

Failure to answer any question may delay action.

Franchise Application

NOTE: This is not an offer to sell a franchise. Franchise offers are made by FDD only. Top Pot is not presently offering franchises in the states of California, Hawaii, Illinois, Indiana, Maryland, Michigan, Minnesota, New York, North Dakota, Rhode Island, South Dakota, Virginia, Washington, and Wisconsin.

Important

The filing of this application does NOT obligate the applicant to become a Franchise of Doughnut Corporation of America nor does it obligate us to offer you a Franchise. Each partner or shareholder must complete this application.

City	State	Zipcode	
Address			
Email Address			
Telephone ()			
Date of Birth			
U.S. Citizen D Yes D No			
Name			
Date			

Business Experience			
☐ Self Employed ☐ Employed By			
Company Address			
City	State	Zipcode	
Position			
How long have you held this position?			
Previous Experience Summary			
Personal Information			
Income from present occupation \$			
Other Income\$		D Own Home	D Rent
Estimated net worth \$			
Estimated cash available for investment \$			

Do you have a financial source? Letter of credit? Lending institution name _____ Personal Bank(s) Contact name _____ Telephone __(____ **Operational Plan** Do you intend to operate the business yourself? $\ \ \, D$ Yes $\ \, D$ No If not, do you have an operator in mind? D Yes D No Please list any franchises that you have been involved in

Financial Data

Confidential Financial Statement

The following statement of financial condition is accurate as of \underline{I} (Date) and submitted for the purpose of aquiring a Top Pot Doughnuts Franchise.

Round amounts to the nearest Hundred, and write "NO" or "NONE" where necessary to complete the application.

Assets	\$
Cash on hand and unrestricted in Banks	\$
U.S. Government Securities	\$
Accounts and Loans Receivable	\$
Notes Receivable, Not Discounted	\$
Notes Receivable, 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 (Itemize)	
	\$
	\$
	\$
Total Assets	\$

Notes Payable to Banks. Unsecured Direct		
porrowings only	\$	
Notes Develo to Denks Conumed		
Notes Payable to Banks. Secured Direct Borrowing	\$	
Notes Receivable, Discounted with banks,		
finance companies, etc.	\$	
Notes Payable to Others, Unsecured	\$	
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Notes Payable to Others, Secured	\$	
Loans against Life Insurance	\$	
Accounts Payable	\$	
Interest Payable	\$	
Taxes and Assessments Payable	\$	
Mortgage Payable on Real Estate	\$	
Other Liabilities (Itemize)		
	\$	
	\$	
	\$	
Net Worth	\$	

Do you have any contingent liabilities? If so, please itemize	
Are any of your assets pledged?	
Are you a defendant in any suits or legal actions?	
Have you ever taken bankruptcy?	

Accounts, Loans a	nd Notes	Receiv	vable (A list of l	largest amounts ow	ing to me.)
Name and Address of Debtor	Amount Owing	Age of Debt	Description of Debt	Description of Security	Payment Date

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

Real Estate

The legal equitable title to all the real estate listed in this statement is solely in the name of the under signed, except as follows:

Description or Street No.	Mortgages or Liens	Amount of payments & Due Dates	Assessed Value	Present Market	Unpaid Taxes	
				Value	Year	Amt

In submitting the foregoing application and statement 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 or she has not knowingly withheld any information that might effect his or her credit risk, and the undersigned expressely agrees to notify TOP POT LLC. immediately in writing of any material change in his or her financial condition whether application for further review is made or not, and in the abscence of such written notice, it is expressly agreed that TOP POT LLC. in granting a franchise or credit may rely on this statement having the same force and effect as if delivered upon the date additional credit is requested or existing credit is extended or continued.

The acceptance of this Franchise Application by TOP POT LLC. should not be considered a grant of a franchise. We grant franchises only by executing a written franchise agreement.

Consistent with the USA PATRIOT Act and other related anti-terrorist legislation, I understand that I will not be approved to purchase a franchise if I have ever been a suspected terrorist or associated directly or indirectly with terrorist activities, as further described at the internet web site www.usa.treas.gov/office/enforcement/ofac. I agree to comply with or to assist TOP POT LLC. to the fullest extent possible in TOP POT LLC. efforts to comply with the above law. As part of the application and approval process, I understand that certain background investigations may be conducted. I authorize TOP POT LLC. or its agents to obtain a Consumer Report on me. This report may include information as to my character, general reputation, personal characteristics and mode of living, discerned through employment and education verifications, personal driving history, including any traffic citations; a social security number verification; present and former addresses; criminal and civic history/records and any other public record. This report may be compiled with information obtained from credit bureaus, court record repositories. departments of motor vehicles, past or present employers, educational institutions, governmental occupational licensing or registration entities, business or personal references and any other sources. Law enforcement and other government agencies are authorized to release to TOP POT LLC. or its agents, any existing personal information regarding myself relative to the conviction or arrest for any criminal act. In addition, I authorize all appropriate individuals, companies, institutions or agencies to release information TOP POT LLC. deems necessary to complete the the investigative consumer report.

I understand that a photocopy of this authorization would be accepted with the same authority as the original.

Full Legal Name: (Print)						
First	Middle	Last				
1 1						
Date	Signature					

Please complete the entire application. Fax or Scan and email to:

Email: franchise@toppotdoughnuts.com

Fax: (206) 443-7732