



# SLICES PIZZA JOINT FRANCHISE APPLICATION

## Personal Data

Name (First, Middle, Last) \_\_\_\_\_

Social Security # \_\_\_\_\_

Home Address: \_\_\_\_\_  
\_\_\_\_\_

City, State, Zip: \_\_\_\_\_

How long have you lived there? \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_ Email \_\_\_\_\_

Business Phone \_\_\_\_\_ Fax \_\_\_\_\_

Date of Birth \_\_\_\_\_ Place of Birth \_\_\_\_\_ Marital Status \_\_\_\_\_

Spouse's Name \_\_\_\_\_ Spouse's Occupation \_\_\_\_\_

Children Name	Age

Previous Address(es) in last ten years:

Address (including city, state and zip code)	How long?

Are you a US Citizen? \_\_\_\_ Yes \_\_\_\_ No

If not, what Country? \_\_\_\_\_



## **Personal References (Provide at Least Three)**

(1) Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Home Address: \_\_\_\_\_  
\_\_\_\_\_

City, State, Zip: \_\_\_\_\_

(2) Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Home Address: \_\_\_\_\_  
\_\_\_\_\_

City, State, Zip: \_\_\_\_\_

(3) Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Home Address: \_\_\_\_\_  
\_\_\_\_\_

City, State, Zip: \_\_\_\_\_

## **Education**

High School \_\_\_\_\_ Years Completed \_\_\_\_\_

Degree earned: \_\_\_\_\_

Name of College \_\_\_\_\_ Years Completed \_\_\_\_\_

Degree earned: \_\_\_\_\_

Name of College \_\_\_\_\_ Years Completed \_\_\_\_\_

Degree earned: \_\_\_\_\_

Additional sales, management or retail training (including dates: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**[PLEASE ATTACH A SEPARATE SHEET IF NECESSARY TO COMPLETE THIS SECTION]**



**Employment History for Last 10 Years**  
**(Beginning with the Most Recent)**

Company Name \_\_\_\_\_ From \_\_\_\_\_ to \_\_\_\_\_

May we contact this employer? \_\_\_Yes \_\_\_ No

Contact Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Type of Business \_\_\_\_\_ # of Employees Supervised \_\_\_\_\_

Describe Responsibilities \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Company Name \_\_\_\_\_ From \_\_\_\_\_ to \_\_\_\_\_

May we contact this employer? \_\_\_Yes \_\_\_ No

Contact Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Type of Business \_\_\_\_\_ # of Employees Supervised \_\_\_\_\_

Describe Responsibilities \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Company Name \_\_\_\_\_ From \_\_\_\_\_ to \_\_\_\_\_

May we contact this employer? \_\_\_Yes \_\_\_ No

Contact Name \_\_\_\_\_ Phone \_\_\_\_\_



Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Type of Business \_\_\_\_\_ # of Employees Supervised \_\_\_\_\_

Describe Responsibilities \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

[PLEASE ATTACH A SEPARATE SHEET IF NECESSARY TO COMPLETE THIS SECTION]

**PERSONAL FINANCIAL STATEMENT**

<b>Assets</b>	
Cash on hand and in banks \$	_____
U.S. government securities \$	_____
Trade accounts and loans receivable \$	_____
Notes receivable – secured and unsecured \$	_____
Life insurance – cash surrender value \$	_____
Stocks and bonds – marketable and non-marketable \$	_____
Real estate \$	_____
Automobiles – market value \$	_____
Other assets, property or investments (itemize below)	
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
TOTAL ASSETS \$	_____
<b>Annual Sources of Income</b>	
Salary \$	_____
Bonus and commissions \$	_____



