



# Preliminary Franchise Application

Name: \_\_\_\_\_

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

You may submit this application by:

Email: info@markpi.com

Fax: 614.737.2547

Mail: 4923 Dierker Rd // Columbus, Ohio 43220

You must submit a completed, signed, application to receive the Uniform Franchise Offering Circular.





# Mark Pi's

Concept: Asian Diner

Description: Chinese fast-casual diner offering speed, quality and value to meet America's need for dining convenience. The diner showcases trendy, contemporary, Asian décor.

"Mark Pi's" offers consumers quality fast food in a modern facility developed for high traffic locations. With a menu engineered for maximum profits and minimum development time, our concept will put you into business quickly.

Based on our site selection criteria, our development experts will identify locations that meet the requirements of a high traffic, quick turnover business.

Site Requirements:

Strip Center:

- End cap
- Drive-thru a plus
- Patio a plus
- 1,800 sq. feet

Freestanding:

- drive-thru
- 2,400 sq. feet.

Mall/Food Court:

- 800 sq. feet

General Site Criteria:

- great visibility
- daytime population 10,000+ within 1 mile
- population of 45,000+ within 1 mile
- population income level mid to upper

Estimated Initial Investment:

This will be provided in the UFOC upon receipt and review of your application. Costs will vary according to location and depending on volume performance of the restaurant.





# Franchise Application- Personal

Please mark the Mark Pi Franchise concept for which you are applying:

\_\_\_ Mark Pi's Asian Diner

As a potential Mark Pi franchisee, you need to complete this application and return it immediately. All of your detailed information will be held in the strictest confidence and neither party will be under any obligation as this is not a contract; it is merely an application to be considered for franchise. Please print plainly and complete the application in its entirety.

## PERSONAL

\_\_\_\_\_

Name: Last, First, Middle Initial

Social Security Number

Street Address

City, State, Zip

Phone: Day \_\_\_\_\_ Evening \_\_\_\_\_

Convenient time and place to contact you

Birth place \_\_\_\_\_ D.O.B, mm/dd/yy \_\_\_\_\_

Martial Status: \_\_single\_\_married \_\_divorced

Date of Marriage: \_\_\_\_\_

Spouse's Name

Spouse's Social Security Number

List names and ages of Children

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

## HEALTH

Date of last physical examination

Height \_\_\_\_\_ Weight \_\_\_\_\_

Describe any physical handicap, limitation, major illness, operation, or accident:

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

## INTERESTS

List civic, social, scholastic, or fraternal organizations you belong to:

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

List Sports, Hobbies, Recreational Interests:

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

## EDUCATION

Circle highest grade completed:

High school 1 2 3 4 College 1 2 3 4

Major

List name and location of high school(s)/ College(s) and dates attended:

\_\_\_\_\_  
Other Education (including correspondence)  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_





# Franchise Application- Personal

## BUSINESS OR SELF EMPLOYMENT HISTORY

1. Employment dates: From \_\_\_\_\_ To \_\_\_\_\_

Company Name \_\_\_\_\_ Division \_\_\_\_\_

Street Address, City \_\_\_\_\_

Phone Number \_\_\_\_\_

Final job title \_\_\_\_\_ Final annual compensation \_\_\_\_\_

Name of immediate superior \_\_\_\_\_

May we contact?  yes  no

Brief description of responsibilities and hours worked daily:  
\_\_\_\_\_  
\_\_\_\_\_

Reason for leaving: \_\_\_\_\_

2. Employment dates: From \_\_\_\_\_ To \_\_\_\_\_

Company Name \_\_\_\_\_ Division \_\_\_\_\_

Street Address, City \_\_\_\_\_

Phone Number \_\_\_\_\_

Final job title \_\_\_\_\_ Final annual compensation \_\_\_\_\_

Name of immediate superior \_\_\_\_\_

May we contact?  yes  no

Brief description of responsibilities and hours worked daily:  
\_\_\_\_\_  
\_\_\_\_\_

Reason for leaving: \_\_\_\_\_

3. Employment dates: From \_\_\_\_\_ To \_\_\_\_\_

Company Name \_\_\_\_\_ Division \_\_\_\_\_

Street Address, City \_\_\_\_\_

Phone Number \_\_\_\_\_

Final job title \_\_\_\_\_ Final annual compensation \_\_\_\_\_

Name of immediate superior \_\_\_\_\_

May we contact?  yes  no

Brief description of responsibilities and hours worked daily:  
\_\_\_\_\_  
\_\_\_\_\_

Reason for leaving: \_\_\_\_\_

\*Please attach additional places of employment on separate sheet.

