



Please complete this application, print, sign, and fax it to Tilden at (516) 746-1288

Date

1. Geographical Location Preferred

1st choice 2nd choice 3rd choice

2. Personal

First/Last Name Social Security No.
Spouse/co-applicant Social Security No.

Home Address

City State Zip

Years at address Home phone Work phone

Single Married

Number and ages of minor children and other dependents: Your Birthdate
Spouse/Co-Applicant Birthdate

Education (Highest level completed at school)

Spouse/Co-Applicant Birthdate Education (Highest level completed at school)

Are you party to any past or present legal action? Yes No

Have you or spouse/co-applicant ever been convicted of a felony? Yes No

Have you, spouse/co-applicant or business ever been involved in bankruptcy, insolvency or compromise with creditors? Yes No

If you answered "yes" to any of the above, please explain:

3. Operational Plan

How many centers are you interested in? Are you considering a partner(s)? Yes No

Will you devote your full time to this business? Yes No

If no, indicate how you will divide your time:

Will members of your family be directly involved with the day-to-day operation of this business? Yes No

If yes, list who and in what capacity:



List any partners or associates who will join you in this venture. (They should complete a separate profile.)

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4. Financial Statement

Assets

Amount in Even Dollars

Cash in Following Banks (*itemize*)

Stocks and Bonds, Marketable Securities

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Other Securities

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Notes Receivable

Secured by Real Estate

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--

Secured by Other Collateral

--

--

Unsecured

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--

Accounts Receivable

--

--

Other

--

--

Vehicles (Year and Make—Current Value)



Real Estate

Primary Residence

--

Other

--

Other Assets

Total Assets

--

--

Liabilities

Amount in Even Dollars

Notes Payable to Banks (itemize)

Secured

Unsecured

Other Notes Payable to Banks (itemize)

Secured

Unsecured



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Taxes Payable

Income Taxes

Other Taxes

Due on Vehicles

Debt on Real Estate

Residence

Other

Other Liabilities (Itemize/Describe)

Total Liabilities

Net Worth

Total Liabilities and Net Worth



Analysis of Capital Available to Invest

	Amount	Description
Cash Available		
Other Liquid Assets		
Partners		
Real Estate Equity		
Other		
Total Capital		

Additional Financing Sources Anticipated

Assets Available to Secure Additional Financing

Annual Sources of Income

Salary, Bonus or Commissions

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Dividends

--

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Real Estate Income

--

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Other Income (describe)

Total

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The information requested in this form is provided by the applicant(s) for the specific purpose of obtaining a TILDEN Franchise. As such, it is for internal use only, and will be kept in strict confidence.

The undersigned expressly agree(s) that all banks, institutions, persons, firms, and corporations referred to or referenced in the foregoing are authorized to give TILDEN any and all pertinent information they may request concerning this franchise application. By signing, I (we) affirm that all information provided in this application is true, accurate and a complete representation of my (our) financial qualifications and background.

Signature

Date Signed

Spouse/Co-Applicant Signature

Date Signed

When complete, please fax to Tilden at (516) 746-1288.