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CONFIDENTIAL QUESTIONNAIRE

PLEASE PRINT OR TYPE

Name:		_ Address:		
City:	State: _		Zip Code:	
Telephone: Home:	Office:	Fax:	(Cell:
E-Mail Address:		Date of Birth:		
Previous Address:				
	Married If married, name of spous			
Previous work/business ex	perience, starting with the most recent:			
Company	Address	Po	sition	Number of Years
If you are also also to the state of		-0.0	a eff ancial la el e	1
•	s, how many years? Annual revenue	•		
	% of Reve		_	
	% of Reve		•	
3. Product 3	% of Reve	nue Years	Selling	
In what market area are you	interested in eneming an Feet/iou. America	. Declarating		
•	interested in opening an EcoView America	·	Carrate	
-	State		-	
-	State		-	
-	State		-	
	be open? Less than 30 days			
	luid funding) do you have to invest in start- ng days and fully commit to the start-up of y			001-\$50,000 🗆\$50,000+
•				
•	Yes			
Do you intend to keep your co	urrent employment after the EcoView Ame	rica business opens? Yes	□ No	
Will you be managing the Eco	oView America business? Yes	No Do you have a manager to	manage the bus	siness?
You must be available for one	e week of training shortly before the EcoVie	ew America business opens. W	ill you be availabl	e to do this? Yes No
	nnaire does not constitute acceptance lonly be granted by executing a written li	-	plicant as a lice	nsee nor does it grant any
limited to, business information, i.e.,	nowledges that EcoView America Licensor may proving pricing data, sources of supply, financial data and more to use information on his or her own behalf or discloss	arketing plans. Applicant agrees to reta		
Print Nar	me Sigr	nature		Date
	For Of	fice Use Only		
	For Visit to Headquarters:	-	for Licensee:	
	☐ Approved ☐ Denied	□ Approved	Denied	