



# 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)

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

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

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How did you learn about Sutton?

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What is your main interest in Sutton?

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## **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:**

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Name	Relationship
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Address	Phone
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### **Reference 2:**

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Name	Relationship
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Address	Phone
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### **Reference 3:**

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Name	Relationship
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Address	Phone
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## **BANKING INFORMATION**

### **PERSONAL BANKING INFORMATION:**

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Name and location of your personal bank

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Contact	Phone
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Address

### **BUSINESS BANKING INFORMATION:**

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Name and location of your business bank

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Contact	Phone
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Address



**COMMENTS:**

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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:**

**Rick Taron  
Director of Franchise Relations  
Sutton Group Realty Services Ltd.  
#800-1075 West Georgia Street  
Vancouver, BC V6E 3C9**

**Email: [rtaron@sutton.com](mailto:rtaron@sutton.com)  
Or Fax it to: (604) 691-1620**