

Einstein Bros Bagels Franchise Application

Please complete and return this application to continue your investigation into an Einstein Brothers Bagel Franchise. The filing of this application does not obligate the applicant to purchase or the franchisor (Bagel Brands) to sell a franchise. Except to the extent reasonably necessary to process this application, all information will be kept confidential.

Personal Information

	I	First Name			M.I.	
	Social Sec	curity No.				
e No.		S	State		Citizenshi	р
Jame		I	First N	ame		M.I.
	Social Se	ecurity No.				
e No.		S	tate		Citizensh	ip
5						
		Zip Co	ode		Yrs at thi	s address
Home	:	Busine	ess:		Mobile:	
	e No. Jame e No. S	Social Se e No. Jame Social Se e No.	Vame I Social Security No. e No. S S Zip Co	Social Security No. e No. Social Security No. First N Social Security No. e No. State S Zip Code	Social Security No. e No. Name Social Security No. e No. Social Security No. State State St	Social Security No. e No. State Citizenshij Name First Name Social Security No. Social Security No. e No. State Citizenshij Social Security No. State Citizenshij Zip Code Yrs at thi

Operating/Financial Partners

List Names and addresses of any partners/co-owners/investors

Note: a separate application and financial statement is required for each partner/investor/co-owner to be listed on the franchise agreement.

Last Name	First Name		
Address		Percent of	
		Equity	
Last Name	First Name		
Address		Percent of	
		Equity	
Last Name	First Name		
Address		Percent of	
		Equity	

Do you have other	passive	investors?		Yes		No
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If yes, to what extent?	

Business	Experience

I am self Employed

Name of Bu	siness		Location	
If applicable	, describe yo	ur business and your duties.		L
		ur previous restaurant or business owners os Bagels Bakery:	ship experience w	hich would be applicable to
operating an		s Dageis Dakery.		
🗌 I am emp	oloyed by:			
Employer A	ddress			
# Of years w	ith Employe	r l		
City/ State		Zip Code		Phone
Job Title			Number of em	ployees supervised
Describe Du	ities			
Previous En	nployer			
Employer A	ddress			
# Of years w	ith Employe	r		
City/ State		Zip Code		Phone
Job Title			Number of em	ployees supervised
Describe Du	ities			

Education

School Attended	Years Attended	Grade/ Degree Attained
	ny offense other than m	inor traffic violations? Yes No
If yes, please explain		
Have you ever declared personal ba	ankruptcy? 🗌 Yes 🗌	No
If yes, please explain		
L		
Have you ever declared bankruptcy	on a business or franc	hise you owned? 🗌 Yes 🗌 No
If yes, please explain		

Have you ever been, or are you now, a party to any lawsuit? 🗌 Yes 🗌 No	
If yes, please explain	

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Geographic Preference

What general area of the United States would you be interested in developing, owning, and operating an Einstein's?

	City	State
First Choice:		
Second Choice:		
Third Choice:		
How many Einstein Bros. Bag	els bakeries would you like to develop	?

Personal Financial Statement

(Note: Additional financial information may be required upon request.)

	rt Term Notes Pa k lines of Credit	yable	\$ \$ \$	Liabilitie	<u>S</u>
		iyable	\$ \$		
			\$		
			\$		
			\$		
·····			\$		
			\$		
	S	ub-Total	\$		
Loai	ns Payable		\$		
Real	l Estate Mortgag	es	\$		
· · · · · · · · · · · · · · · · · · ·	er Debts & Oblig	······	\$		
······································	er Liabilities (des	······	\$		
			\$		
			\$		
			\$		
			\$		
			\$		
			\$		
			\$		
			\$		
Sub	-Total		\$		
ТОТ	CAL LIABILITE	S	\$		
NET	NET WORTH		\$		
(Ass	sets minus Liabil	ities)			
	TO1 NE1	NET WORTH	TOTAL LIABILITES	\$	SSSSSSub-TotalSub-TotalSTOTAL LIABILITESSNET WORTH

