



TaxAssist Accountants

Franchise Application Form

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|--|---------------------------------------|--|---------------------------------------|
| Surname: | <input type="text"/> | First Name: | <input type="text"/> |
| Middle Name: | <input type="text"/> | Date of Birth: | <input type="text"/> |
| Nationality: | <input type="text"/> | Do you have indefinite leave to reside & work in the UK? * | <input type="text" value="YES / NO"/> |
| Address: | <input type="text"/> | | |
| Town: | <input type="text"/> | County: | <input type="text"/> |
| Postcode: | <input type="text"/> | Time at Current Address: | <input type="text"/> |
| Email Address: | <input type="text"/> | Home Tel Number: | <input type="text"/> |
| Mobile Tel Number: | <input type="text"/> | Where did you hear About TaxAssist: | <input type="text"/> |
| Marital Status: | <input type="text"/> | Dependants: | <input type="text"/> |
| Present State of Health: | <input type="text"/> | | |
| Have you ever been convicted of a serious offence or currently involved in any litigation: | <input type="text" value="YES / NO"/> | If yes, please provide details: | <input type="text"/> |
| Have you ever been declared Bankrupt: | <input type="text" value="YES / NO"/> | If yes, please provide details: | <input type="text"/> |
| Is there anything that you are aware of which may restrict your ability to be a TaxAssist Franchise owner? | <input type="text" value="YES / NO"/> | If yes, please provide details: | <input type="text"/> |
| What is your Highest Academic Qualification: | <input type="text"/> | | |
| Are you a Member of any Professional Bodies: | <input type="text" value="YES / NO"/> | If yes, please provide details: | <input type="text"/> |
| If you are Accountancy qualified, do you hold a Practising Certificate: | <input type="text" value="YES / NO"/> | | |

Current Occupation:

Your current income level:
(Please circle)

| | | | |
|------------|--------------|--------------|-----------|
| Up to £25k | £25k to £40k | £40k to £60k | £60k + pa |
|------------|--------------|--------------|-----------|

Do you currently run/own your own Business:

If, yes, please provide details:

Have you previously run your own business:

If yes, please provide details:

Summary of Background/Employment History

| Dates | Company Name & Position Held | Key Responsibilities |
|-------|------------------------------|----------------------|
| | | |
| | | |
| | | |

Will you be raising finance to acquire the Franchise?

If so, approximately how much?

A minimum personal stake of 30% of the total investment will be required, can you provide evidence if necessary?

Will this be secured by your home?

If no, please provide details:

Can you give 100% full time commitment to your Business as TaxAssist do not permit other Business interests to run alongside the Franchise.

Can you see yourself operating from a Shop Front?

Have you had experience of managing staff?

Are you confident you can sell yourself in front of clients?

Please provide details of what Commercial/Business expertise you will bring to TaxAssist Accountants and reasons why we should award you a TaxAssist Accountants franchise in your area?

What attracts you most to becoming a TaxAssist Accountants franchisee?

Our Business Model involves Client Acquisition as well as a First Class service provision. Which of these areas are you more comfortable with?

Please advise here if there are any areas of concern that you have, that you would like to discuss further:

When would you consider starting your franchise?

Please confirm the name and addresses of two referees from whom we may obtain both character and work experience references: **(Please note that we will only contact referees should you wish to join us)**

1.

2.

DISCLAIMER AND SIGNATURE

This confidential information will only be used to help us assess your suitability as a Franchisee. This information will not be used or disclosed for any other purpose without your prior approval and may at your request be destroyed or returned to you if your application is unsuccessful. This application does not oblige either party in any way.

I certify that my answers are true and complete to the best of my knowledge.

Signed:

Date:

Forms should be returned to:

Recruitment Department
TaxAssist Accountants
2nd Floor
Bankside 300
Peachman Way
Broadland Business Park
NORWICH
NR7 0WF

recruitment@taxassist.co.uk

Please seriously consider if you are the sort of ambitious, capable, hardworking business builder we are looking for before returning this form to us.

- Our Franchise Agreements are offered on a minimum term of 5 years and you must have the appropriate visa already granted.