

## FRANCHISERS SUPPLEMENTAL APPLICATION

a. How long has the Applicant been franchising?			
b. How many units does the Applicant own?			
c. What is the total number of franchised units?			
Does any subsidiary of the applicant provide services to the franchises?	☐ Yes ☐ No		
If yes, please provide details.			
a. Does the applicant have a franchise director's compliance program?	☐ Yes ☐ No		
If yes, please provide details			
b. Does the Applicant have a franchise disclosure regulation or general compliance office?			
	☐ Yes ☐ No		
If yes, what is their name			
Does this person have additional responsibilities	☐ Yes ☐ No		
If yes, describe other responsibilities.			
c. Provide the background and the employment history of the person identified abov	e.		
Briefly describe the process for selecting and qualifying prospective franchisers.			
Does the Applicant debrief prospective franchisers prior to execution of the franchise agreement?			

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For	each franchise sold, does the Applicant maint	in records of the following in	formation
a.	Date of first contact.	☐ Yes ☐ No ☐ Not App	licable
b.	Method of contract.	☐ Yes ☐ No ☐ Not App	licable
c.	Date and place of first personal meeting	☐ Yes ☐ No ☐ Not App	licable
d.	Identity of persons who met with franchiser		
	and subjects discussed	☐ Yes ☐ No ☐ Not App	licable
e.	Date in which franchise learned about		
	franchiser.	☐ Yes ☐ No ☐ Not App	licable
f.	Franchise applications	☐ Yes ☐ No ☐ Not App	licable
g.	Investigate reports or tests regarding	☐ Yes ☐ No ☐ Not App	licable
	prospective franchises.		
h.	Rates related correspondence, memoranda	☐ Yes ☐ No ☐ Not App	licable
	and notes of conference.		
i.	Investigate and investigate professional	☐ Yes ☐ No ☐ Not App	licable
	advisor(s) to franchise.		
j.	Copies of franchise offering and	☐ Yes ☐ No ☐ Not App	licable
	delivered and dares of delivery.		
k.	Description of any negotiations of the terms	☐ Yes ☐ No ☐ Not App	licable
	of a franchise contract.		
l.	Copies of all executed agreements and	☐ Yes ☐ No ☐ Not App	licable
	Riders, addenda and exhibits.		
m.	Properly completed, signed receipts to all	☐ Yes ☐ No ☐ Not App	licable
	offering circulars, contracts and other		
	disclosure materials delivered to		
	franchisers.		
n.	Date(s) any agreements were executed by	☐ Yes ☐ No ☐ Not App	licable
	each party		
0.	Consideration and date paid	☐ Yes ☐ No ☐ Not App	licable
p.	Date and price(s) franchise was commenced	☐ Yes ☐ No ☐ Not App	licable
	and completed.		
q.	Evidence that franchisers successfully	☐ Yes ☐ No ☐ Not App	licable
	completed training.		
r.	Applicant's assistance in connection with the	☐ Yes ☐ No ☐ Not App	licable
	opening of the franchisers business.		

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0.	applicant?
	If yes, identify the sales personnel.
	b. Has the applicant conducted a background check on its sales personnel ?
	If yes, briefly explain the procedure.
9.	Describe any established procedure, precautions or safeguards the Applicant has in place with respect to resolving disputes with franchises
10.	Provide the name of the law firm(s) (if any) which has assisted, or currently assists the Applicant with franchise contracts and/or franchise registration/disclosure statements and/or franchise disputes.
11.	Provide the name and address of the Applicant's current accounting firm.
	and agreed that this supplemental application shall become a part of the application for Professional &Omissions Insurance.
Date	Name of Applicant
	Signature of a person authorized to execute
	on behalf of the Applicant.

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ANY PERSON WHO KNOWINGLY AND WITH INTENT TO DEFRAUD ANY INSURANCE COMPANY OR ANOTHER PERSON FILES AN APPLICATION FOR INSURANCE OR STATEMENT OF CLAIM CONTAINING ANY MATERIALLY FALSE INFORMATION, OR CONCEALS FOR THE PURPOSE OF MISLEADING INFORMATION CONCERNING ANY FACT MATERIAL THERETO, COMMITS A FRAUDULENT INSURANCE ACT, WHICH IS A CRIME AND SUBJECTS THE PERSON TO CRIMINAL AND [NY: SUBSTANTIAL] CIVIL PENALTIES. (Not applicable in CO, DC, FL, HI, KS, MA, MN, NE, OH, OK, OR, VT or WA; in LA, ME, TN and VA, insurance benefits may also be denied)

IN THE DISTRICT OF COLUMBIA, WARNING: IT IS A CRIME TO PROVIDE FALSE OR MISLEADING INFORMATION TO AN INSURER FOR THE PURPOSE OF DEFRAUDING THE INSURER OR ANY OTHER PERSON. PENALTIES INCLUDE IMPRISONMENT AND/OR FINES. IN ADDITION, AN INSURER MAY DENY INSURANCE BENEFITS, IF FALSE INFORMATION MATERIALLY RELATED TO A CLAIM WAS PROVIDED BY THE APPLICANT.

IN FLORIDA, ANY PERSON WHO KNOWINGLY AND WITH INTENT TO INJURE, DEFRAUD, OR DECEIVE ANY INSURER FILES A STATEMENT OF CLAIM OR AN APPLICATION CONTAINING ANY FALSE, INCOMPLETE, OR MISLEADING INFORMATION IS GUILTY OF A FELONY OF THE THIRD DEGREE.

IN KANSAS, ANY PERSON WHO, KNOWINGLY AND WITH INTENT TO DEFRAUD, PRESENTS, CAUSES TO BE PRESENTED OR PREPARES WITH KNOWLEDGE OR BELIEF THAT IT WILL BE PRESENTED TO OR BY AN INSURER, PURPORTED INSURER, BROKER OR ANY AGENT THEREOF, ANY WRITTEN STATEMENT AS PART OF, OR IN SUPPORT OF, AN APPLICATION FOR THE ISSUANCE OF, OR THE RATING OF AN INSURANCE POLICY FOR PERSONAL OR COMMERCIAL INSURANCE, OR A CLAIM FOR PAYMENT OR OTHER BENEFIT PURSUANT TO AN INSURANCE POLICY FOR COMMERCIAL OR PERSONAL INSURANCE WHICH SUCH PERSON KNOWS TO CONTAIN MATERIALLY FALSE INFORMATION CONCERNING ANY FACT MATERIAL THERETO; OR CONCEALS, FOR THE PURPOSE OF MISLEADING, INFORMATION CONCERNING ANY FACT MATERIAL THERETO COMMITS A FRAUDULENT INSURANCE ACT.

IN MASSACHUSETTS, NEBRASKA, OREGON AND VERMONT, ANY PERSON WHO KNOWINGLY AND WITH INTENT TO DEFRAUD ANY INSURANCE COMPANY OR ANOTHER PERSON FILES AN APPLICATION FOR INSURANCE OR STATEMENT OF CLAIM CONTAINING ANY MATERIALLY FALSE INFORMATION, OR CONCEALS FOR THE PURPOSE OF MISLEADING INFORMATION CONCERNING ANY FACT MATERIAL THERETO, MAY BE COMMITTING A FRAUDULENT INSURANCE ACT, WHICH MAY BE A CRIME AND MAY SUBJECT THE PERSON TO CRIMINAL AND CIVIL PENALTIES.

IN WASHINGTON, IT IS A CRIME TO KNOWINGLY PROVIDE FALSE, INCOMPLETE, OR MISLEADING INFORMATION TO AN INSURANCE COMPANY FOR THE PURPOSE OF DEFRAUDING THE COMPANY. PENALTIES INCLUDE IMPRISONMENT, FINES, AND DENIAL OF INSURANCE BENEFITS.

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