

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

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	Applicant		Ар	plicant Information	Co-Applicant			
Name	Applicant			Name	Со-Арріїсані			
Social Security Number	Home Phone		DOB	Social Security Number	Home	Phone	DOB	
Goolal Gooding (Vallibo)	Tiome Thoric		(mm/dd/yyyy)	Coolai Cecanty Named	Tiomo	1 110110	(mm/dd/yyyy)	
	Call Dhana				C-II D			
	Cell Phone				Cell Pi	ione		
Married	Dependents	O- A!:		∫ Married	Depen			
Unmarried	(not listed by	Co-Applica	ant)	Unmarried	(not iis	(not listed by Applicant)		
∫ Separated	# Ages:] Separated	#			
Present Address	Own		Years	Present Address	J Owr	1 🗆	Years	
(street, city, state, zip)	Rent			(street, city, state, zip)	Rent		. 54.5	
Mailing Address, if differe	ent from Presen	t Address		Mailing Address, if different from P	resent Addres:	<u> </u>		
If residing at present ad	ldress for less	than two	/ears, complete	the following:				
Former Address	」Own □		Years	Former Address (street, city, state,	• •	1 🗆	Years	
(street, city, state, zip)	Rent				Rent		. 50.5	
Education – Highest Grad	de Completed:			Education – Highest Grade Completed:				
College or University Atte				College or UniversityAttended:				
			City State					
City, State			City, State					
Degree/Major			Degree/Major					
Email Address			Email Address					
Littali Address				Linali Address				
			Emp	loyment Information				
N 0 A 1 1 (5 1	Applicant				Co-Applicant			
Name & Address of Empl	oyer			Name & Address of Employer				
Position/Title				Position/Title				
				FOSITION/TITLE				
Dates (From/To)	Busi	ness Phon	е	Dates (From/To)		Busine	ess Phone	

If employed in current	position for less than	two years, complete			
Name & Address of Employer			Name & Address of Emplo	yer	
Datas (From/To)	Position/Title	Business Phone	Dotos (From/To)	Docition/Title	Duainese Phone
Dates (From/To)	Position/Title	Business Phone	Dates (From/To)	Position/Title	Business Phone
Name & Address of Em	ployer		Name & Address of Emplo	yer	
Dates (From/To)	Position/Title	Business Phone	Dates (From/To)	Position/Title	Business Phone
Name & Address of Em	ployer		Name & Address of Emplo	yer	
Dates (From/To)	Position/Title	Business Phone	Dates (From/To)	Position/Title	Business Phone
		Fran	nchiseInformation		
When will you be availa	ble to start your franchis				
Will you work in your fran	nchise □ full or □ part time	9?			
If part time, please ex	xplain why?				
Please list your preferer	nces for location (city, sta	ate):			
1.					
2.					
3.					
Are you willing to relocate? □Yes □ No			If Yes, date available to re	locate?	
What level of income do	you initially expect to ea	arn from your business	s?		
	in becoming a Motivated				
Personal References (o	other than employees or i	relatives):			
Name:	a.a ap.oyood or i	Address:		Phone:	
1.					
2.					

3.

Current Financial Statement as of	 (date)

FINANCIAL STATEMENT				
ASSETS	8	LIABILITIES		
Cash on Hand	\$	Notes Payable \$		
Savings Accounts	\$	Auto Loans/Leases \$		
Autos (current market value)	\$	Credit Cards \$		
Home	\$	Other Installment Loans \$		
Other Real Estate	\$	Mortgages on Real Estate \$		
Stocks & Bonds	\$	Other Liabilities \$		
Securities	\$	Total Liabilities = \$		
Other Assets & Personal	\$	NET WORTH		
Property		NET WORTH		
Life Insurance-Cash Value Only	\$	Total Appeta Total Linkilities ©		
Total Assets =	\$	Total Assets – Total Liabilities = \$		

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 a	ny question answered "Yes")
Have you ever filed bankruptcy? □ No □ Yes, Type & Date filed:	
Do you have any collection items, child support payments, judgr	ments, unpaid taxes or payment plans (personal or business)? No Yes
Are you or your business involved in any pending lawsuits? □ No	o □ Yes
Have you ever been convicted, charged or indicted for a felony?	? □ No □ Yes
	our application, investigate reports may be requested from personal etc. By signing this application, you hereby authorize Motivated
APPLICANT SIGNATURE	CO-APPLICANT SIGNATURE
APPLICANT NAME (PRINT)	CO-APPLICANT NAME (PRINT)
DATE SIGNED	DATE SIGNED

- 1. I understand that an investigative report may be generated on me that may include information as to my character, general reputation, personal characteristics, or mode of living; work habits, performance or experience, along with reasons for termination of past employment/professional license or credentials; financial/credit history; or criminal/civil/driving record history. I understand that USAintel, Inc. and/or Merchant's Credit Bureau on behalf of Motivated Movers Franchising Corp (MMFC) may be requesting information from public and private sources about any of the information noted earlier in this paragraph in connection with MMFC's consideration of me for a franchise contract, or any time during my contract with MMFC, and give my full consent for this information to be obtained.
- 2. I acknowledge that a telephonic facsimile (FAX) or photographic copy of this release shall be as valid as the original. This release is valid for most federal, state, and county agencies.
- 3. I hereby authorize, without reservation, any financial institution, law enforcement agency, information service bureau, school, employer, or insurance company contacted by USAintel, Inc. and/or Merchant's Credit Bureau to furnish the information described in Section1.

Each Applicant Sho	uld Complete th	e Following:			
Print name:					
	(First)	(Middle)	(Last)	(Maiden)	
Other Names Used: _					
Current Address Since	e: (Mo/Year)				
	Street				
	State/Zip				
-	•	y law enforcement agen idential and will not be u		or positive identification purposes oses.	
Date of Birth: Social Security Number				·	
Driver's License Numb	per and State	Nar	Name as it appears on License		
		ne?NoYes If		y and state of conviction and details	
Signature			Today's Date	-	

FAIR CREDIT REPORTING ACT NOTICE:

In accordance with the Fair Credit Reporting Act (FCRA, Public Law 91-508, Title VI), this information may only be used to verify a statement(s) made by an individual in connection with legitimate business needs. The depth of information available varies from state to state. Statute of updates are available on request. Although every effort has been made to assure accuracy, USAintel.com cannot act as guarantor of information accuracy or completeness. Final verification of an individual's identity and proper use of report contents are the user's responsibility USAintel.com policy requires purchasers of these reports to have signed a Service Agreement. This assures USAintel.com users are familiar with and will abide by their obligations, as stated in the FCRA, to the individuals named in these reports. If information contained in this report is responsible for the suspension of an employee or the application process, have the Candidate/employee contact USAintel.com.

Authorization Release