



Baba Saj Franchisee Information Form

Purpose: To gather essential business, financial, and operational details from franchisees for approval, support, and training purposes.

1. Franchisee Details

Full Name(s): _____

Business Entity Name (if applicable): _____

Address: _____

Phone: _____ Email: _____

Preferred Contact Method: _____

2. Location Information

Proposed Address: _____

City / State / Zip: _____

Type of Location (Mall, Standalone, Strip Center, Food Court, Other): _____

Square Footage: _____ Expected Opening Date: _____

Lease Details (Landlord name, lease term, monthly rent): _____

3. Experience & Background

Previous Restaurant / Retail Experience (Yes / No): _____

If yes, explain: _____

Current or Past Businesses Owned: _____

Food Safety Certifications (if any): _____

Team Members / Managers Hired? (Yes / No): _____

4. Financial Information

Estimated Startup Capital: _____

Liquid Assets Available: _____

Source of Funds (Savings, Loan, Investors, Other): _____

Projected Monthly Operating Budget: _____

5. Pre-Opening Readiness

Construction Status (Not Started / In Progress / Complete): _____

Design & Branding Installed? (Yes / No): _____

Equipment Purchased? (Yes / No): _____

If yes, list major items: _____

Supplier Accounts Opened? (Yes / No): _____

6. Training & Support

Training Date Preference: _____

Number of Staff Attending Training: _____

Special Support Needed (Marketing, Hiring, Technical, Other): ____

7. Marketing Plan

Planned Grand Opening Date: _____

Local Advertising Channels (Social media, Flyers, Events, Other): ____

Social Media Handles: _____

8. Signature

I certify that the above information is accurate and understand it will be used to support my Baba Saj franchise operations.

Signature: _____ Date: _____