



Dear Candidate,

Thank you for your interest in M&M Meat Shops. The first step in our franchisee selection process is to complete and return our Confidential Qualification Report (CQR).

In order to properly complete the CQR, we request that you review the franchise information found on the M&M Meat Shops website.

**Important Points to Remember:**

- Please be as specific as possible in your location preferences. For example, please do not include 'Southern British Columbia' or Greater Toronto Area (GTA). To best be considered for a large area, please fill out the CQR, check our website periodically for updated available locations and let us know the location in which you are interested.
- **The minimum financial requirements for a franchise are:**
  - Standard New Store total cost: Approximately \$400,000 to \$450,000
  - SELECT<sup>®</sup> New Store total cost: Approximately \$300,000 to \$350,000
  - Applicants must demonstrate that they have enough funds for HALF of the total cost of the store. This can be in the form of cash on hand, stocks, inheritance or home equity. If using home equity please note that one spouse must keep their job to service the additional personal debt. We do not allow the use of RRSPs.**
  - Refranchise: Each refranchise opportunity will have unique financial requirements. Please contact our Franchising department to discuss the specifics for your location of interest.
- It is not necessary to meet with your bank at this time. M&M Meat Shops can provide assistance in obtaining financing with financial institutions once a store is awarded to you.

Upon receiving your fully completed CQR, we will acknowledge receipt by contacting you within 3 business days. To become an approved franchisee, the selection process includes interviews at M&M Meat Shops Regional or Head Office and an in- store review at a corporate store.

Please note that we do not have a "waiting list". The length of time between submitting a CQR and awarding a store is impossible to estimate. We request that you periodically check the list of available locations on our website. We aim to choose the most qualified and best matching candidate to each opportunity. Incomplete CQRs will be returned by mail. We encourage you to include a covering letter and clarify any additional information on how you meet the requirements of becoming an M&M Meat Shops franchisee.

Thank you for your time and consideration of M&M Meat Shops. If you have any questions regarding the CQR or franchising process, please contact our Franchising department.

Sincerely,

M&M Meat Shops Ltd.



# M&M MEAT SHOPS Confidential Qualification Report

To: M&M Meat Shops

Date: \_\_\_\_\_

The following confidential information is the basis for my franchise application. The submission of this application does not obligate M&M Meat Shops Ltd. or myself in any way or manner.

## Personal Information *(for person who will run the store)* (Please Print or Type)

Name: \_\_\_\_\_  
Last First Middle

Current Address: \_\_\_\_\_  
Street City Province Postal Code

Telephone Numbers: \_\_\_\_\_  
Residence Business Cell Fax

E-mail: \_\_\_\_\_

Best time and place to be reached by phone \_\_\_\_\_

Residence: Own \_\_\_\_\_ Rent \_\_\_\_\_ Other \_\_\_\_\_ How long have you lived at this residence? \_\_\_\_\_

Previous Address: \_\_\_\_\_  
Street City Province Postal Code

Date of Birth: \_\_\_\_\_

Marital Status: \_\_\_\_\_

Spouse's Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Number of Dependents: \_\_\_\_\_ Ages of Children: \_\_\_\_\_

Occupation of Spouse and Employer: \_\_\_\_\_

What languages do you speak fluently? \_\_\_\_\_

Health Status: \_\_\_\_\_ Illness/Disability: \_\_\_\_\_

## Areas of Interest

What geographic areas are you interested in? (Please list City and Town names)

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_
6. \_\_\_\_\_
7. \_\_\_\_\_

**Internal Use Only:**

Received: \_\_\_\_\_

N.O.R.: \_\_\_\_\_

Response: \_\_\_\_\_

Are you willing to relocate? \_\_\_\_\_

How did you hear about this M&M Meat Shops franchise opportunity? \_\_\_\_\_

## Business/Work Experience

(Give present or last position first. If additional space is needed, please attach a separate sheet. Please advise if you wish your present employer not be contacted.)

