



BOEREWORS CART APPLICATION

The purpose of this RJ's Boerewors Cart application is to provide information for a preliminary evaluation of the applicant(s) by RJ'S Famous Rib Steakhouse Group (Pty) Ltd. The application must be completed in full.



APPLICANT INFORMATION

Area of Intent:

- Town : _____
- Suburb : _____

Please provide below the name of a principal contact to whom all correspondence should be addressed and who has authority to act as the applicant.

Name: _____ Home number: _____

Fax Number: _____

Cell Number: _____

Email Address: _____

Date of Birth: _____ I.D. Number: _____

Marital Status: _____ Name of Spouse; _____

Dependants: _____

Residential Address : _____

_____ Code: _____

Postal Address : _____

_____ Code: _____

Are you a South African citizen? Yes No

If not, what is your status? _____

EMPLOYMENT RECORD

Current Employer: _____

Physical Address: _____

Postal Address: _____ Code: _____

Phone No: _____ Fax No: _____

Position Held: _____

Date Started: _____



Please attach C.V. Yes No

Have you ever owned your own business/franchise? If yes, please provide details. _____

ADDITIONAL QUESTIONS

1. Do you expect to devote your full-time attention to this business?

2. If not full-time, what percentage?

3. Will you employ a full-time Employee?

4. When will you be able to start this venture? _____

5. Please provide details of the experience you have in the food industry:

6. How do you plan to finance this project?

LOCATION INFORMATION

Location:

Street: _____

City: _____

Approximate rent if applicable: _____



**THIS IS THE INTELLECTUAL PROPERTY
RJ'S FAMOUS RIB STEAKHOUSE T/A
RJ'S HEAD OFFICE AND MAY NOT BE
DUPLICATED**

Please note that, upon qualification of application, an invoice will be forwarded to you and a to the value of R20 000.00 will be required to be paid. Your cart will be delivered to you within 7-14 days. Delivery in Durban areas will be free and sites outside Durban attract a delivery fee.

I, the undersigned hereby declare that the above information is, to the best of my knowledge correct. I hereby agree that RJ's Head Office may carry out a credit reference enquiry.

Signature of Applicant: _____

Full Name: _____

Date: _____

Witness: _____

PLEASE ATTACH COPY OF ID DOCUMENT AND PROOF OF RESIDENTIAL ADDRESS.

HEAD OFFICE CONTACT DETAILS

Chucky- 0837753957

rjs@riskzn.co.za

Fax-email: 0862954743

Rani - 0837753957

rani@riskzn.co.za

Fax-email: 0862954710



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