PAK MAIL
PACK IT SHIP IT CRATE IT FREIGHT IT

Confidential application

Completing this application does not obligate you to purchase a Pak Mail franchise.

Please tell us a little about yourself. Any information you submit will be kept completely confidential.

Personal data

Name | **Date of birth:**

Email address: | **US Citizen:** ☐ Yes ☐ No

Home phone: | **Cell phone:** | **Business Phone:**

Home address: | **Marital Status:** ☐ Single ☐ Married

City, State, Zip

Best time to contact: | **Preferred number to contact:**

Work experience

Employer: | **Employer Address:**

From/To: | **Position:** | **Annual gross income:**

Employer: | **Employer Address:**

From/To: | **Position:** | **Annual gross income:**

Education

Post high school education: | **Degree or certifications:** | **# of years completed:**

Partner(if any) Personal Data

Name | **Date of birth:**

Email address: | **US Citizen** ☐ Yes ☐ No

Home phone: | **Cell phone:** | **Business Phone:**

Home address: | **Marital Status:** ☐ Single ☐ Married

City, State, Zip

Best time to contact: | **Preferred number to contact:**

Work experience

Employer: | **Employer Address:**

From/To: | **Position:** | **Annual gross income:**

Employer: | **Employer Address:**

From/To | **Position:** | **Annual gross income:**

Education

Post high school education: | **Degree or certifications:** | **No. of years completed:**

Intentions and Expectations

Who will operate the center? ☐ Self ☐ Partner ☐ Other (specify)

Will you or your partner continue to work at current places of employment after the franchise is awarded? ☐ Self ☐ Partner ☐ Other (specify)

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Name

Intentions and expectations (continued)

How did you become interested in Pak Mail?

In what city, county, and state would you like to own a Pak Mail Center?

1st choice: *(city/county/state)*

2nd choice: *(city/county/state)*

What are your reasons for going into business for yourself?

Funding & Finances

Do you anticipate obtaining a loan from another source to assist in funding this franchise opportunity?

☐ Yes ☐ No **Loan source(s):** **Amount: $**

Source of additional funds to finance start-up?

Source(s): **Amount: $**

Have you ever failed in business or filed bankruptcy? ☐ Yes ☐ No

Assets		Self		Partner
Cash, marketable securites, liquid assets:	$		$	
Available retirement funds:	$		$	
Estimated market value of real estate:	$		$	
Other Assets (specify):	$		$	
Total assets	$	0	$	0
Debts		**Self**		**Partner**
Mortgages on real estate:	$		$	
Other debts:	$		$	
Total debts	$	0	$	0
Net Worth (Total assets - total debts)	$	0	$	0

I/We do hereby represent that all of the above answers are true and complete to the best of my/our knowledge and belief. I/We hereby authorize the release of information to Pak Mail Centers of America or its authorized agent to obtain verification of my/our statement. I/We recognize that Pak Mail Centers of America is not in any way obligated to offer a franchise to me/us because of my/our execution of this document.

Signature of primary applicant **Date**

Signature of partner (if applicable) **Date**

Send completed application by email to sales@pakmail.org or by fax to 800-336-7363 or mail to:

Pak Mail Centers of America, Inc.
Attn: Franchise Opportunities
7173 S. Havana Street, Suite 600
Centennial, CO 80112-3891

Phone: 800-833-2821
Fax: 800-336-7363
Internet: www.pakmail.com

For Internal Use Only: **FDD:** **Approved:**