



Date \_\_\_\_\_

### Personal Data

Name (First, Middle, Last) \_\_\_\_\_  
SS#/SI# \_\_\_\_\_ Date of Birth \_\_\_\_\_  
Home Address \_\_\_\_\_  
City, State, Zip/Postal Code \_\_\_\_\_  
Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_  
E-mail \_\_\_\_\_  
Business Phone \_\_\_\_\_ Fax \_\_\_\_\_  
Spouse's Name \_\_\_\_\_ Spouse's Occupation \_\_\_\_\_  
Country of Citizenship \_\_\_\_\_

### Education

Name of High School \_\_\_\_\_ Years completed \_\_\_\_\_  
Name of College \_\_\_\_\_ Degree \_\_\_\_\_  
Name of College \_\_\_\_\_ Degree \_\_\_\_\_  
Describe any training in sales, management or retailing \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### Personal References (please provide at least 3)

Name \_\_\_\_\_ Phone \_\_\_\_\_  
Address \_\_\_\_\_  
City, State, Zip/Postal Code \_\_\_\_\_  
Years Known \_\_\_\_\_ Relationship to Applicant \_\_\_\_\_

Name \_\_\_\_\_ Phone \_\_\_\_\_  
Address \_\_\_\_\_  
City, State, Zip/Postal Code \_\_\_\_\_  
Years Known \_\_\_\_\_ Relationship to Applicant \_\_\_\_\_

Name \_\_\_\_\_ Phone \_\_\_\_\_  
Address \_\_\_\_\_  
City, State, Zip/Postal Code \_\_\_\_\_  
Years Known \_\_\_\_\_ Relationship to Applicant \_\_\_\_\_



**Employment history for the last 10 years**  
(beginning with most recent)

Company Name \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_

May we contact this employer?  Yes  No

Contact Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip/Postal Code \_\_\_\_\_

Type of Business \_\_\_\_\_ # of Employees Supervised \_\_\_\_\_

Describe responsibilities \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Company Name \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_

May we contact this employer?  Yes  No

Contact Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip/Postal Code \_\_\_\_\_

Type of Business \_\_\_\_\_ # of Employees Supervised \_\_\_\_\_

Describe responsibilities \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Company Name \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_

May we contact this employer?  Yes  No

Contact Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip/Postal Code \_\_\_\_\_

Type of Business \_\_\_\_\_ # of Employees Supervised \_\_\_\_\_

Describe responsibilities \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



Please provide the following general financial information so we can better understand your individual financial ability to open and operate a Mongo's Grill.

**Individual Current Income Range**

- \$50,000 – \$100,000 annually
- \$100,000 – \$200,000 annually
- \$200,000<sup>+</sup> annually

**Net Worth & Liquidity Ranges**

**Individual Unencumbered Liquidity**

- \$250,000 – \$500,000
- \$500,000 – \$1,000,000
- \$1,000,000<sup>+</sup>

**Individual Net Worth**

- \$0 – \$250,000
- \$250,000 – \$500,000
- \$500,000 – \$1,000,000
- \$1,000,000<sup>+</sup>

**Estimated Costs**

Estimated startup costs will range from \$500,000 to \$800,000 depending on the square footage of your leased location. Additionally if preferred, land acquisition and building costs would increase these costs accordingly.

High standards and high expectations make up the cornerstone of Mongo's success. When granted a Franchise, you are teamed up with the founders who have over a hundred years of combined successful restaurant operations.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

I hereby attest to the accuracy of the information contained in this confidential Franchise Application. I authorize Mongo's Grill, or its agents to verify the data submitted, to obtain a credit report, and to obtain any such additional credit, background or character confirmations which it might deem necessary.

Upon completion, please mail the application to:

Mongo's Grill Franchise  
114 E Idaho Ave. Suite 230  
Meridian, ID 83642

If you have any questions, contact us at 208-639-3306.

Our receipt of your Franchise Application should not be considered as acceptance of granting a Franchise. A Franchise will only be granted upon execution of a written Franchise Agreement.



### Business References (please provide at least 3)

Contact Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip/Postal Code \_\_\_\_\_

Contact Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip/Postal Code \_\_\_\_\_

Contact Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip/Postal Code \_\_\_\_\_

### Other Information

Have you ever visited a Mongo's Grill?  Yes  No

Please describe your experience. \_\_\_\_\_

\_\_\_\_\_

Will you be the sole owner of the franchise?  Yes  No

Will this be a partnership?  Yes  No

*If a partnership, provide information for all partners on an additional sheet.*

Will your franchise investment come from you or your partners own capital?  Yes  No

Have you ever owned a franchise before?  Yes  No

*If yes, please describe your franchise experience.* \_\_\_\_\_

\_\_\_\_\_

Have you ever operated, or do you currently operate a restaurant?  Yes  No

*If yes, please explain.* \_\_\_\_\_

\_\_\_\_\_

Do you intend to devote yourself full-time to the day-to-day operations of the restaurant?

Yes  No

*If not, please provide an explanation and details about your operating partner on an additional sheet.*



If accepted, where and when would you like to open a Mongo's Grill restaurant?

\_\_\_\_\_  
\_\_\_\_\_

Would you like to open multiple locations?  Yes  No

Are you willing to relocate?  Yes  No

If yes, what region?

First Choice \_\_\_\_\_

Second Choice \_\_\_\_\_

Have you (and if applicable, any partners, officers, directors, shareholders) been subject to or convicted of any administrative, criminal or civil action alleging a violation of any franchise law, fraud, embezzlement or any other deceptive practices or comparable allegations?  Yes  No  
*If yes, explain on an additional sheet.*

Have you (and if applicable, any partners, officers, directors, shareholders) ever declared bankruptcy, or been a principal officer of any company that has declared bankruptcy or reorganized due to insolvency?  Yes  No  
*If yes, explain on an additional sheet.*

If you have any other comments or information that would assist us in our decision making, please provide them on an additional sheet.

Please provide us any additional sources such as a resume or letters of recommendation that may be pertinent to your application.

If you are selected for further consideration you will be required to supply more detailed financial information.

### Authorization for Release of Personal Information

I hereby attest to the accuracy of the information contained in this confidential Franchise Application. I authorize Mongo's Grill, or its agents to verify the data submitted, and to obtain additional background or character confirmations which it might deem necessary.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Spouse's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date

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