



Corporate Office : Old World Hospitality Pvt. Ltd., Hotel Broadway, 4/15A Asaf Ali Road, New Delhi - 110002
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FRANCHISE APPLICATION

PERSONAL

Name _____

Address _____

City _____ State _____

Country _____ PIN/ZIP _____

Phone _____ Fax _____

E mail _____



ACADEMIC

Qualification

Duration

College _____

University _____

Technical _____

Others _____

WORK EXPERIENCE

Duration Position Companies Name Nature of Business

Have you ever been in Service/Hospitality Industry?

Yes

No

If yes, please give details _____

What do you feel would be the key ingredient for a successful Chor Bizarre _____

FINANCE

No of outlets interested in _____

Amount of Capital available for investment _____

Is the capital amount available owned or financed? _____

If financed, what will be the proportion? _____

Is there any other source of income? _____

If yes, then please give details _____

Have you ever been involved in franchise business before? _____

If Yes, please give details _____

If Not, details of your other business _____

Will it be in own venture or in partnership? Own Partnership

If partnership then how many partners? _____

How soon can you start if given franchise? _____

Do you have any site readily available? _____

If yes then please give details on Property Fact Sheet

PROPERTY FACT SHEET

Type of property Mall High Street Any other

Address _____

Property commercially approved by local authorities Yes No

Area (in sq ft) Carpet _____
Super _____

Floors available for development Basement Ground First

Number of openings Front opening Two side Corner location

Rear Entry Yes No

Name of the registered owner(s) of the property

Owner 1 _____

Owner 2 _____

Property Title? Self Owned Rented

Specify duration of lease _____

What is the frontage of the site? _____ ft.

Is parking available? Yes No

Specify sanctioned electricity load _____ KVA

Potable water available Yes No

Does the property have proper water storage? Yes No

If yes, please specify _____ litres

Legal space for DG and stabilizer set Yes No

If yes, please specify where? _____

Does the property has air conditioning? Yes No

If yes, please specify tonnage and type _____

Does the property has power backup? Yes No

If yes, please specify the load _____

Does the property has toilets? Yes No

Distance & name of Main road/accessibility/visibilty? _____

Distance & name of the nearest educational institute _____

Distance & name of the nearest mall/cinema hall _____

Distance & name of the nearest retail/business area _____

Any other information which may be important for the proposal _____

PERSONAL REFERENCES

S.No	Name	Address & Phone	Occupation	Years of acquaintance
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1.	_____	_____	_____	_____
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2.	_____	_____	_____	_____
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Source from where you learnt of Chor Bizarre expansion plans _____

I hereby declare that to the best of knowledge and belief, the above statements and particulars are true and complete. I also authorize you to make any enquiries you consider necessary in connection with this application. I am aware that, should this application be refused, no reason need to be given.

I understand that any misrepresentation of factual information requested on this application form may be a cause for removal from Chor Bizarre's franchise system.

(Applicant's signature)

Name in block letters _____ Date _____