



FRANCHISE ENQUIRY FORM

Thank you for your interest in the Saybons franchise. Please complete and email the form to us at franchise@saybons.com. We will review your enquiry and get back to you soon.

I am interested in a:	
<input type="checkbox"/> Area Franchise for Overseas Territories	<input type="checkbox"/> Single-Unit Franchise for Singapore
Location / Country of Interest:	

APPLICANT'S PARTICULARS

**please delete where applicable*

<i>If you are applying as an Individual, please fill in the following:</i>	
Name of Applicant: Mr/Ms/Mrs/Mdm*	Date of Birth:
Home Address:	
Email:	Contact Number:
Current Occupation:	
<i>If you are applying on behalf of a Company, please fill in the following:</i>	
Company Name:	
Company Address:	
Name of Contact Person: Mr/Ms/Mrs/Mdm*	
Email:	Contact Number:
Designation:	

1. Please share with us why are you interested to take up the Saybons franchise?	
2. Have you already identified a suitable location to operate the Saybons outlet? If yes, please provide the address, outlet size and date of availability:	<input type="checkbox"/> Yes <input type="checkbox"/> No
3. How familiar are you with franchising?	<input type="checkbox"/> Very <input type="checkbox"/> Fairly <input type="checkbox"/> Little <input type="checkbox"/> Not at all
4. Have you bought/operated a franchise business before? If yes, please state name of the franchise and your involvement:	<input type="checkbox"/> Yes <input type="checkbox"/> No
5. Do you have any relevant experience in F&B? If yes, please elaborate:	<input type="checkbox"/> Yes <input type="checkbox"/> No
6. How much funds do you intend to set aside for this business venture?	<input type="checkbox"/> Less than S\$200,000 <input type="checkbox"/> S\$200,001 – S\$500,000 <input type="checkbox"/> S\$500,001 – S\$1 million <input type="checkbox"/> More than S\$1 million

By signing this form, I confirm my genuine interest in this franchise opportunity and that the facts furnished above are accurate. I understand and give consent for the Franchisor to use the above information as part of its process to evaluate my franchise application.

Signature: _____

Date: _____

Full Name: _____