|                                                                             |                                |
|-----------------------------------------------------------------------------|--------------------------------|
| Company: _____                                                              | Address: _____                 |
| Type of business: _____                                                     | Employed from: _____ to: _____ |
| Position: _____                                                             | Annual Salary: _____           |
| Supervisor: _____                                                           | Telephone: (    ) _____        |
| Describe duties, responsibilities and number of employees supervised: _____ |                                |
| _____                                                                       |                                |

|                                                                             |                                |
|-----------------------------------------------------------------------------|--------------------------------|
| Company: _____                                                              | Address: _____                 |
| Type of business: _____                                                     | Employed from: _____ to: _____ |
| Position: _____                                                             | Annual Salary: _____           |
| Supervisor: _____                                                           | Telephone: (    ) _____        |
| Describe duties, responsibilities and number of employees supervised: _____ |                                |
| _____                                                                       |                                |

|                                                                             |                                |
|-----------------------------------------------------------------------------|--------------------------------|
| Company: _____                                                              | Address: _____                 |
| Type of business: _____                                                     | Employed from: _____ to: _____ |
| Position: _____                                                             | Annual Salary: _____           |
| Supervisor: _____                                                           | Telephone: (    ) _____        |
| Describe duties, responsibilities and number of employees supervised: _____ |                                |
| _____                                                                       |                                |

Do you now or have you ever owned or had an interest in a business venture? \_\_\_\_\_

If yes, please state details: \_\_\_\_\_

Please describe any previous experience relevant to the food or retail industry: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Please rate your computer literacy. Ten (10) being strong. (circle)    1 2 3 4 5 6 7 8 9 10

## Education (Enter last year completed)

High School: Grade \_\_\_\_\_ College/University: \_\_\_\_\_ Years

Designation or Degree obtained: \_\_\_\_\_

If University or College Graduate provide name of institution: \_\_\_\_\_

Describe any training in sales, management or retailing: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## Additional Information

How or why did you become interested in M&M Meat Shops? \_\_\_\_\_  
\_\_\_\_\_

What other businesses have you investigated? \_\_\_\_\_

How long have you been looking for a business? \_\_\_\_\_

What do you like about our concept? \_\_\_\_\_

Have you tried our products? \_\_\_\_\_

If so, how many and how would you describe them? \_\_\_\_\_  
\_\_\_\_\_

What does the term "franchising" mean to you? How would you describe the roles of the franchisor and the franchisee? \_\_\_\_\_  
\_\_\_\_\_

There are some basic ingredients to every successful business. If you were awarded a franchise, what would you do to make it successful? \_\_\_\_\_  
\_\_\_\_\_

Will you have a business partner (other than a spouse)? \_\_\_\_\_ Yes \_\_\_\_\_ No

Name of partner(s) \_\_\_\_\_

Note: A separate application and financial statement is required of each partner. Underline name of operating partner.

M&M Meat Shops reserves the right to give preference to those who are financially qualified without a business partner.

Relationship: \_\_\_\_\_ Involvement: (F/T, P/T or investment only) \_\_\_\_\_

If married, or applying with a partner, will one of you continue to work at your current place of employment after the franchise is awarded? \_\_\_\_\_ Yes \_\_\_\_\_ No For how long? \_\_\_\_\_

How many hours per week are you willing to devote to the business? \_\_\_\_\_

How many hours per week is your spouse and/or partner willing to devote to the business? \_\_\_\_\_

Are you prepared to work Sundays? \_\_\_\_\_

When would you be able to start this venture? \_\_\_\_\_

What are your reasons for going into business for yourself? \_\_\_\_\_  
\_\_\_\_\_

Describe in your own words those factors which may be relevant to M&M Meat Shops Ltd. in considering your application for a franchise (i.e. lifestyle, intellectual pursuits, community involvement, business experience, personal history, etc.) Please add additional pages or a covering sheet if there is more information that you would like to include.  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

# Personal Financial Statement

I make the following statement of all my assets and liabilities as of the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_

| <b>ASSETS – List and Describe all Assets</b>                                              |  |                       |                        |
|-------------------------------------------------------------------------------------------|--|-----------------------|------------------------|
| Cash on Hand and in Banks (give details on Schedule 4)                                    |  | \$                    |                        |
| Accounts, Loans and Notes Receivable (give details on Schedule 1)                         |  |                       |                        |
| Marketable Securities, Stocks and Bonds, Non Registered (give details on Schedule 2A)     |  |                       |                        |
| Retirement Accounts i.e. Registered Retirement Savings Plan (give details on Schedule 2B) |  |                       |                        |
| Other Retirement Accounts (give details on Schedule 2C)                                   |  |                       |                        |
| Real Estate Owned (give details on Schedule 3)                                            |  |                       |                        |
| Real Estate Mortgages Receivable                                                          |  |                       |                        |
| Automobile(s)                                                                             |  |                       |                        |
| Other Assets (eg. value of existing businesses)                                           |  |                       |                        |
| <b>TOTAL ASSETS</b>                                                                       |  | \$                    |                        |
| <b>LIABILITIES – List and Describe all Liabilities</b>                                    |  | <b>Balance Owning</b> | <b>Monthly Payment</b> |
| Bank Loans                                                                                |  | \$                    | \$                     |
| Amounts Payable to Friends and Relatives (include alimony and child support)              |  |                       |                        |
| Credit Cards (please itemize)                                                             |  |                       |                        |
| Mortgages on Real Estate Owned (give details on Schedule 3)                               |  |                       |                        |
| Unpaid Income Tax and Other Taxes and Interest                                            |  |                       |                        |
| Other Debts (please itemize)                                                              |  |                       |                        |
| <b>TOTAL MONTHLY PAYMENTS</b>                                                             |  |                       | \$                     |
| <b>TOTAL LIABILITIES</b>                                                                  |  | \$                    |                        |
| <b>NET WORTH (TOTAL ASSETS – TOTAL LIABILITIES)</b>                                       |  | \$                    |                        |

