



Application for Disclosure Documentation

PERSONAL DATA AND BUSINESS HISTORY

Completed by everyone who may sign a Franchise Agreement and related documents.

Applicant Name (last name, first name, and initial)

Home Address

City

Province

Postal Code

(____) _____

(____) _____

Phone

Fax

Social Insurance Number

Email Address

Company Name (Current affiliation)

Company Address

City

Province

Postal Code

BUSINESS HISTORY (for the past 10 years)

From	To	Company	Responsibilities	Annual Income

Are there any lawsuits pending involving you?

Have you ever failed in business? Compromised with creditors or filed bankruptcy? (If yes, please explain)

Have you ever been convicted of an indictable offence/felony? (If yes, please explain)

Do you have any arrangements or commitments, contractual or otherwise, that may interfere with your becoming a franchisee? (If yes, please explain)

Do you now, or did you ever own a franchise? (If yes, please explain)

How did you learn about Sutton?

What is your main interest in Sutton?

REAL ESTATE HISTORY, EXPERIENCE & COMMUNITY INVOLVEMENT

Years in real estate industry: _____

Education: _____

Do you operate a real estate company now? Yes No

In what capacity: _____

Name of your company: _____ No. of Salespeople: _____

Number of years you have operated the company: _____

Is your company a: Sole proprietorship Partnership Corporation

Have you ever operated (or worked under) a 100% commission system?

Where: _____ When: _____

What was your firm's sales volume?

Last year: _____ # of transactions: _____

How many transactions (ends) did you close: _____

Are you a sales associate? Yes No No. of years: _____

Are you a real estate broker? Yes No No. of years: _____

Are you an associate broker? Yes No No. of years: _____

Are you a designated broker? Yes No No. of years: _____

Are you a builder/developer? Yes No No. of years: _____

Any Professional Designations? Yes No
If yes, what are they? _____

Past or present position on Provincial/State
Board of Realtors or Realtors' Association? Yes No No. of years: _____

Are you a member of any civic, business or professional organizations? (If yes, please provide details.)

REFERENCES

BUSINESS REFERENCES:

Reference 1:

Name Title

Company Phone

Address City Province Postal Code

Reference 2:

Name Title

Company Phone

Address City Province Postal Code

Reference 3:

Name Title

Company Phone

Address City Province Postal Code

Reference 4:

Name Title

Company Phone

Address City Province Postal Code

PERSONAL REFERENCES:

Reference 1:

Name	Relationship
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Address	Phone
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Reference 2:

Name	Relationship
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Address	Phone
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Reference 3:

Name	Relationship
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Address	Phone
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BANKING INFORMATION

PERSONAL BANKING INFORMATION:

Name and location of your personal bank

Contact	Phone
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Address

BUSINESS BANKING INFORMATION:

Name and location of your business bank

Contact	Phone
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Address

COMMENTS:

For the purpose of Sutton completing the evaluation and selection process of granting a Sutton Group Realty Services Ltd. franchise to me and/or my company, I understand the granting of a Sutton Franchise will be partially based on the information I/we have submitted to you. Furthermore, Sutton will require additional information including a detailed monthly business plan showing income, expenses and working capital requirements for the first 60 months of the business.

You may rely on this statement as my minimum continuing statement until notified to the contrary.

I certify that the above information which I/we have given Sutton is true and correct. I/we agree that Sutton may retain this application for Sutton Group Realty Services Ltd. records, use the information to establish and maintain my/our relationship with Sutton Group Realty Services Ltd. and to offer any services permitted by law.

By signing this I authorize you to perform local credit checks with credit reporting agencies at your expense.

Applicant's Signature: _____

Date: _____

Please send your application to:

**Director of Franchise Relations
Sutton Group Realty Services Ltd.
Suite# 1200 - 570 Granville Street
Vancouver, BC V6C 3P1**

Or Fax it to: (604) 691-1605