Franchisee Application Form

Personal Profile

Name: _____________________________________________

Date: ______________________________________________

Preferred Area #1: _________________________________

Preferred Area #2: _________________________________

Preferred Area #3: _________________________________

Number of Proposed Restaurants: ___________________
Application Checklist

Please use this checklist to insure your Application can be processed. All items listed below should be returned to Checkers for processing.

☐ Franchise Application Form & Personal Profile

☐ Background Release Form

☐ Substantiating Financial Information Listed on the ‘Financial Information Submission’ Sheet (Must substantiate Minimum Requirement for Liquid Cash of $250K) *Please supply all financial backup documentation.*

☐ Franchise Disclosure Document (FDD) - Item 23

*FDD must be acknowledged as received before any formal documents can be signed*
PERSONAL PROFILE

CONFIDENTIAL

**This application does not obligate either party in any manner

Please complete the following for each applicant signing the Franchise Agreement**: 

Date Submitted: __________________________ e-mail address: __________________________

Name: __________________________ Spouse: __________________________

Address: __________________________

City: __________________________ State: ________ Zip: __________________________

Home Phone: __________________________ May we contact you here? Yes _____ No _____

Business Phone: __________________________ May we contact you here? Yes _____ No _____

Cell Phone: __________________________ Social Security Number __________________________

Driver’s License Number: __________________________ Date of Birth: __________________________

Are you, or any member of your family, or any proposed partner in this venture, currently or have you ever been employed by Checkers/Rally’s, or related to any franchisee, supplier or vendor or Checkers/Rally’s or any subsidiary or company affiliated with any of the above? Yes _____ No _____

If yes, please list employer, duties and/or name of relative: __________________________

____________________________________________________________________________________________

How did you learn about Checkers/Rally’s? __________________________

____________________________________________________________________________________________

**Business Background** - minimum of 10 years

Company: __________________________ Type of Business: __________________________

Address: __________________________

Position Held: __________________________ Supervisor: __________________________

Dates: From: __________ To: __________ Salary: __________________________

Company: __________________________ Type of Business: __________________________

Address: __________________________

Position Held: __________________________ Supervisor: __________________________

Dates: From: __________ To: __________ Salary: __________________________

Company: __________________________ Type of Business: __________________________

Address: __________________________

Position Held: __________________________ Supervisor: __________________________

Dates: From: __________ To: __________ Salary: __________________________

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Dates: From: __________ To: __________ Salary: __________________________

Company: __________________________ Type of Business: __________________________

Address: __________________________

Position Held: __________________________ Supervisor: __________________________

Dates: From: __________ To: __________ Salary: __________________________

Company: __________________________ Type of Business: __________________________

Address: __________________________

Position Held: __________________________ Supervisor: __________________________

Dates: From: __________ To: __________ Salary: __________________________

Company: __________________________ Type of Business: __________________________

Address: __________________________

Position Held: __________________________ Supervisor: __________________________

Dates: From: __________ To: __________ Salary: __________________________

Company: __________________________ Type of Business: __________________________

Address: __________________________

Position Held: __________________________ Supervisor: __________________________

Dates: From: __________ To: __________ Salary: __________________________
**Questionnaire**

Do you currently own a franchised food operation?: Yes ____ No _____
If Yes, name the franchisor: ________________________________
Location of the food operation: ________________________________

Have you ever owned a franchised food operation?: Yes ____ No _____
If yes, name the franchise and the manner in which you left the system: ________________________________

Please describe if you have, if any, constraints through an arrangement or contract that would interfere in becoming a franchisee of Checkers/Rally's: ________________________________

Have you, or any business entity in which you have owned an interest, been involved in bankruptcy, insolvency proceedings or compromise with creditors? Yes _______ No _______
If yes, please provide complete details: ________________________________

Are you a party, either as a plaintiff or as a defendant, to any lawsuits, litigation or legal actions?: Yes _____ No _____
If yes, please describe: ________________________________

Will you be able to devote full time to this business? Yes _______ No _______
If no, indicate how you will divide your time: ________________________________

Will members of your family be directly involved with the day-to-day operations of this business? Yes _____ No _____
If yes, please identify who, their capacity and previous work experience: ________________________________

**Proposed Partners**

Partners or any associates who will join you in this venture must also complete one of these forms. Partners or equity contributors who will be signing the Franchise Agreements or Development Agreements must also sign a Franchise Disclosure Document - Item 23 Receipt.

