



Dear Candidate;

Thank you for your interest in Nutter's Bulk & Natural Foods Ltd. The first step in our franchise selection process is to complete and return our Confidential Qualification Report (CQR).

In order to properly complete the CQR, we request that you review the franchise information found on the Nutter's website.

Important Points to Remember:

- Please be as specific as possible in your location preferences.
- **The minimum financial requirements for a franchise are:**

New Store total cost: Approximately \$300,000 to \$350,000

Applicants must demonstrate that they have enough funds for 50% of the total cost of the store. This can be in the form of cash on hand, stocks or home equity. If using home equity please note that one spouse must keep their employment to service personal debt and living expenses. We do not allow the use of RRSPs.

Refranchise: Each refranchise opportunity will have unique financial requirements. Please contact our Franchising Department to discuss the specifics for your location of interest.

Upon receiving your fully completed CQR, we will acknowledge receipt by contacting you within 10 business days or sooner. To become an approved franchisee, the selection process includes interviews at Nutter's Bulk & Natural Foods Head Office and an in-store review at a corporate store.

Please note that we do not have a "waiting list". The length of time between submitting a CQR and awarding a store is impossible to estimate. We aim to choose the most qualified and best matching candidate to each opportunity. Incomplete CQRs will be returned by mail. We encourage you to include a covering letter and clarify any additional information on how you meet the requirements of becoming a Nutter's franchisee.

Thank you for your time and consideration of Nutter's. If you have any questions regarding the CQR or franchising process, please contact our Franchising department.

Yours in health;

Nutter's Bulk & Natural Foods Ltd.

Business/Work Experience

(Give present or last position first. If additional space is required, please attach a separate sheet. Please advise if you wish your present employer not be contacted.)

Company: _____	Address: _____
Type of business: _____	Employed from: _____
Position: _____	Annual Salary: _____
Supervisor: _____	Telephone: () _____
Describe duties, responsibilities and number of employees supervised: _____	

Company: _____	Address: _____
Type of business: _____	Employed from: _____
Position: _____	Annual Salary: _____
Supervisor: _____	Telephone: () _____
Describe duties, responsibilities and number of employees supervised: _____	

Company: _____	Address: _____
Type of business: _____	Employed from: _____
Position: _____	Annual Salary: _____
Supervisor: _____	Telephone: () _____
Describe duties, responsibilities and number of employees supervised: _____	

Do you now or have you ever owned or had a business venture? _____

If yes, please state details: _____

Please describe any previous experience relevant to the natural food or health food retail industry: _____

Please rate your computer literacy. Ten (10) being strong. (circle) 1 2 3 4 5 6 7 8 9 10

Education (enter last year completed)

High School: Grade _____ College/University: _____ Years

Designation or Degree obtained: _____

If University or College Graduate provide name of institution: _____

Describe any training in sales, management or retailing: _____

Additional Information

How or why did you become interested in Nutter's? _____

What other businesses have you investigated? _____

How long have you been looking for a business? _____

What do you like about the Nutter's retail concept? _____

Have you tried our products? Describe in more detail _____

What does the term "franchising" mean to you? How would you describe the roles of the franchisor and the franchisee? _____

There are some basic ingredients to every successful business. If you were awarded a franchise, what would you do to make it successful? _____

Will you have a business partner (other than spouse)? _____ Yes _____ No

Name of partner(s) _____

(Note: A separate application and financial statement is required of each partner. Underline name of operating partner.
Nutter's Bulk & Natural Foods Ltd. reserves the right to give preference to those who are financially qualified without a business partner.)

Relationship: _____ Involvement: (F/T, P/T or investment only) _____

If married, or applying with a partner, will one of you continue to work at your current place of employment after the franchise is awarded? _____ Yes _____ No For how long? _____

How many hours per week are you willing to devote to the business? _____

How many hours per week is your spouse and/or partner willing to devote to the business? _____

Are you prepared to work Sundays? _____

When would you be able to start this venture? _____

What are your reasons for going into business for yourself? _____

Describe in your own words those factors which may be relevant to Nutter's in considering your application for a franchise (i.e. lifestyle, intellectual pursuits, community involvement, business experience, personal history, etc.) Please add additional pages or a covering sheet if there is more information that you would like to include.

Personal Financial Statement

I make the following statement of all my assets and liabilities as of the _____ day of _____, 20____

ASSETS – List and Describe all Assets	\$
Cash on Hand and in Banks (give details on Schedule 4)	
Accounts, Loans and Notes Receivable (give details on Schedule 1)	
Marketable Securities, Stocks and Bonds, Non Registered (give details on Schedule 2A)	
Retirement Accounts i.e. Registered Retirement Savings Plan (give details on Schedule 2B)	
Other Retirement Accounts (give details on Schedule 2C)	
Real Estate Owned (give details on Schedule 3)	
Real Estate Mortgages Receivable	
Automobile(s)	
Other Assets (eg. Value of existing business)	
TOTAL ASSETS	\$

LIABILITIES – List and Describe all Liabilities	Balance Owing	Monthly Payment
Bank Loans	\$	\$
Amounts Payable to Friends and Relatives (include alimony and child support)		
Credit Cards (please itemize)		
Mortgages on Real Estate Owned (give details on Schedule 3)		
Unpaid Income Tax and Other Taxes and Interest		
Other Debt (please itemize)		
TOTAL MONTHLY PAYMENTS		\$
TOTAL LIABILITIES	\$	
NET WORTH (TOTAL ASSETS – TOTAL LIABILITIES)	\$	

