General Information

How did you become interested in our franchise?

Geographic preference _____

How much capital are you and/or your investment group willing to invest? _____

Do you currently have a source of financing?

I authorize investigation (including the preparation of credit reports) of all statements contained herein, and the financial information disclosed herein, and release all parties from all liability for any damage that may result from furnishing any information to you.

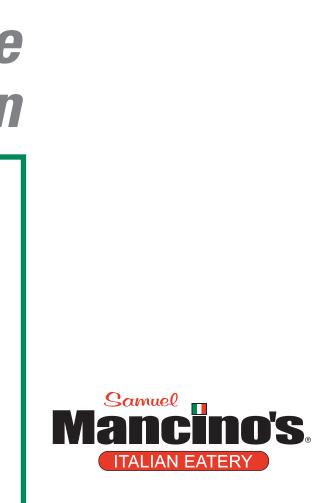
Your Signature _____

Additional information that may be helpful _____



Nu-Ventures, Inc. 5228 Lovers Lane, Suite 102 Portage, MI 49002 Office: 269.226.4400

Franchise Application



To determine mutual compatibility and financial responsibility, we ask you fill out this form for careful evaluation by our management. The information supplied by you will be held in the strictest confidence. The submission of this form does not constitute an agreement by either party and is purely for information purposes. Thank you very much.

Confidential Application

Office Phone
Cell Phone

Personal Information

Date of Birth		_ Marital Status	_ Number of Dep	endents
Do you own your home? _				
Social Security Number				
Spouse's Name and Occup				
Education (Highest Level A	ttained)			
List 3 Character Reference	S			
Name	Address		Occupation	
Employment during last 10	years (List prese	nt or last job first)		
Employer	Duties		Employment Da	ate
			_ From	_ To
			_ From	_ To
			_ From	_ To

Financial Information

Name _____ Date _____ I make the following statement of all my assets and liabilities as of the _____ day of _____, 20_____

Assets	Liabilities and Net Worth		
Cash	\$ Notes Payable to Banks		
Accounts & Loans Receivable	\$ (Direct Borrowage Only)	\$	
Life Insurance, Cash Surrender Value	Notes Payable to Others	\$	
(Do Not Deduct Loans)	\$ Loans Against Life Insurance	\$	
Stocks and Bonds	\$ Accounts Payable	\$	
Real Estate	\$ Mortgages Payable on Real Estate	\$	
Automobiles (Registered in Own Name)	\$ Other Liabilities (Itemized)	\$	
Other Assets (Itemized)	\$		
	Net Worth	\$	
Total Assets	\$ Total Liabilities and Net Worth	\$	

Banking Relations Bank Accou	unts, including	Savings and Loans	Source of Income
Name and Location of Bank	Cash	Amt. of Loan	Salary
			Bonus and Commissions
			Dividends
			Real Estate Income
			Other Income (Itemize)
			Total

Real Estate The legal and equitable title to the real estate listed in the statement is solely in the name of the undersigned, except as follows

Description and Street Number	Dimensions or Acres	Improvements Consist of	Mortgages or Liens	Due Dates and Payment Amts.	Assessed Value	Present Market Value

Other Stocks and Bonds

Face Value (Bonds) No. of Shares (Stocks)	Description of Security	Registered in the Name of	Cost	Present Market Value	Income Rcv'd Last Year		

Life Insurance

From _____ To _____

Name of Person Insured	Name of Beneficiary	Name of Insurance Co.	Type of Policy	Face Value at Policy	Total Cash Surrender Value	Total Loans Against Policy	Amount of Yearly Premium