<table>
<thead>
<tr>
<th>Last name:</th>
<th>First name:</th>
<th>Percent of Ownership:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Occupation:</td>
<td>Phone:</td>
<td>Will your partner devote full time to this business: Yes ____ No _____</td>
</tr>
<tr>
<td>Last name:</td>
<td>First name:</td>
<td>Percent of Ownership:</td>
</tr>
<tr>
<td>Occupation:</td>
<td>Phone:</td>
<td>Will your partner devote full time to this business: Yes ____ No _____</td>
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<td>Will your partner devote full time to this business: Yes ____ No _____</td>
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<tr>
<td>Occupation:</td>
<td>Phone:</td>
<td>Will your partner devote full time to this business: Yes ____ No _____</td>
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</table>
## Financial Information

### Assets
- Cash on Hand and Unrestricted: ______________
- Stock in your business: ______________
- Public stocks, bonds securities: ______________
- Real estate, your residence: ______________
- Other real estate (M/V): ______________
- Accounts, Notes Receivables (list separate page): ______________
- Personal possessions: ______________
- Other assets: ______________
- Retirement accounts: ______________
- **TOTAL ASSETS** ______________

### Liabilities
- Notes Payable ______________
- Mortgages Payable ______________
- Accounts, Notes & Loans Payable ______________
- Other Liabilities ______________
- **TOTAL LIABILITIES**: ______________
- **TOTAL NET WORTH**: ______________

### Annual Income
- Salary: ______________
- Bonus: ______________
- Commission: ______________
- Other Income: ______________
- Spouse’s Salary ______________
- Interest & Dividends ______________

### General Information

Are you planning on financing with a lending institution?  
Yes ____  No ____

Source of Liquidity:

Are you a co-signor, guarantor or endorser to any obligations?  
Yes ____  No ____

If yes, please provide relationship and amount(s):

List any other commitments or contingent financial liabilities not listed above including leases:

____________________________

____________________________

____________________________

____________________________

**SIGNATURE:** ____________________________  **DATE:** ______________

*Either using a separate schedule or the attached Supplementary Schedules you will need to provide a more detailed breakdown of your assets and liabilities.*
### Supplementary Schedules

#### 1. Banking Activity

<table>
<thead>
<tr>
<th>Bank Name</th>
<th>City/State</th>
<th>Cash Assets</th>
<th>Loan Liabilities</th>
<th>Monthly Payments</th>
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#### 2. Publicly Traded Stocks, Bonds & Securities

<table>
<thead>
<tr>
<th>Number of shares of stock and Face Value of Bonds (List Separately)</th>
<th>Description</th>
<th>Present Market Value</th>
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#### 3. Real Estate

<table>
<thead>
<tr>
<th>Type of Property</th>
<th>Location</th>
<th>Original Cost</th>
<th>Market Value</th>
<th>Mortgages</th>
<th>Liens</th>
<th>Monthly Payments</th>
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#### 4. Accounts, Notes and Loans

(Payables and Receivables - indentify which)

<table>
<thead>
<tr>
<th>Amount</th>
<th>Nature of Transaction</th>
<th>Receivables Due</th>
<th>Payables Due</th>
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#### 5. Other Assets/Liabilities

<table>
<thead>
<tr>
<th>Description</th>
<th>Estimated Cash Value</th>
<th>Amount of Liability</th>
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FRANCHISE APPLICATION RELEASE FORM

In connection with my application, I understand that investigative background inquiries may be made on my consumer credit, including criminal convictions, motor vehicle, and other reports. These reports will include information as to my character, education, work habits, performance and experience. Further, I understand that you may request information from various federal, state, and other agencies which maintain records concerning my past activities relating to my driving, credit, criminal, civil, and other experiences as well as claims involving me in the files of insurance companies.

I authorize, without reservation, any party or agencies contacted to furnish any requested information and release all parties involved from any liability and responsibility for doing so. I hereby consent to Checkers Drive-In Restaurants, Inc. requesting and obtaining any information through Employment Reference Source and/or any of their licensed agents or directly from any source(s) with the ability to furnish such information. This authorization and consent shall be valid in original, fax, or copy form.

Applicant’s Signature: ___________________________ Date: ______________________

PRINT ALL INFORMATION

Name: ___________________________ Social Security Number: ______________________

Sex: ___________________________ Date of Birth: ___________________________ (DOB required for criminal record search)

Driver’s License Number: ___________________________ State: ______________________

ADDRESSES FOR THE PAST SEVEN (7) YEARS:

Current Address:

Street Address: ___________________________

City: ___________________________ State: ___________________________ Zip Code: ___________________________

From: ___________________________ To: ___________________________

Former Address:

Street Address: ___________________________

City: ___________________________ State: ___________________________ Zip Code: ___________________________

From: ___________________________ To: ___________________________

Please use the back of this form to list additional former addresses, if needed.
Today’s Date

To whom it may concern:

I/We are the accountants for Candidate1 and have been for XX years.

The purpose of this memo is to verify that as of this date, Candidate1 owns liquid assets of at least $XX and has a total net worth of at least $XX.

Please call me if you have any questions.

Sincerely,

CPA signature

CPA Name
CHECKERS DRIVE-IN RESTAURANTS, INC.
APPLICATION FOR FRANCHISE

The undersigned (“Applicant”) hereby applies for a franchise for the operation of a Checkers Drive-In Restaurant to be located at the following location: ______________________
_____(the “Preferred Site”).

Concurrently, Applicant shall pay Checkers Drive-In Restaurants, Inc., (“the Company”) an application processing fee of $1,000. The application fee is a fully earned payment and non-refundable. Applicant acknowledges and agrees that the Company has granted no rights whatsoever to the Applicant with respect to the Preferred Site, except as specifically set forth herein.

