



**dwell CBD  
FRANCHISE APPLICATION**

Submitted By \_\_\_\_\_

A Resident Of \_\_\_\_\_

Your submission of the completed Personal Profile begins the Franchise Application process with Dwell CBD LLC. ("dwell"). dwell will use the information you submit and other information in making assessments about your franchise application. A separate Personal Profile must be submitted for each individual you propose to be involved in your business as (i) an operator or (ii) an equity owner with at least ten percent (10%) ownership interest in the entity proposed to be the franchisee.

Submitting this Personal Profile does not obligate you to enter into any agreement relating to a dwell CBD Store franchise with dwell and does not obligate dwell to grant a franchise to you. Neither you nor dwell will have any contractual obligation concerning a dwell CBD Store franchise unless and until a formal written agreement is executed by you and by an authorized dwell representative.

Provide complete and accurate information as requested. Attach Additional Information Sheets as necessary to provide a complete response. Please type or print legibly.

Please send application to: [support@dwellcbd.com](mailto:support@dwellcbd.com) Attn: Franchise Office

**1. CONTACT INFORMATION**

Name: \_\_\_\_\_  
Last First Middle Nickname

Address: \_\_\_\_\_  
Including Apartment Number, if applicable

\_\_\_\_\_  
City State/Province Zip/Postal Code Country

Mobile Telephone (\_\_\_\_) \_\_\_\_\_

E-mail Address \_\_\_\_\_

Previous Address: \_\_\_\_\_  
Including Apartment Number, if applicable

\_\_\_\_\_  
City State/Province Zip/Postal Code Country

List any other countries you have lived in after the age of twenty-one (21), other than indicated above, and how long you have lived in that country: \_\_\_\_\_

**2. PERSONAL INFORMATION**

2.1 General

Social Security/Insurance Number \_\_\_\_\_ Driver's License Number \_\_\_\_\_

Date of Birth \_\_\_\_\_ Marital Status \_\_\_\_\_

I am a citizen of \_\_\_\_\_ I have permanent residence rights in \_\_\_\_\_

Number of Dependents \_\_\_\_\_ Age of Dependents \_\_\_\_\_

Home: Own  Rent  How long? \_\_\_\_\_ Gender:  Female  Male  Other

2.2 My immigration status, if applicable, is \_\_\_\_\_  
(Attach supporting documentation.)

2.3 Military Service \_\_\_\_\_ From \_\_\_\_\_ to \_\_\_\_\_

Branch of Service \_\_\_\_\_ Rate or Rank \_\_\_\_\_

Type of Discharge or Current Status \_\_\_\_\_

**3. BACKGROUND AND RELATIONSHIPS**

3.1 Have you ever been convicted of a felony or misdemeanor or are such charges pending, being appealed, or are you under indictment? (Do not include minor traffic violations) Yes  No

3.2 Have you ever sought protection under bankruptcy or other similar laws? Yes  No

3.3 Have you been an owner or executive of a company in bankruptcy (other than a passive owner of publicly traded shares)? Yes  No

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dwell CBD Store, including but not limited to a competitor of the Dwell CBD® brand?

- 3.5 Are you involved in any pending litigation? Yes No
- 3.6 Have you ever had a business failure? Yes No

If you answered "yes" to any of the above questions, please provide details on an Additional Information Sheet.

**4. EXPERIENCE**

4.1 Present Occupation

From: \_\_\_\_\_ to \_\_\_\_\_

Company: \_\_\_\_\_

Position/Title: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: (\_\_\_\_) \_\_\_\_\_

Annual Salary: \_\_\_\_\_

Supervisor: \_\_\_\_\_

Describe the company's business, duties and responsibilities, and number of employees you supervise:

May we contact your present employer?

Yes  No

May we contact you at your business?

Yes  No

4.2 Previous Experience (Use Additional Information Sheets as needed.)

From: \_\_\_\_\_ to \_\_\_\_\_

Company: \_\_\_\_\_

Position: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: (\_\_\_\_) \_\_\_\_\_

Supervisor: \_\_\_\_\_

Describe duties, responsibilities and number of employees supervised: \_\_\_\_\_

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## EDUCATION

Name and location of schools, years completed and degrees earned.

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### 6. BUSINESS INTEREST

- 6.1 Will any person other than you (including your spouse) contribute any funds or resources (including real estate) to the franchise opportunity you are seeking? (If yes, provide details on Additional Information Sheet.) Yes  No
- 6.2 I am interested in buying an existing Dwell CBD Store. Yes  No
- 6.3 I have identified one or more specific Dwell CBD Stores that I am interested in buying. (If yes, provide details on Additional Information Sheet.) Yes  No
- 6.4 I am interested in opening a new Dwell CBD Store. Yes  No
- 6.5 I have identified one or more specific locations at which I am interested in operating a Dwell CBD Store. Yes  No
- 6.6 I have the resources and interest to own multiple Dwell CBD Stores. Yes  No
- 6.7 The following are my geographic preferences:  
1<sup>st</sup> \_\_\_\_\_ 2<sup>nd</sup> \_\_\_\_\_ 3<sup>rd</sup> \_\_\_\_\_
- 6.8 Are you willing to relocate? Yes  No
- 6.9 Do you intend to spend full time operating your dwell CBD Store business if you become a franchisee? Yes  No
- 6.10 Do you currently have an ownership interest in any business venture, including commercial real estate? If yes, provide details on separate sheet. Yes  No

