



## FRANCHISE EVALUATION FORM

The purpose of this Report is for you to provide us general information to help evaluate your qualifications for BAYO Franchise. This is not an application. If you qualify and a mutual interest develops, we will request additional information at that time. **EACH proposed partner should complete this form.** Please print or type your answers. You may attach additional pages if necessary to provide complete answers. Please answer all questions.

### Personal Data

Last Name	First Name	Middle Name	T.I.N.	SSS Number
Date of Application	Birth Date	Age	Tel. No.	Fax. No.
Current Address / Zip code			Years of Residence	
Previous Address			Years of Residence	
Height	Weight	Single (Check one)	Married	Widowed
Full Name of Spouse			Occupation of Spouse	
Name and Ages of Dependent, Children				

### Applicant's Franchise Plan

Will the franchise be owned and operated by your self or a group?
Please explain fully.
Amount of capital available for business.
Describe fully
Territory for which application made
Would you consider any other area?
What area(s)?

## Business Experience

Have you been in business your self?		
Name and address of employer		
Position / Title / Duties		
Dates of Employment (from / / to / / )	Person Reporting Directly To/Title	
Reason for Separation	Starting Salary	Ending Salary
Have you been in business your self?		
Name and address of employer		
Position / Title / Duties		
Dates of Employment (from / / to / / )	Person Reporting Directly To/Title	
Reason for Separation	Starting Salary	Ending Salary
Have you been in business your self?		
Name and address of employer		
Position / Title / Duties		
Dates of Employment (from / / to / / )	Person Reporting Directly To/Title	
Reason for Separation	Starting Salary	Ending Salary

## Education

Name of School	Dates of Attendance	Course Attended / Graduated
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## PHYSICAL CONDITION

General Physical Condition	Date of Last Physical Exam
Attending Physician	
List of Any Physical Impairments or Chronic Illnesses Which May Preclude Certain Types of Activities	
Please explain	

## Income

Year _____	
Earned (salary, commissions, fees, etc.)	Php _____
Interests & Dividends Received	Php _____
Rents Received	Php _____
Other Income	
_____	Php _____
_____	Php _____
_____	Php _____
_____	Php _____
Gross Income	Php _____

## Reference

Please list three professional and character references (Name-Address-Phone No.-Fax No.)	
1.	
2.	
3.	
Please list Credit References (Name-Address-Phone No.-Fax No.)	
1.	
2.	
3.	
Bank References (Name-Address-Checking Account/Saving Account/Others)	
1.	
2.	
3.	

## Contingencies

Do you have any contingent liabilities? _____ Are any of your assets pledged	
If so, please enumerate _____	
_____	Have you ever taken bankruptcy?
_____	
_____	Are you defendant in any law suits
_____	Or legal action? _____

## Confidential Financial Statement

(Please answer all questions using "no" or "none" where necessary. Attach additional sheets as needed.)

### Assets

Cash on Hand (uninterested in banks)
Accounts and Loans Receivables
Notes Receivables, Not Discounted
Notes Receivables, Discounted with banks, Finance companies, etc.
Life Insurance, Cash Surrender Value (Do not deduct loans)
Other Stocks and Bonds
Real Estate
Automobiles, Registered in own Name
Other Assets, Enumerate

### Liabilities and Net Worth

Notes Payable to Banks, Unsecured Direct Borrowings Only
Notes Payable to Banks, Secured Direct Borrowings Only
Notes Receivables, Discounted with banks, financial institutions, etc.
Notes Payable to Others, Unsecured
Notes Payable to Others, Secured
Loans Against Life Insurance
Accounts Payable
Interest Payable
Taxes and Assessments Payable
Mortgages Payable on Real Estate
Other Liabilities (Itemize)
Net Worth (In Php)
Total Liabilities and Net Worth (In Php)

## SUPPLEMENTARY SCHEDULES

THIS IS NOT A CONTRACT. SUPPLYING OR COMPLETING THIS FORM INCURS NO OBLIGATION ON EITHER PARTY.

No. 1. Banking Relations (A list of my bank accounts, including saving, and loans)

Name and Location of Bank	Cash Balance	Amount of Loan	Maturity of Loans	How Endorsed, Guaranteed, or Secured

No. 2. Accounts, Loans, and Notes Receivables (A list of the largest amounts owing to me)

Name and Address of Debtor	Amount Owing	Age of Debt	Description Of Nature of Debt	Description of Security Hold	Expected Date Of Payment

No. 3. Life Insurance

Name of Persons Insured	Name Of Beneficiary	Name of Insurance Company	Type of Policy	Face Amount of Policy	Total Cash Surrender Value	Total Loans Against Policy	Amount of Yearly Premium	Is Policy Assigned?

No. 4. Other Stocks and Bonds

Face Value (Bonds) No. of shares (Stocks)	Description of Security	Registered in Name of	Cost	Present Market Value	Income Received Last Year	To Whom Pledged

No. 5. The legal equitable title to all the real estate listed on this statement is solely in the name of the undersigned, except as follows:

Description or Address	Dimensions	Improvements Consist of	Mortgages	Due Dates and Amounts of	Assessed Values	Present Market	Unpaid Taxes

				Payments		Value	Year/ Amount

In submitting the foregoing statement the undersigned guarantees its accuracy with the intent that it be relied upon in granting a franchise and extending credit to the undersigned and warrants that he/she has not knowingly withheld any information that might affect his/her credit risk, and the undersigned expressly agrees to notify BAYO Franchise Corporation immediately in writing of any material change in his/her financial condition whether application further credit in made or not and in the absence of such written notice, it is expressly agreed that BAYO Franchise Corporation in grating a franchise or credit may rely on this statement as having the same force and effect as if delivered upon the date additional credit is requested or existing credit is extended or continued.

The undersigned certifies that each part of the application and financial statement hereof and the information inserted herein has been carefully read and is true and correct.

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

Signed: \_\_\_\_\_

**BAYO FRANCHISE CORPORATION**  
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