The Company agrees that for the period during which the application is being reviewed (beginning on the date hereof and continuing through the date Checkers notifies Applicant that the application has been approved or denied), the Company will not enter into an agreement with any other franchisee to develop a Checkers Restaurant on the Preferred Site. Applicant may simultaneously submit a completed site application form for the Preferred Site or do so within thirty (30) days after the franchise application is approved. If a completed site application form is not submitted within said thirty (30) days, the application will be deemed withdrawn by the Applicant. The Company agrees that it will not enter into an agreement with another franchisee for development of a Checkers Restaurant at the Preferred Site within the referenced thirty (30) day period. The site application form must be accompanied by a $4,000 site application fee, which is refundable only if the Company denies the application for a Checkers Drive-In Restaurant at the Preferred Site.

If the franchise application is denied, Applicant acknowledges and agrees that the Company has granted no rights whatsoever to the Applicant with respect to the Preferred Site, and that the Company may own and operate, and grant to others the right to own and operate, a Checkers Restaurant at or near the Preferred Site.

Applicant represents and warrants that the information contained in this franchise application is true and correct and fairly reflects Applicant’s financial condition as of the date hereof. Applicant also represents and warrants that his/her assets, property or interests are not “blocked” under any law or regulations relating to terrorist activities, and he/she is not otherwise in violation of any such laws or regulations.

Applicant understands that the Company has the right to deny this application if any of the following events occur:

1. The Company determines that the information in this franchise application is not true and correct or does not fairly reflect the financial condition of the Applicant, or that the Applicant is not financially qualified to purchase a Checkers Drive-In Restaurant franchise.
2. The Company determines for whatever reason that the awarding of a Checkers Restaurant franchise would not be in the best interest of the Applicant or the Company.

The above determinations are to be made solely at the discretion of the Company, and Applicant agrees the Company will have no liability for any such determination, other than the obligation to refund the application fee, less expenses.

If and when the Company approves the franchise application and Preferred Site, the Company will offer Applicant a franchise to operate a Checkers Restaurant at the Preferred Site by delivering its then-current form of standard franchise agreement, together with all standard ancillary documents (including exhibits, riders, collateral assignments of leases, guarantees, and other related documents) that it then customarily uses in granting franchises for the operation of a Checkers Restaurant in the state in which the Preferred Site is located. The franchise agreement and the ancillary documents must be duly executed and returned not earlier than 7 days and not later than 21 days after they are delivered, with payment of the initial franchise fee, as required thereunder. The application processing fee and site application fee are creditable toward the initial franchise fee. If the Company does not timely receive the fully executed franchise agreement and ancillary documents and payment of the required initial fees, the Company may revoke its offer to grant a franchise to operate a Checkers Restaurant. This application does not confer any rights relating to the Company’s trademarks, service marks or trade dress, which includes the Checkers Restaurant exterior building appearance and design, menu layouts and advertising slogans and characters. Any proprietary or confidential information provided by the Company to the Applicant is solely for the purpose of Applicant’s evaluating a Checkers Restaurant franchise. Applicant acknowledges that any rights to use such property or confidential information may be derived only pursuant to an executed franchise agreement, and that unauthorized disclosure, transfer of use, either direct or indirect, of such information by the Applicant would constitute an infringement of the Company’s rights thereto and result in irreparable injury to the Company for which there is no adequate remedy at law.

Applicant represents and warrants that its responses to the following questions are true as of the date of this application:

1. Have you received a complete copy of the Company’s Franchise Disclosure Document at least 14 days before the earlier of the date on which you signed this franchise application or paid the deposit required hereunder?

\[\begin{array}{ll}
\text{Yes} & \text{No} \\
\text{______} & \text{______}
\end{array}\]

\[\text{Initials} \]

\[\text{Initials} \]
2. Has any employee or other person speaking on behalf of the Company made any statement or promise concerning the revenues, profits or operating costs of a Checkers Restaurant operated by the Company or its franchisees, that is contrary to the information contained in the Franchise Disclosure Document?

_________ Yes  ___________ No  _____ Initials  

_____ Initials

If you answered “Yes,” please explain: ____________________________________________

______________________________________________________________________________

3. Has any employee or other person speaking on behalf of the Company made any statement or promise regarding the amount of money you may earn in operating a Checkers Restaurant, that is contrary to the information contained in the Franchise Disclosure Document?

_________ Yes  ___________ No  _____ Initials  

_____ Initials

If you answered “Yes,” please explain: ____________________________________________

______________________________________________________________________________

4. Has any representative of the Company made any oral, written or visual statement, claim or representation which contradicted, expanded upon or was inconsistent with the information contained in the Company's Franchise Disclosure Document?

_________ Yes  ___________ No  _____ Initials  

_____ Initials

If you answered “Yes,” please explain: ____________________________________________

______________________________________________________________________________

______________________________________________________________________________
The effective date of this application is the date it is acknowledged by the Company.

APPLICANT(S):

(Signature) (Signature)

(Print Name) (Print Name)

ACKNOWLEDGED this ____ day of ________________, ________________.

CHECKERS DRIVE-IN RESTAURANTS, INC.

By: __________________________
Name: __________________________
Title: __________________________