### 7. FINANCIAL RESOURCES AND ORGANIZATION

How much cash can you personally invest in a dwell CBD Store business? \$ \_\_\_\_\_

7.2 What is the source of those funds? \_\_\_\_\_

7.3 What is your approximate net worth? \$ \_\_\_\_\_

7.4 What cash or liquid funds do you currently have? \$ \_\_\_\_\_

7.5 If you will not be the only owner in the business, list all owners and investors below and describe their participation.

	<u>Name of Owner</u>	<u>Percent Ownership</u>	<u>Expected Cash Investment</u>	<u>Approximate Net Worth</u>
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____

7.6 Which owner will function as the "chief executive" in your group? \_\_\_\_\_

7.7 Who will be full time in charge of dwell CBD Store operations? \_\_\_\_\_

7.8 Which owner/s plan to devote full time to the dwell CBD Store business? \_\_\_\_\_

- 7.9 Will any person or entity other than the partners be entitled to receive, directly or indirectly, part of the profits from the operation of the dwell CBD Store? Yes No  
If so, provide details on Additional Information Sheet.    
If you are approved for a dwell CBD Store franchise, will any partner be involved? Yes No  
7.10 in any business activity other than the dwell CBD Store business? (If so, provide details on Additional Information Sheet.)    
7.11 Will the Operating Partner receive income from any source other than the dwell CBD Store? (If so, provide details on Additional Information Sheet.) Yes  No

**8. REFERENCES/OTHER**

Please provide contact information for at least three references who are familiar with your character and business accomplishments. References from family members will not be considered.

<u>Name</u>	<u>Relationship</u>	<u>Telephone</u>	<u>E-mail</u>

- Attachments: Resume \_\_\_\_\_ pages attached  
Personal Financial Statement \_\_\_\_\_ pages attached  
Tax Returns (last 2 years) \_\_\_\_\_ pages attached  
Proof of Bank Financing \_\_\_\_\_ pages attached  
Asset Verification documents \_\_\_\_\_ pages attached  
Proof of Salary \_\_\_\_\_ pages attached  
Broker Statement of Account for Investments \_\_\_\_\_ pages attached  
Current Loan Statements for Outstanding Loans \_\_\_\_\_ pages attached  
Real Estate Valuation from Registered Agent \_\_\_\_\_ pages attached  
Other (Discretionary) \_\_\_\_\_ pages attached

**Applicant's Statement and Verification:**

I am submitting this Personal Profile as part of my application for a dwell CBD Store franchise. I confirm and represent that the personal and financial information I am submitting is true and complete as of the date below. I understand that dwell and its affiliates consider this information important and may rely on the information I submit in making decisions about whether to continue processing my franchise application, to allow me access to training programs and confidential materials, and to enter into an agreement with me. If there is any material change in the information submitted here or later submitted by me during the franchise application process with dwell, I will promptly notify dwell in writing of the change or formally withdraw my application so that dwell does not rely on information that to my knowledge has become incorrect or incomplete in any material way.

I authorize dwell to check my character, my background, my motor vehicle record, and my financial and credit history. I expressly authorize any past or present employer, any law enforcement agency, and any person who has knowledge of my character, experience and activities (including by way of example, education and work experience), or financial or credit history to release this information to dwell. I understand that one or more credit reporting agencies may make credit histories available to dwell upon which it may rely, and that financial institutions with which I have relationships may also supply information about their relationship with me. If any person authorized by me provides true and accurate information to dwell about me, then to the extent that person is or would be liable to me in any way as a result of furnishing such information, I release such person from such liability. I authorize dwell to release to prospective financing sources such financial and other information concerning me in its files as may be requested.

In addition, I authorize the procurement of an investigative background search in accordance with anti-terrorism legislation, such as the USA Patriot Act and Section 1 of U.S. Executive Order 13224, issued September 23, 2001, if applicable. I also certify that neither I nor any of my funding sources, is or has ever been a terrorist or suspected terrorist, or a person or entity described in the aforementioned legislation. I understand that my application will not be approved if I have ever been a suspected terrorist or associated in any way with terrorist activities.

By submitting this application, I consent to dwell and its agents or designees collecting, using, disclosing, and retaining my personal information as is reasonably required in the course of dwell's evaluation of my application, including to assess my eligibility, process my application, and respond to me. For further information concerning how dwell collects, uses, discloses, and retains personal information, please refer to dwell's privacy policy at [www.dwellcbd.com](http://www.dwellcbd.com) or send an email to [support@dwellcbd.com](mailto:support@dwellcbd.com) and ask for a copy.

