



**FAST-FIX JEWELRY REPAIRS®**  
**FRANCHISE APPLICATION QUALIFICATION**

**I. PERSONAL DATA**

Applicant Name		Social Security Number	
Date of Birth	Marital Status	Is Co-Applicant your spouse? Y / N	
Home Address	City	State	Zip
Home Phone ( )	Business Phone ( )	May we contact your business number ? Y / N Time:	
Co-Applicant/Spouse	Social Security Number		Date of Birth
Home Address	City	State	Zip
Home Phone ( )	Business Phone ( )	May we contact your business number ? Y / N Time:	

**II. EMPLOYMENT / BUSINESS DATA**

Are you now self-employed?  Y  N If yes, please complete the following

Firm	Phone Number ( )		
Address	City	State	Zip
Type of Business	Your Title		
Yearly Sales	Number of Employees	Years in Business	

**Employment Record: Applicant**

Current Firm	Position/Present Salary	Started: Year	To:
Address	City	State	Zip
Description of Work			

**Employment Record: Co-Applicant/Spouse**

Current Firm	Position/Present Salary	Started: Year	To:
Address	City	State	Zip
Description of Work			

**Your Previous Business Experience (list in order)**

Firm	Address		
From:	To:	Position	Annual Gross Income
Firm	Address		
From:	To:	Position	Annual Gross Income

**III. FUNDING STATEMENT**

Where will the funds come from to meet the requirements of the estimated start up costs? Enter source and dollar amounts:

Do you plan to have a partner (other than your spouse)?	Y	N
Do you own your own home?	Y	N
Do you plan to borrow against it?	Y	N
Amount of Equity	Amount of loan	
Do you anticipate obtaining a loan to assist you in funding this franchise opportunity?	Y	N
Amount		

**IV SOURCE OF INCOME**

All other monthly income expected to continue after being awarded a Fast-Fix Jewelry Repairs ® Franchise (use Annual figures where applicable)

Pension	Interest	Real Estate
Alimony	Inheritance	Other

Other, Please explain:

**V INTENTIONS AND EXPECTATIONS AS A FAST-FIX JEWELRY REPAIRS® FRANCHISE OWNER**

Who will operate the store?	Self	Spouse	Other	Name of Other?
Will one of you continue to work at your current place of employment after the franchise is awarded	If yes, which person?			
Do you now own a franchise?	If yes, please describe:			

**VI ADDITIONAL BUSINESS INFORMATION**

Have you ever failed in business or filed bankruptcy?	Y	N
If yes, please list when, where, circumstances (including any remaining liabilities)		
Are there any lawsuits pending against you?	Y	N
If yes, please describe:		
Have you ever been convicted of a crime?	Y	N
If yes, please describe:		
Are you a U.S. Citizen?	Y	N
If no, in which country do you hold citizenship		

**VII ABOUT YOU**

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What are your reasons for going into your own business?

1. \_\_\_\_\_  
\_\_\_\_\_
2. \_\_\_\_\_  
\_\_\_\_\_
3. \_\_\_\_\_  
\_\_\_\_\_
4. \_\_\_\_\_  
\_\_\_\_\_
5. \_\_\_\_\_  
\_\_\_\_\_

What are some of the major questions you have concerning owning your own business?

1. \_\_\_\_\_  
\_\_\_\_\_
2. \_\_\_\_\_  
\_\_\_\_\_
3. \_\_\_\_\_  
\_\_\_\_\_
4. \_\_\_\_\_  
\_\_\_\_\_
5. \_\_\_\_\_  
\_\_\_\_\_

As I consider my experience and abilities. I am confident that I can successfully operate a Fast-Fix Jewelry Repairs © Franchise because:

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Do you currently own a jewelry repair business? Yes/ No

Explain \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**VIII. FINANCIAL SUMMARY**

