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| **Easy Mowing Franchise Application Form** | | |
| **Applicant Information** | | |
| First Name： | Surname： | Preference Name： |
| Gender： | Date of Birth： | |
| Contact Information ☐ Phone Number： ☐ Email Address： | | |
| *\* Please provide one of the following proofs and attach a photocopy when submitting the documents*  ☐ Driver's License Number：  ☐ Passport Number： | | |
| Current Residential Address：  *\* Please provide a proof of address dated within the last two months, such as a water bill, electricity bill, or bank statement.* | | |
| Mailing Address *(If different from residential address, please fill in)* | | |
| **Business Background** | | |
| 1. Do you have any experience in lawn mowing or related industries?   ☐ No  ☐ Yes, please provide a brief description.： | | |
| 1. Do you currently have any other franchise businesses?   ☐ No  ☐ Yes, please provide a brief description.： | | |
| 1. Do you currently own or operate any other businesses or companies?   ☐ No  ☐ Yes, please provide a brief description.： | | |
| 1. What is your level of understanding of remote-controlled lawnmower rental services： ☐ Very familiar ☐ Somewhat familiar ☐ Not familiar at all | | |
| 1. NZBN Number (If applicable)： 2. GST Number(If applicable)： | | |
| **Franchise Intentions** | | |
| 1. The area you wish to franchise： ☐ East Auckland ☐ North Auckland ☐ West Auckland   ☐ South Auckland ☐ South-West Auckland ☐ Central Auckland  2. Franchise Area Code：  \* Franchise Area Map Available for Reference | | |
| 1. Preferred Franchise Model(s): (Multiple choices allowed) ☐ Rental Model (Lawnmower Rental Service)   ☐ Service Model (Manual Lawn Mowing Service) | | |
| 1. Preferred Franchise Level: (Franchise fees and earnings information available for reference)   ☐ Level 1 Franchisee ☐ Level 2 Franchisee ☐ Level 3 Franchisee | | |
| 1. What is your management team?   ☐ Individual Operation  ☐ Family Operation  ☐ Partnership Operation (Partners in this model also need to fill out this application form) | | |
| **Asset Status** | | |
| 1. Do you own transportation equipment or work vehicles?   ☐ No  ☐ Yes, the type is： | | |
| 1. What is your preferred franchise payment model?   ☐ One-time Payment (including franchise fee, annual management fee, operating expenses, and other required costs)  ☐ Installment Payment (Loan cooperation, connecting with financial companies) | | |
| **Application Declaration**  I confirm that the above information is true and accurate, and I have carefully read and agree to the relevant franchise policies and requirements of Easy Mowing.  Applicant's Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Application Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | |