

CAPITAL INVESTMENT OUTLAY

Part I				
BIL	TERM	PACKAGE PLATUNUM	PACKAGE GOLD	PACKAGE SILVER
1.	INITIAL FEE	3,000.00	3,000.00	3,000.00
2.	FRANCHISE FEE	50,000.00	30,000.00	20,000.00
3.	RENTAL OF PREMISS	30,000.00	20,000.00	12,000.00
4.	FITTING & FIXTURES	100,000.00	70,000.00	50,000.00
5.	EQUIPMENTS	7,460.00	7,460.00	7,460.00
6.	INITIAL INVENTORY	200,000.00	180,000.00	150,000.00
Part II				
BIL	TERM	PACKAGE PLATUNUM	PACKAGE GOLD	PACKAGE SILVER
7.	OTHERS DEPOSITS	1,200.00	450.00	450.00
8.	WORKING CAPITAL	61,300.00	65,600.00	39,900.00
9.	SECURITY DEPOSIT	50,000.00	40,000.00	30,000.00
TOTAL INVESTMENT		502,960.00	416,510.00	312,810.00

FRANCHISING CONDITIONS

1. Royalty : 3% OF GROSS SALES PER MONTH
2. Advertising and Promotion: 2% OF GROSS SALES PER MONTH
3. Term of Franchise : 5 YEARS



FRANCHISEE APPLICATION FORM

LOCATION SUGGESTED

1. _____

2. _____

3. _____

PERSONAL INFORMATION

Full Name : _____ I/C No : _____

Email : _____ Marital Status : _____

City : _____ D.O.B : _____

Address : _____

Highest Academic Qualifications: _____

BUSINESS EXPERIENCE

Present Occupation : _____

Company : _____

Describe Duties : _____

Salary : _____ Supervisor : _____

Previous Experience : _____

Company : _____ Employed From : _____ To : _____

Describe Duties : _____

Salary : _____ Supervisor : _____

Company : _____ Employed Form : _____ To : _____

Describe Duties : _____

Salary : _____ Supervisor : _____

SUGGESTED FINANCIAL FRANCHISE BUSINESS

	SOURCE	TOTAL (RM)
1. Own	_____	_____
2. Family Contribution	_____	_____
3. Others	_____	_____

BUSINESS PREMISES

1. Shop / premises available for business? Yes /No

I. Own property/ Rent

II. Location

2. If renting

I. Monthly rental rate (RM)

II Tenure

PERSONAL FINANCIAL STATEMENT

Assets (RM)

Cash On Hand & Bank : _____

Stocks / Bonds / Securities : _____

Notes & Loans Receivable : _____

Cash Value of Life Insurance : _____

Home (Market Value) : _____

Other Real Estate (Market Value) : _____

Automobile (s) : _____

Other Assets : _____

Total Assets : _____

Total Net Worth (total assets minus liabilities) : _____

Current Monthly Income (RM) : _____

Salary : _____

Spouse's Salary : _____

Other Income : _____

Total : _____

Liabilities (RM)

Notes payable : _____

Bank Loans : _____

Other Loans : _____

Credit Cards : _____

Unpaid Taxes : _____

Loans on life Ins : _____

Other Liabilities : _____

Total Liabilities: : _____

(RM)

Current Monthly Expenses (RM) : _____

Rent/ Mortgage : _____

Utilities : _____

Realty Taxes : _____

Auto Expenses : _____

Other Expenses : _____

Total : _____

Enclosed: (If any)

Mark (/)

1. A copy of current Asset Document
2. A Copy of Fixed Asset Document
3. A copy of Business Registration
4. A Copy of Entrepreneurial Course Attende
5. Processing Fee

DECLARATION

I understand that incomplete application is not considerable. I believe that all information given is true and correct.

Signature :

Date:

* Note : Please delete if not applicable

Completed form must be submitted to :

May Kee Brothers (Shoes) Sdn. Bhd.
No. 1.13 & 1.15,
Jln. Maju 3, Tmn. Maju
83000 Batu Pahat, Johor.

No. Tel: 07- 432 6800/ 7800
No. Fax: 07-432 6700
e-mail: modani@streamyx.com

Please forward any additional information on separate papers.