



## **Application and Confidential Questionnaire**

Send to:  
**Doug Kinney**  
**PO Box 176**  
**Southern Pines, NC 28388.**

or Fax to:  
**(910) 245 - 6597**

You have indicated an interest in purchasing a franchise for the development and operation of a Mega Media Xchange Store. The information requested from you in this document is for the exclusive use of XS Media Group, Inc., the Franchisor, in evaluating your qualifications for becoming a Mega Media Franchisee and undertaking the desired development and will otherwise be held in the strictest confidence. Unless we agree in writing to waive this requirement, you must provide all of the information requested before your Application will be considered.



## Franchise Qualification Questionnaire

### I. PERSONAL DATA

Your Name: \_\_\_\_\_ Age: \_\_\_\_\_

Spouse's Name: \_\_\_\_\_ Age: \_\_\_\_\_

Home Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_ How long: \_\_\_\_\_

Home Phone: (\_\_\_\_\_) \_\_\_\_\_ Best Time to Call: \_\_\_\_\_ AM / PM

Work Phone: (\_\_\_\_\_) \_\_\_\_\_ Best Time to Call: \_\_\_\_\_ AM / PM

Cell Phone (\_\_\_\_\_) \_\_\_\_\_ FAX Number: (\_\_\_\_\_) \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Number of Children/Dependents: \_\_\_\_\_

Education: High School, College, Graduate Degree, Other

\_\_\_\_\_

Activities, Hobbies, Interests:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Area preferred for the location of a store? (City/State):

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

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## Franchise Qualification Questionnaire

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### II. BUSINESS DATA

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#### Your Current Employer

Employer's Name \_\_\_\_\_

Describe your duties and responsibilities:

\_\_\_\_\_

How long have you been working for this Employer? \_\_\_\_\_

How long have you been working in this field? \_\_\_\_\_

Current annual compensation consists of? \$ \_\_\_\_\_

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#### Your Spouse's Current Employer

Employer's Name \_\_\_\_\_

Describe your duties and responsibilities:

\_\_\_\_\_

How long have you been working for this Employer? \_\_\_\_\_

How long have you been working in this field? \_\_\_\_\_

Current annual compensation consists of? \$ \_\_\_\_\_

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Have you ever owned your own business?

Yes / No - If Yes, give details:

\_\_\_\_\_

How long have you been looking for a business?

\_\_\_\_\_

What other businesses have you investigated?

\_\_\_\_\_

What appeals to you about the Mega Media Xchange business?

\_\_\_\_\_

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## Franchise Qualification Questionnaire

### III. FINANCIAL DATA

*You may attach a current Financial Statement instead of completing this section.*

#### ASSETS

Cash on Hand & in Banks \$ \_\_\_\_\_

Savings Funds/Certificates \$ \_\_\_\_\_

Stocks, Bonds, & Securities \$ \_\_\_\_\_

Retirement Plans, IRA's, 401Ks \$ \_\_\_\_\_

Residence (Market Value) \$ \_\_\_\_\_

Real Estate (Market Value) \$ \_\_\_\_\_

Autos (Market Value) \$ \_\_\_\_\_

Insurance Cash Value \$ \_\_\_\_\_

Money Due You \$ \_\_\_\_\_

Personal Property \$ \_\_\_\_\_

Other Assets (describe) \$ \_\_\_\_\_

**TOTAL ASSETS** \$ \_\_\_\_\_

#### LIABILITIES

Notes Payable \$ \_\_\_\_\_

Revolving A/C Balances \$ \_\_\_\_\_

Charge Card Balances \$ \_\_\_\_\_

Mortgage(s) on Residence \$ \_\_\_\_\_

Other Real Estate Debt \$ \_\_\_\_\_

Auto Loans \$ \_\_\_\_\_

Other Debts (describe) \$ \_\_\_\_\_

\_\_\_\_\_ \$ \_\_\_\_\_

\_\_\_\_\_ \$ \_\_\_\_\_

\_\_\_\_\_ \$ \_\_\_\_\_

**TOTAL LIABILITIES** \$ \_\_\_\_\_

NET WORTH (total assets minus total liabilities): \$ \_\_\_\_\_

Cash Available for Investment in a Business: \$ \_\_\_\_\_

Source: \_\_\_\_\_

If additional funds are needed to start a business, are they available to you?

Yes / No - If Yes, give details:

\_\_\_\_\_

Do you plan to have a partner?

Yes / No - If Yes, give details:

\_\_\_\_\_

Do you plan to have investors?

Yes / No - If Yes, give details:

\_\_\_\_\_

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## Franchise Qualification Questionnaire

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Will either be active in the business?

Yes / No - If Yes, give details:

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Do you have sources of income other than salary?

Yes / No - If Yes, give details:

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**The following information is requested because any affirmative answers may have a direct bearing on your ability to obtain financing for starting a new business.**

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Have you or your spouse ever been involved in a personal or business bankruptcy? Yes / No - If Yes, give details:

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Have you or your spouse ever been convicted of a crime?

Yes / No - If Yes, give details:

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Are you or your spouse currently under any type of criminal investigation?

Yes / No - If Yes, give details:

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Are you or your spouse currently involved in any pending civil lawsuits?

Yes / No - If Yes, give details:

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Are you or your spouse subject to any civil judgments?

Yes / No - If Yes, give details:

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**Please fully explain any affirmative answers. If additional space is required, use the back of the page or attach an additional page.**

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## Franchise Qualification Questionnaire

### IV. BUSINESS OWNERSHIP PREFERENCES

Are you seeking an individual franchise or multiple units? \_\_\_\_\_

When would you like your first franchise to open? \_\_\_\_\_

Would you be involved on a full-time or part-time basis? \_\_\_\_\_

What attracts you to owning your own business?

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What have you liked the most and the least about past jobs?

Most: \_\_\_\_\_

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Least: \_\_\_\_\_

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What are your strengths and weaknesses related to managing a business?

Strengths: \_\_\_\_\_

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Weaknesses: \_\_\_\_\_

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What are your major questions or concerns about business ownership?

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## Franchise Qualification Questionnaire

Would you like to have a business where you (check all that apply):  Consult  
 Sell  Work with Customers  Manage Employees  Work with Computers  
 Marketing  Call on Other Businesses  Manufacture Products

What hours of the day or week do you prefer to work? \_\_\_\_\_

How would you rate your sales interest or ability?  
 High  Medium  Low

How would you rate your people management interest or abilities?  
 High  Medium  Low

How would you rate the importance of status (what other people think) in the selection of a business?  
 High  Medium  Low

How important is it to be able to grow additional units?  
 High  Medium  Low

How important is it to make a meaningful contribution with your business?  
 High  Medium  Low

What else should we know about you that will help us to understand whether this business is the right fit for you?

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**All of the information stated herein is a true and correct representation of my personal and financial condition as of the date that I am providing it to you. It is understood that the purpose of this questionnaire is to compile general information and that it is in no way binding upon either party. The information is considered confidential and will be used for internal purposes in evaluating your suitability and interest in this opportunity, only. THIS IS NOT A CONTRACT.**

**Signature**

**Date**

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