



FRANCHISEE APPLICATION FORM

Thank you for your desire in acquiring “The Hot & Roll Franchise”

Disclaimer

This is not a Disclosure Document. In preparing this document we have used our best endeavours to ensure that the information contained is true and accurate, but we accept no responsibility and disclaim all liability in respect of any errors, omissions, inaccuracies or misstatements contained in this document. Prospective franchisees should make their own independent inquiries before entering into a franchise agreement.

The attached application is provided to you (“the Applicant”) by HOT & ROLL Holdings Sdn Bhd *formerly known as Berkat Semangat Sdn Bhd* in order to positively consider you as a Hot & Roll Franchisee.

It is fundamental that the information you provide is true and accurate as the information provided will be used in our evaluation process.

You may be asked to show evidence of your financial situation.

YOUR PREFERRED LOCATION

Location:	
City / State:	
Country:	



APPLICANT DETAILS

First Name:		Tel No. (House):	
Surname:		Tel No. (Mobile):	
Address:		Fax No.:	
Postcode:		NRIC:	
		Date of Birth:	
Email:	Marital Status: <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Divorced		Nationality:
Name of Spouse:		NRIC:	
Highest Education:			
Name of College/ School/ Universities:			
1.			
2.			
3.			
Present Occupation			
Position:		Date Employed:	
Company:			
Past Occupation 1			
Position:		Date Employed:	
Company:			
Past Occupation 2			
Position:		Date Employed:	
Company:			



If you are a Director of any Company, please list:		
	Company Name	Registration No.
1.		
2.		
3.		
Options of Franchise Packages:		
<input type="checkbox"/> Package 1 (<100 sq.ft. - Crispy Wrap & Paratha Wrap) <input type="checkbox"/> Package 2 (>100 sq.ft. - Crispy Wrap, Paratha Wrap, Chapatti Wrap)		
Financial Capabilities:		Financial Options: (Currency) <u>Amount</u>
<input type="checkbox"/> Strong <input type="checkbox"/> Good <input type="checkbox"/> Average <input type="checkbox"/> Poor		<input type="checkbox"/> Cash: () _____ <input type="checkbox"/> Loan: () _____
Date:		Signature:
Please fax/courier/email the complete form to:	Franchise Department HOT & ROLL Holdings Sdn. Bhd. (408595-H) Blok 2A, Level 15, Suite 15-1, Plaza Sentral, Jalan Stesen Sentral 5, 50470 Kuala Lumpur, Malaysia	T: +603 2261 4222/ 4555 F: +603 2261 4777 E: general@hotandroll.com W: www.hotandroll.com