



## Franchise Application Form

### Applicant Detail:

Name:	
Gender:	
Age:	
Contact Address:	
E-mail:	
Contact Number:	
Company Name:	
ABN:	

### Shop Detail:

If applicant already has a shop, and wants to open a CROWN TEA shop in this address,

Shop address:	
Shop area (sqm)	
Expected open time:	

If applicant is looking for an address to open a CROWN TEA shop, the expected shop address,

Suburb:	1	2	3
Street or shopping centre name:			
Expected open time			

\* shop must has electricity and water access.

Name of applicant (print): \_\_\_\_\_

Signature of applicant : \_\_\_\_\_

Date (dd/mm/yy) : \_\_\_\_\_