

HAPPY CAT HOTEL FRANCHISING INC.
 446 Broad Street
 Windsor, CT 06095
 844-422-8386 x2
 franchise@happycathotel.com



Personal Financial Statements	
I make the following statement regarding my assets and liabilities as of this _____ day _____ of 20____.	
Assets	Values
Immediately available cash (on hand or in bank)	\$
Vested profit sharing/pension	\$
Listed stocks/bonds/debentures	\$
Notes/accounts/mortgage receivable	\$
Existing business/ownership	\$
Real Estate	\$
Other assets	\$
Total Assets	\$
Liabilities	Values
Accounts/credit cards payable	\$
Secured notes/loans payable to banks	\$
Unsecured notes/loans payable to banks	\$
Secured notes payable to others	\$
Unsecured notes payable to others	\$
Mortgages payable on real estate	\$
Other business liabilities	\$
Taxes and assessments payable	\$
Other liabilities	\$
Total Liabilities	\$
Net Worth (Total Assets- Total Liabilities)	\$

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Acknowledgement & Consent

The undersigned certifies that the information contained in this application is a true and correct statement of the personal and financial affairs of the undersigned on the date indicated below. In the event that these affairs change, the undersigned agrees to notify Happy Cat Hotel Franchising Inc. in writing of all such change(s) as soon as practicable.

The undersigned acknowledges that Happy Cat Hotel Franchising Inc. requires certain information to determine whether the undersigned would be a suitable franchisee. The undersigned hereby consents to Happy Cat Hotel Franchising Inc. and its agents to retain information regarding the undersigned's financial status, criminal record history, litigation history, educational and professional credentials, employment history, personal characteristics and general reputation.

Such information will be used solely for the purpose of evaluating and re-evaluating, from time to time, the credit worthiness of the forgoing named persons as it related to the payment of all monies owed to Happy Cat Hotel Franchising Inc.

Dated this _____ day of _____, 20_____.

Signature

Name of Applicant (please print)