



Completion of this confidential profile does not obligate you or the company in any manner, but will help us to determine mutual compatibility and financial suitability. Please return the completed profile in the enclosed business reply envelope to:

**Hartz Chicken (Malaysia) Sdn. Bhd.,  
Lot 595, Section 62, Lorong Blacksmith 2B,  
Jalan Blacksmith,  
93100 Kuching, Sarawak, Malaysia**

**I. Personal**

Name.....

Spouse/Co-applicant.....

Address.....

City.....State.....Post Code..... Own  Rent

Years at this address.....

Home phone..... Work phone.....

Present occupation.....

Company address.....

City.....State.....Post Code.....

**Physical**

Applicant Height.....ft.....in Weight.....kilogram Physical limitations.....

Spouse Height.....ft.....in Weight.....kilogram Physical limitations.....

**Birth record**

Birthplace City or county State or country Date of birth Age Country of citizenship

Applicant .....

Spouse .....

**Education**

Last high school.....

Circle last grade completed **8 9 10 11 12** Did you graduate?.....Date of leaving or graduation.....

College or University and address(es) .....

Major subjects.....Degrees obtained.....

Number of years completed.....Did you graduate?.....Date of leaving or graduation.....

**II. Business History**

(start with latest employment)

Employer	Type of business	Position	Annual income
			from..... to.....
			from..... to.....
			from..... to.....
			from..... to.....

Briefly outline experience in food service.....  
.....  
.....

What geographical area interests you?.....  
.....

If franchise not available in area of interest, will you consider another area?.....

Capital available for investment RM.....

Sources and amounts of additional capital.....

**III. Operational Plan**

Will your **Hartz Restaurant** be operated as

Corporation?.....Partnership?.....Single proprietorship?.....

If other individuals will participate in this venture, please complete. (Each participant must fill out this form.)

Name	Active	Investor only
.....		
.....		
.....		

When could you be ready to start your training?.....

Name of attorney.....

Address.....

How did you become interested in **Hartz Buffet & Take Out** franchising program?.....  
.....

Please give names of three personal references (do not list relatives or former employers)

Name	Address	Phone
.....	.....	.....
.....	.....	.....
.....	.....	.....

The applicant for franchise agrees that all information relating to methods of operating restaurants, and all building plans, equipment and supplies, identification of preferred suppliers, costs and profit information, and other information relating to the business interest of **Hartz Buffet & Take Out** franchises, which has been or will be revealed to me in connection with my application for franchise, is trade secret, proprietary and /or confidential with **Hartz Buffet & Take Out**, and I further agree that such information is received by me in confidence, and I agree that I shall not disclose to others or use for my own benefit or for the benefit of third parties any such information, without the written consent of **Hartz Buffet & Take Out**. This obligation shall continue so long as such knowledge remains legally protectable as to persons receiving it in a confidential relationship.

I further agree that all written materials, drawings, instruments or documents of any type which I may receive from **Hartz Buffet & Take Out** shall remain the property of **Hartz Buffet & Take Out** and such documents are understood to be loaned for limited purposes only. Such documents may not be reproduced in whole or part, and shall be returned to **Hartz Buffet & Take Out** upon request and in any event upon completion of the use for which loaned.

And I agree that I shall not, in any event, contest or deny the validity of the trademark or tradename rights in the marks of **Hartz Buffet & Take Out**, used by **Hartz Buffet & Take Out**, or marks confusingly similar thereto, and I shall not use any such marks except under franchise.

Signature.....Date.....



**No. 2 Accounts, Loans & Notes Receivable**

Name & address of debtor	Amount owing	Description of nature of debts	Date payment due
.....	.....	.....	.....
.....	.....	.....	.....
.....	.....	.....	.....
.....	.....	.....	.....

**No. 3 Life Insurance**

Person insured	Beneficiary	Insurance company of policy	Policy type	Face amount	Cash surrender value	Total loans against policy	Annual premium	Is policy assigned?
.....	.....	.....	.....	.....	.....	.....	.....	.....
.....	.....	.....	.....	.....	.....	.....	.....	.....
.....	.....	.....	.....	.....	.....	.....	.....	.....
.....	.....	.....	.....	.....	.....	.....	.....	.....

**No. 4 Stocks, Bonds & Government Securities**

Description of security	Number of shares (stocks) or face value (bonds)	Present market value	Income received last year	Are securities pledged?
.....	.....	.....	.....	.....
.....	.....	.....	.....	.....
.....	.....	.....	.....	.....
.....	.....	.....	.....	.....

**No. 5 Real Estate**

Location or address	Dimension or acreage	Type of property	Mortgages or liens	Market value	Amount of payment	Unpaid taxes year amount
.....	.....	.....	.....	.....	.....	.....
.....	.....	.....	.....	.....	.....	.....
.....	.....	.....	.....	.....	.....	.....
.....	.....	.....	.....	.....	.....	.....

**No. 6 Credit References**

Company name	Address	Phone	Charge account number	Contact person
.....	.....	.....	.....	.....
.....	.....	.....	.....	.....
.....	.....	.....	.....	.....
.....	.....	.....	.....	.....

Please answer all questions using "Not Applicable" or "None" if necessary.

In connection with my application for franchise with you, I understand that investigative background inquiries may be made on myself including possibly consumer (credit), criminal, driving and other reports. These reports will likely include information as to my character, work habits, performance and experience along with reasons for termination of past employment from previous employers. Further, I understand that you may be requesting information from various federal, state and other agencies that maintain records concerning my past activities relating to my driving, credit, criminal, civil and other experiences as well as claims involving me in the files of insurance companies.

I authorize, without reservation, any party or agency contacted by Hartz Buffet & Take Out or its agents or attorneys to furnish the above mentioned information.

Signature of Applicant..... Date.....

Signature of Spouse/Co-applicant..... Date.....