there?</b></p>	<p>_____</p>



# General

<p>Are there any factors which may inhibit your performance as a Franchisee? (eg. Health problems).</p>	<p><input type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>If 'Yes' please give details:</p> <hr/> <hr/> <hr/> <hr/>
<p>Are any legal proceedings pending against you?</p>	<p><input type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>If 'Yes' please give details:</p> <hr/> <hr/> <hr/> <hr/>
<p>Have you ever been charged and/or convicted of anything other than a minor traffic infringement?</p>	<p><input type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>If 'Yes' please give details:</p> <hr/> <hr/> <hr/> <hr/>
<p>Is there any reason that you know of that would preclude you or your partner(s) from purchasing a <i>Spouting-on-the-Spot</i> Franchise (eg. Restraint of Trade)</p>	<p><input type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>If 'Yes' please give details:</p> <hr/> <hr/> <hr/> <hr/>
<p>Have you ever failed in business, compromised creditors or been declared bankrupt?</p>	<p><input type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>If 'Yes', where, when, the circumstances and any remaining liabilities:</p> <hr/> <hr/> <hr/> <hr/>

<p>Have you ever been investigated for bad credit activities?</p>	<p><input type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>If 'Yes' please give details:</p> <p>_____</p> <p>_____</p> <p>_____</p>
<p>Have you ever received any complaints about you or your work</p>	<p><input type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>If 'Yes' please give details:</p> <p>_____</p> <p>_____</p> <p>_____</p>

## References

<p>Solicitor:</p>	<p>Company:</p>
	<p>Address:</p>
	<p>Telephone No:</p>
<p>Accountant:</p>	<p>Company:</p>
	<p>Address:</p>
	<p>Telephone No:</p>
<p>Trade Supplier 1</p>	<p>Company &amp; Contact Person:</p>
	<p>Address:</p>
	<p>Telephone No:</p>
<p>Trade Supplier 2</p>	<p>Name:</p>
	<p>Address:</p>
	<p>Telephone No:</p>
<p>Personal 1</p>	<p>Name:</p>
	<p>Address:</p>
	<p>Telephone No:</p>
<p>Personal 2</p>	<p>Name:</p>
	<p>Address:</p>
	<p>Telephone No:</p>

## Please Tick if Appropriate:

- I am potentially interested in becoming a *Spouting-on-the-Spot* Franchisee and believe that I have the qualities necessary to operate the business.

Please list any questions you may have. \_\_\_\_\_

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## Certification for Application - Please Read and Sign

I understand that in signing this form I am not legally obliged to uplift any franchise and that all the information supplied by me is confidential for the purpose of assessing my desirability and qualifications as an Applicant.

I give Authority for you to obtain any such further information from my Accountant, Solicitors and others pertinent to this Statement. I also give **Spouting-on-the-Spot** Franchising Limited approval to run a credit check on me personally or any company in which I have or have had a financial interest or directorship.

The information contained in this report is not to be provided to any other person or organisation. If I do not become a **Spouting-on-the-Spot** Franchisee this information is to be destroyed or returned to me at my request.

Submitted this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_\_

I state the above details to be true and accurate:

\_\_\_\_\_  
(Signature of Applicant)

# CONFIDENTIALITY COVENANT

**To: Rainaway Systems Limited; 'the Company', and its professional advisors**

In consideration of the Company and its professional advisors disclosing to the undersigned (the Applicant) certain confidential information, systems, techniques and procedures that are generally not known to the public pertaining to the promotion, marketing, operation and management of a **Spouting-on-the-Spot** business and the franchise systems of the company including but not limited to the information contained in the Franchise Overview, Disclosure Document, Franchise Agreement and the Franchise Manuals (all such information and documentation collectively referred to as the "Proprietary Information") for the purpose of enabling the Applicant to determine whether they wish to become a Franchisee under the Company's franchise programme, the Applicant **agrees** to the Company and its professional advisors to take any and all steps necessary to preserve and protect the Proprietary Information from publication, communication or any other unauthorised disclosure.

The Applicant further **agrees** that the Applicant shall not disclose any of the Proprietary Information, use it in any way, or assist any other person or entity including any employee or officer of the Applicant to use it either during the term of negotiations or at any time thereafter. In the event of any employee reasonably requiring to have access to the Proprietary Information then the Applicant shall first obtain the approval of the Company and if such approval is forthcoming shall arrange for such employees to sign a written and binding confidentiality undertaking comparable in scope and duration to this covenant and undertaking.

At any time upon the request of the Company or its professional advisors the Applicant shall return to the Company the Proprietary Information disclosed to it and shall not keep any copies.

The Applicant will not obtain any proprietary rights of any kind to the proprietary information disclosed to them.

The Applicant acknowledges that the Proprietary Information is of commercial value to the Company and undertakes not to use any of the Proprietary Information in any way that would be harmful to the best interests of the Company.

The Applicant acknowledges that upon violation of any of these covenants, it will be difficult to determine the resulting damage to the Company or its professional advisors and, in addition to any other remedies it may have, the Company or its professional advisors shall be entitled to make application in a Court of competent jurisdiction for temporary or permanent injunctive relief without the necessity of proving actual damages.

**Signed by the Applicant this ..... day of ..... 2010**

**Applicant Signature:**

**Signed in the presence of:**

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