Dividends and interest \$ _____
Real estate income \$ _____
Business profession income \$ _____
Other income (itemize below)
_____ \$ _____
_____ \$ _____
_____ \$ _____
_____ \$ _____
<b>TOTAL ANNUAL INCOME \$ _____</b>
<b>Liabilities</b>
Notes payable to banks – secured and unsecured \$ _____
Notes, loans, advances, accounts payable to others \$ _____
Credit card debt \$ _____
Loans against life insurance \$ _____
Property taxes and assessments payable \$ _____
Mortgages payable on real estate \$ _____
Liens on real estate \$ _____
Federal and state taxes on current income \$ _____
Other debts (itemize below)
_____ \$ _____
_____ \$ _____
_____ \$ _____
_____ \$ _____
_____ \$ _____
_____ \$ _____
_____ \$ _____
_____ \$ _____
_____ \$ _____
<b>TOTAL LIABILITIES \$ _____</b>
<b>Net Worth</b>
<b>Total assets \$ _____</b>
<b>Less total liabilities \$ _____</b>
<b>Net worth \$ _____</b>



## Business Data

How did you learn about the Slices Pizza Joint franchise program? \_\_\_\_\_

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Do you now operate or have you had experience in operating a retail business? \_\_\_Yes \_\_\_ No If yes, please explain.

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Do you intend to devote yourself full-time to the day-to-day operation of a Slices Pizza Joint franchise? \_\_\_Yes \_\_\_ No. *If not, provide explanation and details about your operating partner.*

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Have you (and, if applicable, any parties, officers directors or shareholders): been convicted or pled nolo contendere to a felony, subject to registration as a sex offender; subject to or convicted of any administrative, criminal or civil action alleging a violation of any franchise law; been found liable in any action alleging fraud, embezzlement, fraudulent conversion, restraint of trade, unfair or deceptive practices, misappropriation of property or comparable allegations? \_\_\_Yes \_\_\_ No. *If yes, please explain.*

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Have you (and, if applicable, any partners, officers, directors or shareholders) ever been adjudged bankrupt or reorganized due to insolvency, or been a principal officer of any company or a partner in any partnership that was adjudged bankrupt or reorganized due to insolvency? \_\_\_Yes \_\_\_ No. *If yes, explain on an additional information sheet. If yes, please explain.*

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Is there anything else you think we should know? \_\_\_Yes \_\_\_ No. *If yes, please explain.*

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Will your franchise investment come from your own capital? \_\_\_Yes \_\_\_ No

Geographical Location Preference.

First Choice \_\_\_\_\_

Second Choice \_\_\_\_\_

Third Choice \_\_\_\_\_

### **Authorization for Release of Personal Information**

I hereby attest to the accuracy of the personal financial statements contained in this confidential application. I authorize BackBay Pizza Group LLC or its agents to verify the data submitted, to obtain a consumer credit report and to make such additional credit, background or character confirmations which it deems necessary or advisable. In connection with these financial and background investigations, I authorize BackBay Pizza Group LLC or its agents to contact present or past employers, schools, financial institutions, law enforcement agencies and any other person, firm, corporation or source. I authorize any such source to provide BackBay Pizza Group LLC or its agents any and all information concerning me, and I hereby release any such source and its agents and employees from all liability for providing this information. I understand such reports may contain information concerning my education, employment, work habits, character or skill, criminal and credit history. I authorize that a photocopy or facsimile of this document may be accepted with the same authority as the original. BackBay Pizza Group LLC agrees to maintain in a confidential manner and restrict the use of any information contained or obtained in connection with this application for a Slices Pizza Joint franchise. I authorize BackBay Pizza Group LLC to release to prospective financing sources any information concerning me that may be requested by them.

Signature of applicant \_\_\_\_\_

Date \_\_\_\_\_

After completing the entire application, please email and/or mail it to:

BACKBAY PIZZA GROUP LLC  
11 East 6<sup>th</sup> Street  
Tempe, Arizona 85281  
[roddb@slicejoint.com](mailto:roddb@slicejoint.com)  
(480)966-4681

**APPLICATIONS THAT ARE NOT SIGNED CANNOT BE PROCESSED**  
**This is not a franchise offering. The franchise offering is made by prospectus only.**