Have you ever owned any other business not listed?  yes  no

If yes, name and location \_\_\_\_\_

Have you had any other previous restaurant experience?  yes  no

If yes, name and location \_\_\_\_\_

What current outside business interests do you have? \_\_\_\_\_

Have you ever been convicted of a crime, other than a traffic violation, or been found guilty in a court martial or been refused a bond or been involved in any legal action?  yes  no

If yes, outline circumstances, dates, and current disposition.  
\_\_\_\_\_  
\_\_\_\_\_





# Franchise Application- Financial

## FINANCIAL

Is your spouse employed? \_\_\_yes \_\_\_no

Type of work? \_\_\_\_\_

Would he or she work in your new business?  
\_\_\_ yes \_\_\_ no

Do you own \_\_\_ or rent \_\_\_\_\_ your home?  
(Other \_\_\_\_\_)

Monthly payment \_\_\_\_\_

Yrs lived at present address \_\_\_\_\_

No. of residences in past 5 years \_\_\_\_\_

Years lived in present city \_\_\_\_\_

Do you own a vehicle? \_\_\_ yes \_\_\_ no

If yes, please list make and year of each  
vehicle owned:

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

Driver's License No. \_\_\_\_\_ State \_\_\_\_\_

Do you have a financing source?

\_\_\_ yes \_\_\_ no

If yes, who? \_\_\_\_\_

How much capital do you have available to  
invest in a Mark Pi restaurant?

\_\_\_\_\_

## GENERAL

Will you be operating this business yourself?  
\_\_\_ yes \_\_\_ no

Will someone else operate this business with  
you? \_\_\_ yes \_\_\_ no

If so, who? \_\_\_\_\_

Why do you feel this individual is qualified to  
do so? \_\_\_\_\_

\_\_\_\_\_

Do you plan on having partners? \_\_\_yes \_\_\_no

If yes, we will need an application for each.

Do you have a preference as to area, or city?  
Where would you like to have your franchise  
located? \_\_\_ yes \_\_\_ no

List areas in order of preference:

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

If these areas are not available, would you  
consider any other cities?  
\_\_\_ yes \_\_\_ no if so, where? \_\_\_\_\_

Do you own land that might be a suitable  
site for a Mark Pi's concept?  
\_\_\_ yes \_\_\_ no if so, where? \_\_\_\_\_

If you are not currently in the restaurant  
business, why do you want to make a  
change to the restaurant business?

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

Why do you want to be a Mark Pi's  
franchisee?

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

Are you willing to spend as much as eight (8)  
weeks in Columbus working in one of our  
training stores? \_\_\_ yes \_\_\_ no

If your application is considered and  
approved, when would you want to open?

\_\_\_\_\_

How did you hear about us?

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





# Franchise Application- Financial

List each on next page as directed

Assets	Amount
Cash on hand and unrestricted in banks List on No. 1 ...	\$ _____
Stocks, Bonds, & Securities List on No. 2 ...	\$ _____
Real-Estate-Market Value List on No. 3 ...	\$ _____
Accts., Notes & Loans Receivable List on No. 4 ...	\$ _____
Personal Possessions - Market Value (automobiles, household furniture, etc.) ...	\$ _____
Other Assets List on No. 5 ...	\$ _____
<b>TOTAL ASSETS</b> ...	\$ _____

Liabilities	Amount
Notes Payable to Banks List on No. 1 ...	\$ _____
Mortgages Payable on Real Estate List on No. 3 ...	\$ _____
Accts., Notes & Loans Payable to Others List on No. 4 ...	\$ _____
Other Liabilities List on No. 5 ...	\$ _____
<b>TOTAL LIABILITIES</b> ...	\$ _____
<b>TOTAL NET WORTH</b> ...	\$ _____

Annual Income	Amount
Salary ...	\$ _____
Spouse's Salary ...	\$ _____
Bonus and Commissions ...	\$ _____
Interest and Dividends ...	\$ _____
Other Income (Itemize)	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
<b>TOTAL</b> ...	\$ _____

### General Information

Are you a cosigner, guarantor, or endorser on anyone else's obligation?  yes  no

If yes, explain.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

List any contingent liabilities not listed above, including leases.

### CREDIT REFERENCES

(List three references in full detail)

Company/City	Contact Person/Phone	Acct No/Amount Owned
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____





# Franchise Application- Financial

No. 1 BANKING ACTIVITY Include Bank's Name, City, Cash Assets, Loan Liabilities, Monthly Payments

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No. 2 STOCKS, BONDS, AND SECURITIES Include No. Shares of Stocks, Face Value of Bonds, Description, Present Market Value

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Are securities Pledges? YES \_\_\_\_\_ NO \_\_\_\_\_ Amount of Obligation \_\_\_\_\_

No. 3 REAL ESTATE Include Type of Property, Location, Original Cost, Market Value, Mortgages of Liens, Monthly Payment

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No. 4 ACCOUNTS, NOTES AND LOANS Receivable From/Payable to Others – Include Amount, Nature of Transaction, Receivables Due, Payables Due

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No. 5 OTHER ASSETS / LIABILITES Include Description, Estimated Cash Value, Amount of Liability

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Please include any additional information you feel would be helpful in evaluating your financial position and, if applicable, current business financial statements.

I hereby authorize you to make investigations of my credit, character, and ability, and to contact references and former employers in order to obtain personal information about me. I release all such persons working for or employed by Asian Concepts, Inc., or any of its subsidiaries, from any liability or damages that may incur as a result of such an inquiry or the furnishing of such information. I also certify that the information on this statement is correct.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Please sign, date, and return the financial franchise application forms.