Applicant's Salary \_\_\_\_\_ Please itemize other sources of income:  
 Spouse's Salary \_\_\_\_\_  
 Bonus & Commissions \_\_\_\_\_  
 Dividends \_\_\_\_\_  
 Net Real Estate Income \_\_\_\_\_  
 Other Income \_\_\_\_\_  
**Total Annual Income** \_\_\_\_\_

## Schedules

### Accounts, Loans and Notes Receivable – Schedule 1

| Name & Address of Debtor | Amount Owing | Age of Debt | Description and Nature of Debt | Description and Security Held | Date Payment Expected |
|--------------------------|--------------|-------------|--------------------------------|-------------------------------|-----------------------|
|                          |              |             |                                |                               |                       |
|                          |              |             |                                |                               |                       |

### Marketable Securities, Stocks and Bonds, Non-Registered - Schedule 2A

*Provide Copies of Most Recent Statements*

| Number of Units/Shares | Description of Security | Registered to (Name of Brokerage) | Where Quoted or Listed | Present Market Value and Date | Income Received Last Year | Pledged as Collateral |
|------------------------|-------------------------|-----------------------------------|------------------------|-------------------------------|---------------------------|-----------------------|
|                        |                         |                                   |                        |                               |                           |                       |
|                        |                         |                                   |                        |                               |                           |                       |
|                        |                         |                                   |                        |                               |                           |                       |

### Retirement Accounts i.e. Registered Retirement Savings Plan - Schedule 2B

*Provide Copies of Most Recent Statements*

| Number of Units/Shares | Description of Security | Registered to (Name of Brokerage) | Where Quoted or Listed | Present Market Value and Date | Income Received Last Year | Pledged as Collateral |
|------------------------|-------------------------|-----------------------------------|------------------------|-------------------------------|---------------------------|-----------------------|
|                        |                         |                                   |                        |                               |                           |                       |
|                        |                         |                                   |                        |                               |                           |                       |
|                        |                         |                                   |                        |                               |                           |                       |

### Other Retirement Accounts - Schedule 2C

*Provide Copies of Most Recent Statements*

| Number of Units/Shares | Description of Security | Registered to (Name of Brokerage) | Where Quoted or Listed | Present Market Value and Date | Income Received Last Year | Pledged as Collateral |
|------------------------|-------------------------|-----------------------------------|------------------------|-------------------------------|---------------------------|-----------------------|
|                        |                         |                                   |                        |                               |                           |                       |
|                        |                         |                                   |                        |                               |                           |                       |
|                        |                         |                                   |                        |                               |                           |                       |

### Real Estate Owned – Schedule 3

|                                   |                       |                                               |                                               |                                                         |                        |
|-----------------------------------|-----------------------|-----------------------------------------------|-----------------------------------------------|---------------------------------------------------------|------------------------|
| <b>Property Address (Primary)</b> | Type of Property      | Amount of Mortgage<br>\$                      | Monthly Mortgage Payment<br>\$                | Monthly Taxes, Insurance<br>Maintenance and Misc.<br>\$ | Net Monthly Cost<br>\$ |
|                                   | Title in Name of      | First Mortgage<br>\$<br>Second Mortgage<br>\$ | First Mortgage<br>\$<br>Second Mortgage<br>\$ |                                                         |                        |
| First Mortgagee Name & Address    |                       |                                               |                                               |                                                         |                        |
| Second Mortgagee Name & Address   | Month & Year Acquired | Purchase Price<br>\$                          | Current Market Value<br>\$                    |                                                         |                        |
| <b>Property Address (Other)</b>   | Type of Property      | Amount of Mortgage<br>\$                      | Monthly Mortgage Payment<br>\$                | Monthly Taxes, Insurance<br>Maintenance and Misc.<br>\$ | Net Monthly Cost<br>\$ |
|                                   | Title in Name of      | First Mortgage<br>\$<br>Second Mortgage<br>\$ | First Mortgage<br>\$<br>Second Mortgage<br>\$ |                                                         |                        |
| First Mortgagee Name & Address    |                       |                                               |                                               |                                                         |                        |
| Second Mortgagee Name & Address   | Month & Year Acquired | Purchase Price<br>\$                          | Current Market Value<br>\$                    |                                                         |                        |