Applicant's Salary _____ Please itemize other sources of income:

Spouse's Salary _____

Bonus & Commissions _____

Dividends _____

Net Real Estate Income _____

Other Income _____

Total Annual Income _____

Schedules: (copies of statements noted in Schedules 1, 2A, 2B, 2C, 3 & 4 maybe requested to confirm information)

Accounts, Loans and Notes Receivable – Schedule 1						
Name & Address of Debtor	Amount Owing	Age of Debt	Description and Nature of Debt	Description and Security Held	Date Payment Expected	
Marketable Securities, Stocks and Bonds, Non-Registered – Schedule 2A						
Number of Units/Shares	Description of Security	Registered to (Name of Brokerage)	Where Quoted or Listed	Present Market Value and Date	Income Received Last Year	Pledged As Collateral
Retirement Accounts i.e. Registered Retirement Savings Plan – Schedule 2B						
Number of Units/Shares	Description of Security	Registered to (Name of Brokerage)	Where Quoted or Listed	Present Market Value and Date	Income Received Last Year	Pledged As Collateral
Other Retirement Accounts – Schedule 2C						
Number of Units/Shares	Description of Security	Registered to (Name of Brokerage)	Where Quoted or Listed	Present Market Value and Date	Income Received Last Year	Pledged As Collateral
Real Estate Owned – Schedule 3						
Property Address (Primary)	Type of Property	Amount of Mortgage	Monthly Mortgage Payment		Monthly Taxes, Insurance Maintenance and Misc.	Net Monthly Cost
		\$	\$	\$	\$	\$
First Mortgagee Name & Address	Title in Name of	First Mortgage	First Mortgage			
		\$	\$	\$		
Second Mortgagee Name & Address	Second Mortgage	Second Mortgage				
		\$	\$			
Second Mortgagee Name & Address	Month & Year Acquired		Purchase Price		Current Market Value	
			\$		\$	
Property Address (Other)	Type of Property	Amount of Mortgage	Monthly Mortgage Payment		Monthly Taxes, Insurance Maintenance and Misc.	Net Monthly Cost
		\$	\$	\$	\$	\$
First Mortgagee Name & Address	Title in Name of	First Mortgage	First Mortgage			
		\$	\$	\$		
Second Mortgagee Name & Address	Second Mortgage	Second Mortgage				
		\$	\$			
Second Mortgagee Name & Address	Month & Year Acquired		Purchase Price		Current Market Value	
			\$		\$	

**Provide names of banks, trust or finance companies where accounts are carried
or where credit can be obtained – Schedule 4**

Name and Location of Banks	Cash Balance	Outstanding Loans Loan	Maturity of or Secured	How Endorsed	Guaranteed

References (Provide Three)

Name	Address	Telephone #	Relationship (personal or business)

How much unencumbered funds do you have available for this investment? _____

Please list which specific assets you intend to use to meet the cash requirements? (i.e. \$175,000, no RRSP's, free and clear)

a) _____ b) _____

c) _____ d) _____

How much capital will you need to borrow? (if any) _____

What level of annual income do you expect/require to draw from the business? _____

Do you understand that the success or failure of your business is primarily your responsibility? _____

Have you ever applied for a Nutter's franchise before? _____ Yes _____ No If so, when? _____

Are you now, or have you been in the last 36 months a Plaintiff or a Defendant in any type of litigation? _____

If yes, please give details _____

Have you been convicted of an offense for which you have not received a pardon? _____

If yes, please give details _____

Have you or any company with which you were associated ever been involved in bankruptcy proceedings? _____

If yes, please give details _____

Are you related to any Officer, Director, supplier, employee or Franchisee of Nutter's? _____

If so, who and what is the relationship? _____

The federal government has deemed that information gathered from an individual by a corporation is considered confidential and may not be used for any purpose unless approval has been granted by that individual. Your signature on this form indicates approval for the use of the information provided for our own internal use only.

For the purpose of securing credit and other considerations, the undersigned furnished the foregoing statement and information which fully and truly sets forth the true and accurate financial conditions of the applicant. The undersigned agrees to notify the Franchisor in writing of any changes in its financial condition. The undersigned agrees that a report as to credit and other information is to be obtained for credit now applied for and consents to the disclosure of any such information to any credit grantor or consumer reporting agency with whom we and/or the applicant may transact.

This information will be kept on file for a period of three (3) years at which time paper copies will be destroyed and a new and updated application required. Name, address and telephone numbers will be kept on electronic file for statistical purposes only.

The applicant acknowledges that Nutter's Bulk & Natural Foods Ltd. has many criteria for accepting a franchisee, and reserves the right to reject any applicant without itemizing the reasons for such rejection.

Dated this _____ day of _____, 20____.

Applicant

Co-Applicant

Witness

Print Name

Print Name

Print Name

Disclaimer

Nutter's Bulk & Natural Foods requires a signed copy of the Confidential Qualification Report and cannot therefore accept emailed copies. **Please mail, fax or courier your completed application to Nutter's Head Office with your signature.**

Please return completed applications to:

Nutter's Bulk & Natural Foods Ltd.
Attention: Donald Cranston
Suite 107, 1061 Dunmore Road S.E.
Medicine Hat, AB T1A 1Z8
Ph: 1-800-665-5122
Fax: (403) 529-6507
Email: medicinehat@nutters.com