

Form A – Uniform Franchise Registration Application

UNIFORM FRANCHISE REGISTRATION APPLICATION

File No. _____
(Insert file number of immediately preceding filing of Applicant)

State: _____

Fee: _____

APPLICATION FOR (Check only one):

_____ **INITIAL REGISTRATION OF AN OFFER AND SALE OF FRANCHISES**

_____ **RENEWAL APPLICATION OR ANNUAL REPORT**

_____ **PRE-EFFECTIVE AMENDMENT**

_____ **POST-EFFECTIVE MATERIAL AMENDMENT**

- 1. Full legal name of Franchisor:**
- 2. Name of the franchise offering:**
- 3. Franchisor's principal business address:**
- 4. Name and address of Franchisor's agent in this State authorized to receive service of process:**
- 5. The states in which this application is or will be shortly on file:**

- 6. Name, address, telephone and facsimile numbers, and e-mail address of person to whom communications regarding this application should be directed:

Certification

I certify and swear under penalty of law that I have read and know the contents of this application, including the Franchise Disclosure Document with an issuance date of _____ attached as an exhibit, and that all material facts stated in all those documents are accurate and those documents do not contain any material omissions. I further certify that I am duly authorized to make this certification on behalf of the Franchisor and that I do so upon my personal knowledge.

Signed at _____, _____, 20____

Franchisor:

By: _____

Name: _____

Title: _____