

# WWW.ORCHIDSASIA.COM

This information is being supplied for the purpose of applying for a Orchid Grower franchise.

## PERSONAL DATA AND BUSINESS HISTORY PERSONAL INFORMATION (please print clearly):

Name \_\_\_\_\_  
Spouse's First Name \_\_\_\_\_  
Number of dependants \_\_\_\_\_  
Home address \_\_\_\_\_  
City \_\_\_\_\_ State/Province \_\_\_\_\_  
Zip/Postal Code \_\_\_\_\_  
Telephone (home) \_\_\_\_\_ Email: \_\_\_\_\_  
Website if any: \_\_\_\_\_

PHOTO

### BUSINESS INFORMATION (where currently employed):

Business Name and Address \_\_\_\_\_  
City \_\_\_\_\_  
State/Province \_\_\_\_\_  
Telephone (work) \_\_\_\_\_ Email: \_\_\_\_\_  
Fax Number \_\_\_\_\_  
Position and Duties \_\_\_\_\_  
Attach details if needed.

### BUSINESS EXPERIENCE (beginning with the most recent to present employment):

1) Company Name \_\_\_\_\_  
Position Held \_\_\_\_\_  
Dates Employed From \_\_\_\_\_ To \_\_\_\_\_

2) Company Name \_\_\_\_\_  
Position Held \_\_\_\_\_  
Dates Employed From \_\_\_\_\_ To \_\_\_\_\_

Exact nature of management experience (including self-employment)

Do you currently (or have you ever) owned a franchise?

(please tick one)  Yes  No

If yes, please give details

Would you expect to devote your full time to the agro Business?

If not, what percentage will you devote -do you recommend any management alternatives!

VANAM ORCHIDS

C-14, Neighbourhood shopping complex, sector-4, Nerul, Navi Mumbai-400706, India.  
Tel: 91-22-56116753, 9820168026 Email: info@orchidsasia.com

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When would you be prepared to start this venture?

Current Citizenship\_\_\_\_\_

## EDUCATIONAL BACKGROUND

High School \_\_\_\_\_

Year of Graduation \_\_\_\_\_

College/University \_\_\_\_\_

Degree \_\_\_\_\_ Year \_\_\_\_\_ Other

Training \_\_\_\_\_

## BUSINESS REFERENCES

1) Name \_\_\_\_\_

Title \_\_\_\_\_

Company \_\_\_\_\_ City \_\_\_\_\_

Telephone \_\_\_\_\_ Mobile: \_\_\_\_\_

Email \_\_\_\_\_

Web: \_\_\_\_\_

2) Name \_\_\_\_\_

Title \_\_\_\_\_

Company \_\_\_\_\_ City \_\_\_\_\_

Telephone \_\_\_\_\_ Mobile: \_\_\_\_\_

Email \_\_\_\_\_

Web: \_\_\_\_\_

Memberships (civic, business or professional) \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Land Information: Please attach copies of documents

\_\_\_\_\_  
\_\_\_\_\_

Loaction of the plot: Please attach road map

\_\_\_\_\_  
\_\_\_\_\_

Area of the plot and cultural information:

\_\_\_\_\_  
\_\_\_\_\_

Ownership details:

\_\_\_\_\_  
\_\_\_\_\_

Present area to be cultivated:

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**Experience in any of other horti crops if available:**

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**Knowledge about Orchids :**

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**Whether Bank Loan is required**

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**Existing Bank credit portfolio:**

**Please attach financial information if any that will help us evaluate the credit possibility with the bankers and present to the bank panels.**

**What are your future plans on Orchids: Present and 5 year projections**

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**Do you have access to Internet and email and updates: at Home or office:**

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I submit the foregoing with the knowledge that information herein will be relied upon by Vanam Orchids, in their analysis of my financial statements for the purchase and operation of a Orchid Grower franchise. The completion of this application in no way constitutes an agreement on my part to purchase a Orchid Grower Franchise or on the part of Vanam Orchids to sell a franchise to any party. I hereby give my permission for Vanam Orchids to perform any inquiries that they feel are required to obtain credit information pertaining to all parties shown in this report.

**Signature** \_\_\_\_\_

**Date** \_\_\_\_\_

THIS IS NOT A CONTRACT

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