



Vertex Corporate Advisory Sdn Bhd (891928-X)

ADDRESS: 2A-3, JALAN METRO PUDU 2, FRASER BUSINESS PARK,

55100 KUALA LUMPUR, MALAYSIA.

Tel: 03-92260680 Fax: 03-92237313

MOBILE: +6012-3302700 (KEN), +6016-6848628 (SHERLY)

Franchise Application

*Incomplete application will not be considered

Dear Potential Franchisee,

Thank you for your enquiry regarding the Crazy Potato franchise opportunity. Crazy Potato is committed to protect and respect your privacy. The purpose of this form is to collect the applicants certain personal information, in compliance with the Protection of Privacy Act and other applicable legislation (if any). Crazy Potato uses these information applicants provided only for Qualification Purpose and Further Contacts. All the applicants' information would be work through by our franchise manager, the whole process would be taken about 3-4 working days, once the decision has been made, the applicant would receive the result within 24hours. Qualified applicants will receive background and package information on the Crazy Potato franchise opportunity. Should you require details on the franchise opportunity, please do not hesitate to contact us.

Yours sincerely,

Sherly Chen

Marketing Executive

Crazy Potato Malaysia

Email: sherly@crazypotato.uk.com

Website: www.crazypotato.uk.com

Facebook: www.facebook.com/mycrazypotato



Franchise Application

Personal Information	
Name:	
Identification Card No. / Passport No.:	
Age:	
Sex:	
Address:	
City:	
Province/State:	
Country:	
Zip/Postal Code:	
Primary Contact:	
Telephone No:	
Fax No:	
E-mail Address:	
Marital Status:	
Residence Status:	
Hobbies, community activities, or special interests:	
Suburb of Franchise:	



Franchise Application

General Information

1. Do you presently own or operate any franchise F&B outlets?

- Yes No

2. Year of F&B business experience:

- No experience 1-5 years
 6-10 years More than 11 years

3. Country of interest: _____

4. Town/City of interest: _____

5. Your new open location: _____

6. Available capital: _____

7. Intended to start:

- 1-6 months 7-12 months After 1 year

8. Will you be able to devote all your working time to the Crazy Potato franchise business?

- Yes No

9. If not, what percentage will you contribute? _____%

10. How did you first hear about Crazy Potato Company?



11. What is your favourite Crazy Potato product?

12. What do French Fries mean to you?

13. Why do you choose Crazy Potato?

Declaration

I certify that the information contained in this Application Form is true and correct:

Name: _____

Signed: _____

Date: _____

*Submitting this Application Form does not obligate either third party in any way.

-THE END-