<b>APPLICANT ASSETS</b>		<b>CO-APPLICANT ASSETS</b>	
Cash, Checking, Savings, etc.		Cash, Checking, Savings, etc.	
Investments: Marketable Securities (Stocks, Bonds & Mutual Funds)		Investments: Marketable Securities (Stocks, Bonds & Mutual Funds)	
Accounts and Notes Receivable		Accounts and Notes Receivable	
Real Estate Owned		Real Estate Owned	
Automobiles: Year      Make:		Automobiles: Year      Make:	
Personal Property and Furniture		Personal Property and Furniture	
Other Assets -IRA's-		Other Assets -IRA's-	
-Profit Sharing		-Profit Sharing	
-CSV-Life Insurance (Cash Surrender Value Only)		-CSV-Life Insurance (Cash Surrender Value Only)	
True Business NET Worth <b>Attach Current Financial Statement</b>		True Business NET Worth <b>Attach Current Financial Statement</b>	
Total Assets		Total Assets	

<b>APPLICANT LIABILITIES</b>		<b>CO-APPLICANT LIABILITIES</b>	
Installments Accounts Payable (See Attached Schedules)		Installments Accounts Payable (See Attached Schedules)	
Other Accounts Payable (See Attached Schedules)		Other Accounts Payable (See Attached Schedules)	
Notes Payable: (Banks, Relatives & Others)		Notes Payable: (Banks, Relatives & Others)	
Mortgages Payable on Real Estate		Mortgages Payable on Real Estate	
Other Debts - Taxes (Income & Real Estate)		Other Debts - Taxes (Income & Real Estate)	
- Misc. (Loans on Life Ins. Policy, etc.)		- Misc. (Loans on Life Ins. Policy, etc.)	
Total Liabilities		Total Liabilities	
NET WORTH (Assets Minus Liabilities)		NET WORTH (Assets Minus Liabilities)	

**SCHEDULE A - CASH & EQUIVALENTS**

Account number	Name of Institution	Name on Account	Amount	Copy of Statement
				Attached Required
Checking				Required
				Required
				Required
Saving				Required
				Required
				Required
Money Market				Required
				Required
				Required
CD				Required
				Required
				Required
				Required

**SCHEDULE B - MARKETABLE SECURITIES (Stocks, Bonds & Mutual Funds)**

Number of Shares	Description	In the Name of	Market Value	Copy of Statement Attached Required
				Required
				Required
				Required
				Required
				Required

**SCHEDULE C - ACCOUNTS AND NOTES RECEIVABLE**

Payor	Description	Amount

**SCHEDULE D - REAL ESTATE OWNED**

Description of Property (and date acquired)	Cost vs. Market Value	Mortgage		Lender
		Amount	Payment	

**SCHEDULE E - INSTALLMENT ACCOUNTS PAYABLE (ie, Automobile, etc.)**

Payee	Amount	Monthly Payment

**SCHEDULE F - OTHER ACCOUNTS PAYABLE (ie., Credit Cards, Store Cards, Student Loans, etc.)**

Payee	Amount	Monthly Payment

**SCHEDULE G - NOTES PAYABLE & OTHER DEBTS**

Payee	Amount	Monthly Payment

**PROCEDURES:**

*Assets must be supported by documentary evidence (ie., copies of bank and brokerage statements, etc.)  
 Supplementary statements and schedules should be provided as necessary (ie., method of business valuation)  
 Please attach copies of most recent individual federal tax returns (two years) and copies of most recent business/  
 corporate financial statements (two years).*

I certify that the information I have provided on this application is complete and correct. I hereby authorize Jewelry Repair Enterprises, Inc. or its authorized agent to obtain verification of any of the information provided and I authorize the release of such information to Jewelry Repair Enterprises or its authorized agent. I/we further authorize release of this information/application to Jewelry Repair Enterprises vendors only after purchase of a Fast-Fix Jewelry Repairs Franchise.

Signature of Applicant

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Signature of Co-Applicant

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