

# CONFIDENTIAL QUESTIONNAIRE

#### Just Dogs! Barkery, Inc.

## Sales and Marketing Office • 5101 Cyrus Circle • Birmingham, Alabama 35242 • (205) 332-0367

This Application does not commit you to buy a franchise. It merely gives you and us both a starting point to determine if our Franchise is right for you. Please fill out clearly and completely and FAX it to our EVP, Franchise Sales and Marketing (205) 453-0132 or email it to robert@justdogsgourmet.com.

| Personal In   | formation                  |  |  |       |                          |                                 |                           |        |  |
|---|----------------------------|--|--|-------|--------------------------|---------------------------------|---------------------------|--------|--|
| Your First Name: MI   |                            | MI                                     | Your Last Name:  |       |                          | Age Marital Status (Circle One) |                           |        |  |
|   |                            |  |  |       |                          |                                 | Married Single Other      | r      |  |
| Spouse First Name: M  |                            | MI                                     | Spouse Last Name:  |       |                          | Age                             | Your Country (Circle One) |        |  |
|   |                            |  |  |       |                          |                                 | USA CAN Other             |        |  |
| No. of Children:  | Ages of Children:          |  | Home Phone:  |       | Your email add           | dress:                          |                           |        |  |
|   |                            |  | ()   |       |                          |                                 |                           |        |  |
| Home Street Address:  |                            |  | City: State  |       |                          | Zip:                            |                           |        |  |
|   |                            |  |  |       |                          |                                 |                           |        |  |
| Business Street Address:  |                            |  | City: State  |       |                          | : Zip:                          |                           |        |  |
|   |                            |  |  |       |                          |                                 |                           |        |  |
| Present Occupation:   | Present Occupation: Pos    |  | ition: How Long? Bu  |       | Business Phon            | ness Phone: Ext.                |                           |        |  |
|   |                            |  |  |       | ()                       |                                 |                           |        |  |
| Education: (Circle L  | ast Year Completed)        | Des                                    | cribe any training in sales, management, pet food, retail or other but                                 |       |                          | s you hav                       | ve personally competed.   |        |  |
| College 12  | 3456                       |  |  |       |                          |                                 |                           |        |  |
| High School   |                            |  |  |       |                          |                                 |                           |        |  |
| Describe any experience which would help you own a business:  |                            |  |  |       |                          |                                 |                           |        |  |
|   |                            |  |  |       |                          |                                 |                           |        |  |
|   |                            |  |  |       |                          |                                 |                           |        |  |
|   |                            |  |  |       |                          |                                 |                           |        |  |
| Personal Re   | ferences                   |  |  |       |                          |                                 |                           |        |  |
| Name in Full:   |                            |  | Address  |       |                          | Occupation Years Know           |                           | 1      |  |
|   |                            |  |  |       |                          |                                 |                           |        |  |
| Name in Full:   |                            |  | Address  |       |                          | Occupation Years Know           |                           | 1      |  |
|   |                            |  |  |       |                          |                                 |                           |        |  |
| Name in Full:   |                            | Address                                |  |       | Occupation Years Kn      |                                 | 1                         |        |  |
|   |                            |  |  |       |                          |                                 |                           |        |  |
| Credit Refe   | rence (Company             | <u>v)</u>                              |  |       |                          |                                 |                           |        |  |
| Creditor Name:  |                            | Address                                |  | Accou | Account Number T         |                                 |                           |        |  |
|   |                            |  |  |       |                          |                                 |                           |        |  |
| Creditor Name:  |                            | Address                                |  |       | Account Number Telephone |                                 |                           |        |  |
|   |                            |  |  |       |                          |                                 |                           |        |  |
| Creditor Name:  |                            | Address                                |  | Accou | Account Number Telephone |                                 |                           |        |  |
|   |                            |  |  |       |                          |                                 |                           |        |  |
| What area are you i   | nterested in? (City/State) |  | 1  |       | I                        |                                 |                           |        |  |
| First Chairs  |                            |  | Cocond Chaice  |       | Third Chai               | _                               |                           |        |  |
| First Choice<br>Will you devote full  | time to this business?     |  | Second Choice  |       | Third Choice             | 5                               |                           | $\neg$ |  |
| Circle Yes I  |                            |  |  |       |                          |                                 |                           |        |  |
| CIrcle Yes No If No, explain:   Will your spouse be involved in this business? Are you considering a partner? |                            |  |  |       |                          |                                 |                           |        |  |
| Circle Yes No If No, explain:<br>Total capital to invest in a business?                                       |                            |  | Circle Yes No. Ko Mulo   |       |                          |                                 |                           |        |  |
| Total capital to inve   | st in a business?          | Have you ever been involved in a bankr | e Yes No If So, WHO:<br>ou ever been involved in a bankruptcy?   |       |                          |                                 |                           |        |  |
|   |                            |  | Circle Yes No. 16 Yes Fundain  |       |                          |                                 |                           |        |  |
| How did you learn a   | bout this franchise progra | m?                                     | Are you currently involved in any lawsuits or legal actions?   |       |                          |                                 |                           |        |  |
|   |                            |  |  |       |                          |                                 |                           |        |  |
| How did you learn a   | bout this franchise progra | m?                                     | Circle Yes No If Yes, Expla<br>Are you currently involved in any lawsui<br>Circle Yes No If Yes, Expla |       | ns?                      |                                 |                           |        |  |