Sources of	Sources of Annual Income		Annual Expenses
I	<u>Income</u>		<u>Expenses</u>
Salary	\$	Mortgage Payments	\$
Bonus and Commissions	\$	Rent	\$
Dividends	\$	Automobile Payments or Lease	\$
Real Estate Income	\$	Insurance Premiums	\$
Other Income (Itemize)	\$	Taxes	\$
	\$	Other expenses	\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$
Sub-Total	\$	Sub-Total	\$

<u>Real Estate Schedule</u> (Please fill in detail for above entries):

<u>Type</u>	Location	Current Value	Mortgage Amount	<u>Mortgage</u> Payment	Real Estate
		\$	\$	\$	\$
		\$	\$	\$	\$
		\$	\$	\$	\$
		\$	\$	\$	\$
		\$	\$	\$	\$
		\$	\$	\$	\$
		\$	\$	\$	\$
		\$	\$	\$	\$
		\$	\$	\$	\$
		\$	\$	\$	\$

Business Financing Plan

Einstein Bros Bagels will seek franchise partners who are adequately capitalized. We will also require our franchise partners to invest a reasonable level of equity in their franchised business.

Equity: Please list the liquid assets that could be allocated from the above sources to invest in your Einstein Bros						
Bagels franchise business.						
Describe	5	\$				
Describe	9	\$				
Describe	9	\$				
Describe	9	\$				
Describe	9	\$				

Debt: Please list other sources of capital (banks, etc.) that will be available to invest in your Einstein Bros Bagels franchise business

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Describe	\$
Describe	\$

Please indicate any other details that would be pertinent to your situation. (Use a separate sheet if necessary.)

Terms and Conditions

I understand that the granting of a franchise is at the sole and absolute discretion of Bagel Brands ("Franchisor"). I understand that the submittal of this Application is an initial step in the process towards qualification as a franchisee and in no way obligates Franchisor or applicant in any manner. Each owner, partner, member and shareholder associated with the applicant's purchase of the franchise must complete an application.

I understand that this Application does not constitute an offer to sell a franchise, and that this information is being provided to Franchisor solely for the purpose of evaluating my personal, professional, and financial qualifications, and that the information provided by me will be relied upon by the Franchisor as a material factor in considering my application to become a franchisee. I understand that such an offering is commenced only by Franchisor's delivery of a prospectus in compliance with the Federal Trade Commission Rule on Franchising and various state laws regulating the sale of franchised opportunities. Franchisor's acceptance or approval of this Application shall not be considered as a grant of a franchise, we grant franchises only by executing a written franchise agreement.

I understand that the information I may receive from Franchisor relating to a franchise is confidential, has been developed with a great deal of effort and expense, is being made available to me because of this Application, and shall be held in strictest confidence. As such, I will not divulge or use any data, customer or employee names and addresses, techniques, methods, advertising materials, forms, or other information of whatever kind received from the Franchisor without its prior express written consent, which may be withheld in Franchisor's sole and absolute discretion.

I hereby authorize Franchisor to obtain a credit report or any other investigative consumer report and to contact references and other sources, including former employers, in order to obtain personal information about me. I understand that any credit or investigative consumer report may contain information about my background, character, general reputation, mode of living, credit worthiness, ability, and job performance. I understand that, within a reasonable period following written request, I am entitled to additional information concerning the nature and scope of this investigation. I hereby release Franchisor, its affiliates, and their respective officers, agents, employees and servants from any liability arising from the receipt or use of information obtained through these sources and from any investigation relating thereto.

This authorization for release of information includes, but is not limited to, matters of opinion relating to my character, ability, reputation, criminal record, and past performance. I hereby authorize all persons, schools, companies, corporations, past or present employers, credit bureaus, and law enforcement agencies to release such information without restriction or qualification to Franchisor, its affiliates, and any of their officers, agents, employees, and servants. I voluntarily waive all recourse and fully 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. I authorize that a photocopy or facsimile of this release be considered as valid as the original.

By signing below, I hereby certify that all of the information submitted in connection with this Application, including any personal and professional financial statements attached to or provided pursuant to this Application, is true and accurate as of the date of submittal, and I agree to notify Franchisor of any material change in my personal, professional, or financial status while this Application is pending.

Signature					
Signature			Date		

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Signature		Date	