



Confidential Franchise Application & Request for Consideration

Please type or print legibly.

Check one:

- Individual
- Joint (with spouse)
- Corporate Entity

Personal Information

Each partner or associate who will join you in this venture must also Complete an application and submit a Personal Financial Statement.

Name _____
 Last First Middle

Home Address (Residence) _____ How long at home address? _____
 Street City State/zip Years Months

Home Phone () - Work Phone () - Mobile/Pager () -

Passport/I.D.. & Country of Issue _____ If married, is your spouse also applying? YES NO
 (If yes, please provide the following):

Spouse Name _____ () - Spouse's Passport/I.D. _____
 Last First Middle Primary Phone

Home OWN RENT Name of Landlord _____ Phone () -

Previous Address _____ How long at Previous address? _____
 Street Years Months
 City State Zip

Automobiles Year _____ Make _____ Model _____ Monthly Payment \$ _____
 Year _____ Make _____ Model _____ Monthly Payment \$ _____
 Year _____ Make _____ Model _____ Monthly Payment \$ _____

Are you a party to any pending legal action? (If yes, explain.) Attach a separate sheet, if necessary. YES NO _____

Have you ever been convicted of a crime? (If yes, explain.) Attach a separate sheet, if necessary. YES NO _____

Area of Interest

In what country, city or towns are you interested? _____
 City/Towns Country

Second Choice _____ Third Choice _____



Please type or print legibly

Employment History and Business Background

- List present or last job first.
- Provide history for the last 10 years.

1. From _____ To _____ Occupation/Employer _____
 Type of Business _____ Supervisor _____
 Business Phone () - _____ Last Position Held _____
 Address _____ Monthly Salary \$ _____
 Street _____ Reason for Leaving _____
 City _____ State _____ Zip _____
 Acquired Skills Related to Franchise _____ May We contact Your Employer? YES NO

2. From _____ To _____ Occupation/Employer _____
 Type of Business _____ Supervisor _____
 Business Phone () - _____ Last Position Held _____
 Address _____ Monthly Salary \$ _____
 Street _____ Reason for Leaving _____
 City _____ State _____ Zip _____
 Acquired Skills Related To Franchise _____ May We Contact Your Employer? YES NO

3. From _____ To _____ Occupation/Employer _____
 Type of Business _____ Supervisor _____
 Business Phone () - _____ Last Position Held _____
 Address _____ Monthly Salary \$ _____
 Street _____ Reason for Leaving _____
 City _____ State _____ Zip _____
 Acquired Skills Related to Franchise _____ May We Contact Your Employer? YES NO

4. From _____ To _____ Occupation/Employer _____
 Type of Business _____ Supervisor _____
 Business Phone () - _____ Last Position Held _____
 Address _____ Monthly Salary \$ _____
 Street _____ Reason for Leaving _____
 City _____ State _____ Zip _____
 Acquired Skills Related to Franchise _____ May We Contact Your Employer? YES NO

List additional positions on separate sheet of paper. You may attach a résumé in lieu of completing this section. If using a résumé, please indicate if we may contact the employer.



Please type or print legibly

Personal Financial Statement

Name _____

Assets		Liabilities	
Cash on Hand & Unrestricted in Banks List on Schedule #1	\$	Notes Payable to Banks Unsecured List on Schedule #1	\$
Accts & Loans Receivable List on Schedule #2		Notes Payable to Others	
Life Insurance, Cash Surrender Value List on Schedule #3		Interest Payable	
Stocks, Bonds, & Gov. Sec. List on Schedule #4		Loans against Life Insurance List on Schedule #3	
Real Estate - present market value List on Schedule #5		Accounts Payable (Monthly)	
Automobile – Market Value		Federal or State Taxes & Assessments Payable	
Other Assets (Itemize)		Mortgages Payable on Real Estate List on Schedule #5	
		Other Liabilities (Itemize)	
Total Assets	\$	Total Assets	\$
		Total Liabilities	\$
		Net Worth	\$

Annual Source of Income		Contingent Liabilities	
Salary	\$	Legal Claims	\$
Spouse's Salary		Endorser or Co-Maker	
Bonus & Commissions		Leases or Contracts	
Interest		Other Special Debts, Liens, etc.	
Dividends			
Other Income (Itemize)			
Total	\$		

General Information

Have you ever filed for bankruptcy?
(Explain) _____

SUPPLEMENTARY SCHEDULES to Personal Financial Statement

* You may submit requested information in a different format. Provide appropriate verification of all assets to be used as investment capital.

SCHEDULE #1 – Bank Relations (Bank Verification Letter Must Accompany Application)

Bank Name	Address	Cash Balance	Amount of Loan	Phone Number	Contact Person

Use this page for further explanation of Personal Financial Statement:



Please type or print legibly

SCHEDULE #2 – Accounts, Loans, & Notes Receivable

Name	Address	Amount Owed	Nature of Debt	Date Payment Due

SCHEDULE #3 – Life Insurance

Person Insured	Beneficiary	Insurance Company	Type of Policy	Face Amount of Policy	Cash Surrender Value	Total Loans Against Policy	Annual Premium	Is Policy Assigned?

SCHEDULE #4 – Stocks, Bonds, & Government Securities

Description of Security	Number of Shares (Stock) or Face Value (Bonds)	Present Market Value	Income Received Last Year	Are Securities Pledged?