## CONFIDENTIAL QUESTIONNAIRE

I understand that the information I am receiving about the Just Dogs! Gourmet<sup>™</sup> franchise and information from any Just Dogs! Barkery, Inc. employee, agent or franchisee is highly confidential and is being made available to me because of this application, and I will hold that information or materials in the strictest confidence.

#### Just Dogs! Barkery, Inc. (we) will send you our Uniform Franchise Offering Circular (UFOC) with full details, upon receipt of this completed application.

| Assets                              | Amount | Liabilities                                  | Amount |
|-------------------------------------|--------|--|--------|
| ash on hand or in banks \$          |        | Notes payable to Bank                        | \$     |
| U.S. Government Securities          | \$     | Notes payable to other unsecured             | \$     |
| Amounts and loans receivable        | \$     | Loans against life insurance                 | \$     |
| Life Insurance Cash Surrender Value | \$     | Interest payable                             | \$     |
| Stocks, bonds, money market         | \$     | Taxes and Assessments payable                | \$     |
| Real Estate                         | \$     | Mortgages payable on Real Estate             | \$     |
| Automobiles                         | \$     | Brokers Margin Accounts                      | \$     |
| Other Assets (Itemize)              | \$     | Other Liabilities (Itemize)                  | \$     |
| Other Assets (Itemize)              | \$     | Other Liabilities (Itemize)                  | \$     |
| Other Assets (Itemize)              | \$     | Other Liabilities (Itemize)                  | \$     |
| Other Assets (Itemize)              | \$     | Other Liabilities (Itemize)                  | \$     |
| Other Assets (Itemize)              | \$     | Total Liabilities                            | \$     |
| Other Assets (Itemize)              | \$     | Net Worth (Total Assets – Total Liabilities) | \$     |
| Total Assets                        | \$     | Total Liabilities + Net Worth                |        |

| Annual Income                   | Amount | Annual Expenditures <sup>1</sup>      | Amount |
|---------------------------------|--------|---------------------------------------|--------|
| Salary (Exclude Bonus)          | \$     | Home Mortgage                         | \$     |
| Spouse's Salary (Exclude Bonus) | \$     | Other Real Estate Payments            | \$     |
| Securities Income               | \$     | Rent Payable                          | \$     |
| Rentals                         | \$     | Income Taxes (State & Federal)        | \$     |
| Commissions and Bonuses:        | \$     | Insurance Premiums                    | \$     |
| Other:                          | \$     | Other: (Include Installment Payments) | \$     |
| 1:                              | \$     | 1:                                    | \$     |
| 2:                              | \$     | 2:                                    | \$     |
| 3:                              | \$     | 3:                                    | \$     |
| 4:                              | \$     | 4:                                    | \$     |
| Total Income                    | \$     | Total Expenditures                    |        |

<sup>1</sup> Exclude Ordinary Living Expenses

The signature below authorizes the release and verification of credit information to Just Dogs! Barkery, Inc. All information will be kept confidential.

Signed: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

Print Your Name: \_\_\_\_\_

\_ Date: \_\_\_\_\_

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