



**CREDIT APPLICATION**

This credit application (the "Application") is made to YGFY, LLC inclusive of all of its affiliates and assigns (collectively the "Franchisor") for the purpose of inducing Franchisor to enter into a franchise relationship with the Franchisee named below:

1. \_\_\_\_\_  
 Franchisee Name E-Mail Address  
 (\_\_\_\_) \_\_\_\_\_ (\_\_\_\_) \_\_\_\_\_  
 Telephone No. Fax No.

---

(Business Address) (City, State) (Zip Code) (County)

2. (a) Full Legal Name of Franchisee Entity: \_\_\_\_\_  
 State of Incorporation/Organization: \_\_\_\_\_  
 FEIN: \_\_\_\_\_

(b) Full Legal Name of Principal: \_\_\_\_\_  
 Drivers License No.: \_\_\_\_\_  
 Marital Status: \_\_\_\_\_ Name of Spouse/Partner: \_\_\_\_\_  
 Home Address: \_\_\_\_\_  
 Social Security No.: \_\_\_\_\_ Phone No.: \_\_\_\_\_

(c) Full Legal Name of Principal: \_\_\_\_\_  
 Drivers License No.: \_\_\_\_\_  
 Marital Status: \_\_\_\_\_ Name of Spouse/Partner: \_\_\_\_\_  
 Home Address: \_\_\_\_\_  
 Social Security No.: \_\_\_\_\_ Phone No.: \_\_\_\_\_

(d) Full Legal Name of Principal: \_\_\_\_\_  
 Drivers License No.: \_\_\_\_\_  
 Marital Status: \_\_\_\_\_ Name of Spouse/Partner: \_\_\_\_\_  
 Home Address: \_\_\_\_\_  
 Social Security No.: \_\_\_\_\_ Phone No.: \_\_\_\_\_

3. Trade Credit References (list 4)

(a) \_\_\_\_\_  
 Trade Reference Contact Person Address

---

City, State Zip Code Telephone Number

(b) \_\_\_\_\_

Trade Reference	Contact Person	Address
City, State	Zip Code	Telephone Number

(c) \_\_\_\_\_

Trade Reference	Contact Person	Address
City, State	Zip Code	Telephone Number

(d) \_\_\_\_\_

Trade Reference	Contact Person	Address
City, State	Zip Code	Telephone Number

4. Bank References For Each Principal:  
Principal (b as listed above)

(a) \_\_\_\_\_

Bank	A/C#	Bank Officer	
Address	City, State	Zip Code	Telephone Number

Principal (c as listed above)

(b) \_\_\_\_\_

Bank	A/C#	Bank Officer	
Address	City, State	Zip Code	Telephone Number

Principal (d as listed above)

(c) \_\_\_\_\_

Bank	A/C#	Bank Officer	
Address	City, State	Zip Code	Telephone Number

5. A copy of the current financial statements for Franchisee and each Principal must be attached to this Application.

6. If any of Franchisee's assets are encumbered by a lien or security interest, please attach a copy of each instrument creating the lien or security interest.

7. Franchisor and each Principal, each and all, jointly and severally certify, warrant and represent that any and all information provided in this Application is true and correct in all material respects and that any information or materials furnished pursuant to this Application and any other information furnished from time to time to Franchisor, is/are and will be true, correct, accurate and complete. All information is being furnished to Franchisor for the purpose of inducing Franchisor to enter into and continuing with one or more agreements with Franchisee and/or Principal(s). Franchisee and each Principal, each and all, jointly and severally understand that Franchisor intends to rely upon all such information. Franchisee and each Principal, each and all, jointly and severally represent and warrant that each is solvent, generally able to pay debts as such debts become due, and has capital sufficient to carry on its business. Franchisee, inclusive of each Principal, each and all, jointly and severally agree to promptly advise Franchisor of any material change in the information provided herein or as the Franchisor may, from

time to time reasonably request. Franchisee, inclusive of each Principal, each and all, jointly and severally understands that Franchisor will retain this Application and hereby authorize(s) Franchisor to, from time to time, check or update personal credit history and trade, bank and personal references (whether or not listed in this Application) including for the purposes of collection or litigation. Franchisee, inclusive of each Principal, each and all, jointly and severally agree that a copy of this authorization and signature(s) of the undersigned, shall be deemed to be the equivalent of the original and can be used as such to confirm the information contained on this Application, including, but not limited to, sending a copy hereof to the trade, bank and personal references and to release information to other creditors regarding experience with Franchisor. THE UNDERSIGNED IS EXECUTING THIS APPLICATION IN HIS/HER CAPACITY AS AN OFFICER OR PRINCIPAL OF FRANCHISEE, AND INDIVIDUALLY FOR THE LIMITED PURPOSES SET FORTH HEREIN, IN ORDER TO FURTHER EVALUATE THE CREDITWORTHINESS OF SUCH INDIVIDUAL AS PRINCIPAL, PROPRIETOR AND/OR GUARANTOR IN CONNECTION WITH THE EXTENSION OF BUSINESS CREDIT. THE UNDERSIGNED, AS AN INDIVIDUAL, HEREBY KNOWINGLY CONSENTS TO THE USE OF SUCH CREDIT REPORT CONSISTENT WITH THE FEDERAL FAIR CREDIT REPORTING ACT AS CONTAINED IN 15 U.S.C. § 1681, et. seq.

8. This Application shall be governed by and interpreted in accordance with the laws and decisions of the State of Illinois. Franchisee and each Principal irrevocably agrees and hereby consents and submits to the exclusive jurisdiction of any state or federal court located in the state of Illinois, without regard to the conflicts of law provisions thereof, with regard to any actions or proceedings arising from, relating to or in connection with this Application. Franchisee and each Principal waive any right it may have to change the venue of any litigation brought against them and further waives any right to trial by jury.

PRINCIPAL

Signature: \_\_\_\_\_  
 Print Name: \_\_\_\_\_  
 Date: \_\_\_\_\_

PRINCIPAL

Signature: \_\_\_\_\_  
 Print Name: \_\_\_\_\_  
 Date: \_\_\_\_\_

PRINCIPAL

Signature: \_\_\_\_\_  
 Print Name: \_\_\_\_\_  
 Date: \_\_\_\_\_

FRANCHISEE

Signature: \_\_\_\_\_  
 Print Name: \_\_\_\_\_  
 Date: \_\_\_\_\_

FRANCHISEE AND EACH PRINCIPAL EACH AND ALL HEREBY WAIVE PERSONAL SERVICE OF ANY AND ALL PROCESS AND CONSENTS THAT ALL SERVICE OF PROCESS MAY BE MADE BY CERTIFIED MAIL, RETURN RECEIPT REQUESTED, DIRECTED TO EACH AS SET FORTH IN SECTION 2 ABOVE.

If this Application is not approved or if any other adverse action is taken with respect to the credit of Franchisee or any Principal as a result of the relationship with Franchisor, the impacted party has the right to request within 60 days of notification of such adverse action, a statement of specific reasons for such action, which statement will be provided within 30 days of said request. The federal Equal Credit Opportunity Act prohibits creditors from discrimination against credit Applicants on the basis of race, color, religion, national origin, sex, marital status or age (provided that the Applicant has the capacity to enter into a binding contract); because all or part of the Applicant's income derives from any public assistance programs; or because the Applicant has in good faith exercised any right under the Consumer Credit Protection Act. The federal agency that administers compliance with this law concerning the creditor is the Federal Trade Commission, Washington, D.C.

**Fax this completed application to 847-697-4178. Thank you.**