

# 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 \_\_\_\_\_

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Please Reply To: **Samuel Mancino's**  
ITALIAN EATERY

Nu-Ventures, Inc.  
1324 W. Milham  
Portage, MI 49024  
Office: 269.226.4400  
Toll Free: 888.432.8379

# Franchise Application



To determine mutual compatibility and financial responsibility, we ask that you fill out this form for a 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.