SCHEDULE #5 – Real Estate

Address	Dimension or Acres	Type (Farm, Business)	Mortgages or Liens	Present Market Value	Amount of Monthly Payment	Unpaid Taxes Year	Amount

SCHEDULE #6 – Credit References (Please List at Least Three – Complete in Full)

Company Name	Address	Phone Number	Charge Account	Contact Person

Please answer all questions. Use “Not Applicable” or “None” if necessary. List additional information on separate sheet of paper.

Affirmation

I, the undersigned applicant, certify that the information supplied on this personal financial statement and any financial information submitted on other forms is true and correct.

Date _____

Signed _____

Print Name _____



Please type or print legibly

Authorization for Credit Inquiry and Criminal Background Check

Please type or print legibly and return this form with Application. Also complete reverse side.

APPLICANT:

I, the undersigned applicant, hereby give **Mo'men Group**, an Egyptian corporation, the right to request and obtain from any third party, including without limitation, credit reporting agencies and law enforcement agencies, full and complete information with respect to:

1. My past and current credit history and
2. My past and current criminal history, if any.

This authorization shall constitute a request by me to any such third party that such information be furnished directly to **Mo'men Group**.

I further certify that the information supplied on this form and any financial information submitted on other forms is true and correct and all information supplied may be used for the foregoing purposes. I also understand and acknowledge that my submission of this Application does not constitute any approval or implied acceptance by **Mo'men Group** for a franchise.

Date _____ Signed _____

 Print Name _____

 DOB _____ Passport.ID _____

SPOUSE (If joint applicant):

I, the undersigned applicant, hereby give **Mo'men Group**, the right to request and obtain from any third party, including without limitation, credit reporting agencies and law enforcement agencies, full and complete information with respect to:

1. My past and current credit history and
2. My past and current criminal history, if any.

This authorization shall constitute a request by me to any such third party that such information be furnished directly to **Mo'men Group**.

I further certify that the information supplied on this form and any financial information submitted on other forms is true and correct and that all information supplied may be used for the foregoing purposes. I also understand and acknowledge that my submission of this Application does not constitute any approval or implied acceptance by **Mo'men Group** for a franchise.

Date _____ Signed _____

 Print Name _____

 DOB _____ Passport.ID _____

CONFIDENTIALITY AND NON-DISCLOSURE AGREEMENT

The undersigned applicant(s) (whether one or more, "Applicant") has applied to become a franchisee of **Mo'men Group**. ("AG") and, in connection with the application process, may become privy to certain information regarding the business of AG, and its affiliates and its franchisees which AG classifies and protects as confidential and proprietary (the "Information"). AG is willing to divulge such Information (as and to the extent it deems appropriate in connection with Applicant's application) only if Applicant agrees to protect the confidentiality of such Information. In consideration of the disclosure of Information, Applicant agrees to the following terms and conditions:

1. **Confidentiality.** Applicant, on behalf of itself and its affiliates, employees, officers and directors, agrees to maintain as confidential all Information disclosed to Applicant. Applicant shall not, directly or indirectly, disclose any such Information to any third party without AG's prior written consent, nor shall Applicant use any Information for Applicant's own benefit (except for the purpose of the discussions contemplated by this Agreement) or for the benefit of any third party. The dissemination of Information by Applicant within its own organization shall be limited to those employees and consultants whose duties justify the need to know such Information.
2. **Return of Information.** Applicant shall return to AG within ten (10) days of written request therefore, all Information, together with any and all copies thereof.
3. **No Rights in Information.** Neither this Agreement nor the disclosure of Information shall be deemed, by implication or otherwise, to vest in Applicant any rights in the Information or any other trade secrets or property of AG.
4. **Breach.** Any breach of any provision hereof will be theft of AG's trade secrets, and will cause irreparable harm and damage to AG. AG shall be entitled to enjoin any actual or threatened violation of any of the provisions of this Agreement. In addition to injunctive relief, AG may recover damages from Applicant for any loss caused by any violation of the provisions of this Agreement (including violations by third parties to whom Applicant discloses Information). In any action brought to enforce any of the provisions of this Agreement, AG shall be entitled to reasonable attorneys' fees and costs.
5. **Law.** This Agreement is made under, and shall be construed and enforced in accordance with, the laws of the Country of Egypt. The parties agree that the exclusive venue for disputes between them shall be in the federal courts located in Cairo, Egypt, and the undersigned waives any objection it may have to the personal jurisdiction of, or venue in, such courts.
6. **Severability.** Any provision hereof may prove unenforceable under any law or by any court shall not affect the validity of any other provision hereof.

Date _____

Signed _____

Print Name _____

Date _____

Signed _____

Print Name _____

Note: This Application will not be processed unless and until all portions are completed and all information is submitted.

Return Completed Application in confidence to:

*Mahmoud Moursy
Assistant of Mo'men Restaurants Concepts' CEO
C/O Franchise Department*

Address: Industrial zone#1, Obour City, Cairo, Egypt

Cell : + 2010 170 25 92

Tel. : + 202 227 511 06 – 227 372 62 - 46 100 89 2 / 3 / 4 / 5

Fax : + 202 227 344 06 - 46 100 891

e-mail: mmorsy@momen-group.com

Web site: www.momen-group.com