



# FRANCHISE APPLICATION

Motivated Movers Franchising Corp  
 1969 Chandalar Drive, Suite B  
 Pelham, AL 35124

*Returning this application does not obligate you or Motivated Movers Franchising Corp, in any way and does not constitute an agreement for a franchise.*

**Please Print or Type** This Section to Be Completed by Applicant

### Applicant Information

Applicant			Co-Applicant		
Name			Name		
Social Security Number	Home Phone Cell Phone	DOB (mm/dd/yyyy)	Social Security Number	Home Phone Cell Phone	DOB (mm/dd/yyyy)
<input type="checkbox"/> Married <input type="checkbox"/> Unmarried <input type="checkbox"/> Separated	Dependents (not listed by Co-Applicant) # _____ Ages: _____		<input type="checkbox"/> Married <input type="checkbox"/> Unmarried <input type="checkbox"/> Separated	Dependents (not listed by Applicant) # _____ Ages: _____	
Present Address (street, city, state, zip)	<input type="checkbox"/> Own <input type="checkbox"/> Rent _____ Years		Present Address (street, city, state, zip)	<input type="checkbox"/> Own <input type="checkbox"/> Rent _____ Years	
Mailing Address, if different from Present Address			Mailing Address, if different from Present Address		
<b>If residing at present address for less than two years, complete the following:</b>					
Former Address (street, city, state, zip)	<input type="checkbox"/> Own <input type="checkbox"/> Rent _____ Years		Former Address (street, city, state, zip)	<input type="checkbox"/> Own <input type="checkbox"/> Rent _____ Years	
Education – Highest Grade Completed:			Education – Highest Grade Completed:		
College or University Attended:			College or University Attended:		
City, State			City, State		
Degree/Major			Degree/Major		
Email Address			Email Address		
Employment Information					
Applicant			Co-Applicant		
Name & Address of Employer			Name & Address of Employer		
Position/Title			Position/Title		
Dates (From/To)	Business Phone		Dates (From/To)	Business Phone	

<b><i>If employed in current position for less than two years, complete the following:</i></b>					
Name & Address of Employer			Name & Address of Employer		
Dates (From/To)	Position/Title	Business Phone	Dates (From/To)	Position/Title	Business Phone
Name & Address of Employer			Name & Address of Employer		
Dates (From/To)	Position/Title	Business Phone	Dates (From/To)	Position/Title	Business Phone
Name & Address of Employer			Name & Address of Employer		
Dates (From/To)	Position/Title	Business Phone	Dates (From/To)	Position/Title	Business Phone

### Franchise Information

When will you be available to start your franchise?		
Will you work in your franchise <input type="checkbox"/> full or <input type="checkbox"/> part time? If part time, please explain why?		
Please list your preferences for location (city, state):		
1.		
2.		
3.		
Are you willing to relocate? <input type="checkbox"/> Yes <input type="checkbox"/> No		If Yes, date available to relocate?
What level of income do you initially expect to earn from your business?		
Why are you interested in becoming a Motivated Movers Franchisee?		
<i>Personal References (other than employees or relatives):</i>		
Name:	Address:	Phone:
1.		
2.		
3.		

Current Financial Statement as of \_\_\_\_\_ (date)

FINANCIAL STATEMENT			
ASSETS		LIABILITIES	
Cash on Hand	\$	Notes Payable	\$
Savings Accounts	\$	Auto Loans/Leases	\$
Autos ( <i>current market value</i> )	\$	Credit Cards	\$
Home	\$	Other Installment Loans	\$
Other Real Estate	\$	Mortgages on Real Estate	\$
Stocks & Bonds	\$	Other Liabilities	\$
Securities	\$	<b>Total Liabilities =</b>	\$
Other Assets & Personal Property	\$	<b>NET WORTH</b>	
Life Insurance- <i>Cash Value Only</i>	\$	<b>Total Assets – Total Liabilities = \$ _____</b>	
<b>Total Assets =</b>	\$		

What is your current annual income (include all sources): \$ \_\_\_\_\_

Personal capital available to invest: \$ \_\_\_\_\_

Which items would you convert to cash if necessary to meet the initial cash requirements)? \_\_\_\_\_

Market Value \$ \_\_\_\_\_

**Credit History & Financials** (*Please attach an explanation of any question answered "Yes"*)

Have you ever filed bankruptcy?  No  Yes, Type & Date filed: \_\_\_\_\_

Do you have any collection items, child support payments, judgments, unpaid taxes or payment plans (personal or business)?  No  Yes

Are you or your business involved in any pending lawsuits?  No  Yes

Have you ever been convicted, charged or indicted for a felony?  No  Yes

NOTE: As part of our procedures for processing your application, investigate reports may be requested from personal references, financial sources, retail credit bureau, etc. By signing this application, you hereby authorize Motivated Movers Franchising Corp to obtain these reports.

\_\_\_\_\_  
 APPLICANT SIGNATURE

\_\_\_\_\_  
 CO-APPLICANT SIGNATURE

\_\_\_\_\_  
 APPLICANT NAME (PRINT)

\_\_\_\_\_  
 CO-APPLICANT NAME (PRINT)

\_\_\_\_\_  
 DATE SIGNED

\_\_\_\_\_  
 DATE SIGNED