I acknowledge and consent to the collection of additional information and investigation with respect to the information provided above, and with respect to my financial status, litigation history, criminal record history, educational credentials, employment history, driving record, reputation, and mode of living. I also hereby consent to dwell's collecting, using, disclosing, and retaining such information and conducting further investigations with respect to such information. I consent to the updating of this information from time to time, when necessary.

\_\_\_\_\_  
**Print Name**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Signature**

dwell CBD is an equal opportunity franchisor committed to expanding franchise ownership opportunities for members of minority groups. You are not required to identify your ethnic group. The following is solely intended to assist dwell in measuring its progress against those commitments.

**Asian Pacific**

**Hispanic**

**African American**

**Native American**

**Caucasian**

**Indian/Pakistan/Middle Eastern**

**Two or more races**

## PERSONAL FINANCIAL STATEMENT

As of \_\_\_\_\_:

<b>ASSETS</b>		
<b>LIQUID ASSETS</b>		
(A)	Cash (Unrestricted) (see attached Schedule No. 1)	\$
(B)	Publicly Traded Stocks, Bonds and Government Securities (see attached Schedule No. 2)	\$
(C)	<b>TOTAL LIQUID ASSETS (A &amp; B)</b>	<b>\$</b>
<b>NON-LIQUID ASSETS</b>		
(D)	Real Estate (See attached Schedule No. 3)	\$
(E)	Market Based Equity in Dwell CBD Store Business (See attached Schedule No. 4)	\$
(F)	Personal Property (Automobiles, Jewelry, Household Other) (see attached Schedule 5)	\$
(G)	Other Assets, as applicable, (IRA's, 401K's, RSP's, Pension Plans, Cash Value of Life Insurance, Notes Receivables, Value on Non- Dwell CBD Store business) (See attached Schedule No. 6)	\$
(H)	<b>TOTAL NON-LIQUID ASSETS (D + E + F + G)</b>	<b>\$</b>
(I)	<b>TOTAL ASSETS (C &amp; H)</b>	<b>\$</b>
<b>LIABILITIES</b>		
(J)	Notes Payable – Unsecured (See attached Schedule No. 7)	\$
(K)	Notes Payable – Secured (See attached Schedule No. 7)	\$
(L)	Mortgages Payable – Real Estate (See attached Schedule No. 3)	\$
(M)	All other Liabilities (See attached Schedule No. 7)	\$
(N)	<b>TOTAL LIABILITIES (J + K + L + M)</b>	<b>\$</b>
<b>NET WORTH (I &amp; N)</b>		<b>\$</b>

The undersigned certifies that the information furnished in this personal financial statement is true, correct, and complete.

\_\_\_\_\_  
Name (Type or Print) Name (Type or Print)

\_\_\_\_\_  
Signature Signature

\_\_\_\_\_  
Date Date

**Personal Financial Statement  
Supplementary Schedules**

**No. 1 – Cash (Unrestricted)**

Name of Institution/Description	Type of Account	Date of Statement	Balance
<b>Total</b>			

Ties to (A)

**No. 2 – Publicly Trade Stocks, Bonds and Government Securities**

Name/Description	Type	# of Shares	Estimated Value
<b>Total</b>			

Ties to (B)

**No. 3 – Real Estate**

(Attach a separate list if necessary)

Type of Property	Street Address City, State	Estimated Market Value	Mortgage Balance	Equity in Real Estate
<b>Total</b>				

Ties to (D)

Ties to (L)

**No. 4 – Market Based Equity in Dwell CBD Store Business (Include ONLY your existing financial stake in Dwell CBD Store Business. Do NOT include projected equity in a contemplated transaction.)**

(A)	(B)	(C)	(D)	(E)	(F)	
EBITDA	EBITDA Multiple	Market Value of Business (A) X (B)	Liabilities	Market Based Value of Business (C) – (D)	Percent Ownership	Market Based Equity in Dwell CBD Store Business (E) x (F)

Ties to (E)

**No. 5 Personal Property**  
 (include Automobiles, Jewelry, Household, Other)

Asset Description	Estimate Value
<b>Total</b>	

Ties to (F)

**No. 6 Other Assets**  
 (include IRA's, 401K's, RSP'S, pension plans, notes receivable, cash value of insurance, etc.)

Asset Description	Estimate Value
<b>Total</b>	

Ties to (G)

**Non- Dwell CBD Store Business:**

(A)	(B)	(C)	(D)	(E)	(F)	
		Market Value of Business		Market Based Value of Business	Percent Ownership	Market Based Equity in Non-Dwell CBD Store Business
EBITDA	EBITDA Multiple	(A) X (B)	Liabilities	(C) – (D)		(E) x (F)

Ties to (G)

**No. 7 – Notes, Loans, Accounts Payable and Other Liabilities**  
 (Attach a separate list if necessary)

Name of Lender	Description/ Type Of Debt	Collateral (if any)	Monthly Payment	Balance
<b>Total Unsecured</b>			Ties to (J)	
<b>Total Secured</b>			Ties to (K&L)	
<b>Total Other Liabilities</b>			Ties to (M)	