



Please Attach
Your Business
Card Here

7 VILLAGE GROUP

www.7villagenoodlehouse.com

Confidential Licensing Application and Registration Form

Yes, I am interested to find out more of 7 VILLAGE RESTAURANT Licensing Business Partnership.
The following is my information and you are at liberty to check with my details and credit rating if requested.

PERSONAL INFORMATION

Date of Application : _____

NAME (Dr/Mr/Mrs/Miss/Mdm) : _____

Date of Birth : _____ Age : _____ Sex : F / M Marial Status : _____

NRIC / Passport Number : _____ Nationality : _____

Mobile Phone Number : _____ Email Address : _____

Home Address : _____

Postal Code : _____ City : _____ State : _____

Occupation : _____

Company Name : _____

Applicant's Licensing Plans

Will The License Be Owned And Operated By Yourself, Family Members Or A Group ?

Have You Or Your Company Any Experience In Related Business(s) ? Please Provide Details.

Have You Or Your Company Had Any Experience In Dealing With Any Other Licensing / Franchise Business(s) ? Please Provide Details

Have You Ever Any Previous Experience Of Running Your Own Business ? _____
If YES, Please Provide Details.

How Soon Do You Want To Get Into Business & Amount Of Capital Available For This Business ?
Please Explain

Which Geographical Area Are You Most Interested In ?

a) _____

b) _____

c) _____

Premise : Corner Lot End Lot Intermediate

Shoplot Floor Area Size : _____

Walkway Outside : _____

Purpose : Investor Main Income 2nd Income

Education

Please List Educational Background : High School College (Degrees If Any)

SIGNED :

Date :

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***Please Email the filled form to our email: 7villagefranchise@gmail.com**