

# CONFIDENTIAL APPLICATION FOR ACCEPTANCE



This form is not a contract and does not obligate you or MSC.DEV.INC. in any way. We want to know as much as possible about you. This preliminary guide will help us evaluate your qualifications. Please answer all questions.

## PERSONAL INFORMATION

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

Name: \_\_\_\_\_ Home Phone: (\_\_\_\_) \_\_\_\_\_

Address: \_\_\_\_\_ Spouse's Name: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_ How Long at \_\_\_\_\_ Own  
This Address: \_\_\_\_\_ Rent

Office Phone: (\_\_\_\_) \_\_\_\_\_ Soc. Sec. # \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Sex: \_\_\_\_\_ Male \_\_\_\_\_ Female Marital Status: \_\_\_\_\_ No. of Dependents: \_\_\_\_\_

Have you ever been self-employed? \_\_\_\_\_ If yes, explain: \_\_\_\_\_

Have you ever declared bankruptcy? \_\_\_\_\_ If yes, explain: \_\_\_\_\_

Have you ever been convicted of a felony or misdemeanor involving moral turpitude? Yes \_\_\_\_\_ or NO \_\_\_\_\_

If so, please explain: \_\_\_\_\_

Are you currently a party to any pending legal action? \_\_\_\_\_ If yes, explain: \_\_\_\_\_

Employment during last 10 years (List present or last job first)

Employer: \_\_\_\_\_ Salary: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

Employer: \_\_\_\_\_ Salary: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

Employer: \_\_\_\_\_ Salary: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

Employer: \_\_\_\_\_ Salary: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

## REFERENCES (Please list accurate phone numbers for references)

Bank (personal): \_\_\_\_\_ Contact: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

### Character References:

Name: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

City/State/Zip: \_\_\_\_\_ Years Known: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

City/State/Zip: \_\_\_\_\_ Years Known: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

City/State/Zip: \_\_\_\_\_ Years Known: \_\_\_\_\_



1. What area are you interested in? 1<sup>st</sup> \_\_\_\_\_ 2<sup>nd</sup> \_\_\_\_\_
2. How did you hear about our business opportunity? \_\_\_\_\_
3. Will you be an Owner-Operator actually doing the work or an investor? \_\_\_\_\_
4. Do you currently own any other businesses? \_\_\_\_\_
5. Do you have any previous marketing or sales experience? \_\_\_\_\_  
If so, what type? \_\_\_\_\_ How Long? \_\_\_\_\_
6. Will you devote full time to this business? \_\_\_\_\_ If not, what percentage of time? \_\_\_\_\_
7. Will your spouse be active in The Brighter Image business? \_\_\_\_\_
8. If yes, what functions will your spouse perform? \_\_\_\_\_
9. When will you be available to start the business? \_\_\_\_\_
10. Do you have investor-associates in this venture (include relatives)? \_\_\_\_\_

Please Rate Yourself as Candidly As Possible	Above Average	Average	Below Average	
My ability to communicate with business owners is	_____	_____	_____	_____
My ability to work independently	_____	_____	_____	_____
My ability to complete any task with quality work	_____	_____	_____	_____
My willingness to cooperate with the guidance of others	_____	_____	_____	_____

11. How will you finance this investment? \_\_\_\_\_ Cash \_\_\_\_\_ Loan \_\_\_\_\_ Collateral \_\_\_\_\_
12. How much of the total investment will come from your own capital? \_\_\_\_\_
13. Do you understand that the success of Brighter Image business is primarily your responsibility? \_\_\_\_\_
14. Please describe why you believe that you have the character to be successful as a Brighter Image PTW distributor.  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**FINANCIAL QUALIFICATION REPORT**

Because this business requires a substantial cash investment, it is necessary to establish your net worth. In order to properly evaluate your application, we request that you fill out this form as accurately and completely as possible. This information will be held in absolute confidence and does not obligate either party.

Name: _____ Date: _____
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I make the following statement of my assets and liabilities as of the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_.

Cash	\$	Notes Payable to Banks	\$
Accounts and Loans Receivable		Notes Payable to Others	
Life Insurance, Cash Surrender Value			
Stocks and Bonds		Accounts Payable	
Real Estate		Mortgages Payable	
Automobiles (Registered in own name)		Other Liabilities (Itemized)	
Other Assets (Itemized)		<b>Total Liabilities: (B)</b>	
		<b>NET WORTH: (A - B)</b>	
<b>Total Assets: (A)</b>	\$	<b>Total Liabilities &amp; Net Worth:</b>	\$

**READ COMPLETELY AND SIGN BELOW:**

The undersigned hereby certifies that the information contained herein is true and factual to the best of my knowledge. I understand that MCS DEV.INC may obtain other investigative reports regarding my character, financial stability and personal characteristics, and may contact any person named in this form; however, my present employer will not be contacted until my permission is secured. I understand that MCS. DEV. INC. will keep this information confidential."

APPLICANT'S SIGNATURE: \_\_\_\_\_ Date: \_\_\_\_\_

**Please return by Fax to 1-817.207.8205 or by Email INFO@71WHITE.COM.att: MSC. DEV. INC**  
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