**Provide names of banks, trust or finance companies where accounts are carried  
or where credit can be obtained - Schedule 4**

| Name and Location of Banks | Cash Balance | Outstanding Loans Loan | Maturity of or Secured | How Endorsed | Guaranteed |
|----------------------------|--------------|------------------------|------------------------|--------------|------------|
|                            |              |                        |                        |              |            |
|                            |              |                        |                        |              |            |
|                            |              |                        |                        |              |            |

**References**

| Name | Address and Telephone | Position/Relationship |
|------|-----------------------|-----------------------|
|      |                       |                       |
|      |                       |                       |
|      |                       |                       |

How much unencumbered funds do you have available for this investment? \_\_\_\_\_

Please list which specific assets you intend to use to meet the cash requirements? (I.e. \$170,000, no RRSPs, free and clear)

a) \_\_\_\_\_ b) \_\_\_\_\_

c) \_\_\_\_\_ d) \_\_\_\_\_

How much capital will you need to borrow? (if any) \_\_\_\_\_

What level of annual income do you expect/require to draw from the business? \_\_\_\_\_

Do you understand that the success or failure of your business is primarily your responsibility? \_\_\_\_\_

Have you ever applied for an M&M Meat Shops franchise before? \_\_\_\_ Yes \_\_\_\_ No If so, when? \_\_\_\_\_

Are you now, or have you been in the last 36 months a Plaintiff or a Defendant in any type of litigation? \_\_\_\_\_

If yes, please give details \_\_\_\_\_

Have you been convicted of an offense for which you have not received a pardon? \_\_\_\_\_

If yes, please give details \_\_\_\_\_

Have you or any company with which you were associated ever been involved in bankruptcy proceedings? \_\_\_\_\_

If yes, please give details \_\_\_\_\_

Are you related to any Officer, Director, supplier, employee or Franchisee of M&M Meat Shops? \_\_\_\_\_

If so, who and what is the relationship? \_\_\_\_\_

The federal government has deemed that information gathered from an individual by a corporation is considered confidential and may not be used for any purpose unless approval has been granted by that individual. Your signature on this form indicates approval for the use of the information provided for our own internal use only.

For the purpose of securing credit and other considerations, the undersigned furnished the foregoing statement and information which fully and truly sets forth the true and accurate financial conditions of the applicant. The undersigned agrees to notify the Franchisor in writing of any changes in its financial condition. The undersigned agrees that a report as to credit and other information is to be obtained for credit now applied for and consents to the disclosure of any such information to any credit grantor or consumer reporting agency with whom we and/or the applicant may transact.

This information will be kept on file for a period of three (3) years at which time paper copies will be destroyed and a new and updated application required. Name, address and telephone numbers will be kept on electronic file for statistical purposes only.

The applicant acknowledges that M&M Meat Shops has many criteria for accepting a franchisee, and reserves the right to reject any applicant without itemizing the reasons for such rejection.

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Witness

\_\_\_\_\_  
Applicant

## **Disclaimer**

M&M Meat Shops Ltd. requires a signed copy of the Confidential Qualification Report and cannot therefore accept emailed copies. **Please mail, fax or courier your completed application to the appropriate office with your signature.**

### ***Please return completed applications to:***

#### **For Ontario, Manitoba, and Atlantic Canada:**

M&M Meat Shops Ltd.  
Attention: Stacey Burgess  
640 Trillium Drive  
P.O. Box 2488  
Kitchener, Ontario N2H 6M3  
(519) 895-1075 Ext 313  
FAX: (519) 895-0762

#### **For Saskatchewan, Alberta, British Columbia, Northwest Territories and Yukon:**

M&M Meat Shops  
Attention: Bonnie Armstrong  
1025 - 10th Street S.E.  
Calgary, Alberta T2G 3E1  
1-800-661-7682 Ext 12  
FAX: (403) 215-4244

#### **For Quebec:**

les aliments M&M  
Attention: Jacques Benjamin  
3872, boul. St-Charles  
Pierrefonds, Quebec H9H 3C6  
(514) 626-0111  
FAX: (514) 626-1378