



LIPIZZANER®
CONFISERIE & COFFEE SHOP

FRANCHISE APPLICATION

Please fill out the following fields in well readable writing or use your PC.

1. Generals:

You submit this application as: (if you are submitting this application as entrepreneur, please additionally fill out point 5 of this form)	<input type="radio"/> Private person/Company founder <input type="radio"/> independent entrepreneur <input type="radio"/> Coffee house/hotel
Where do you wish to open a Lipizzaner Confiserie & Coffee Shop?	
Do you have any business relations to Lecon Group?	<input type="radio"/> no <input type="radio"/> client/guest <input type="radio"/> supplier

2. Personal Data:

Surname:	
First name:	
address:	
Phone private:	
Phone business:	
Facsimile:	
E-mail:	

4. Education:

School type	Completion	
Primary school:	<input type="radio"/> yes	<input type="radio"/> no
Elementary school:	<input type="radio"/> yes	<input type="radio"/> no
Intermediate high-school certificate :	<input type="radio"/> yes	<input type="radio"/> no
Final examination / qualifying for university entrance:	<input type="radio"/> yes	<input type="radio"/> no
Technical college:	<input type="radio"/> yes	<input type="radio"/> no
University:	<input type="radio"/> yes	<input type="radio"/> no
Academic degree:		
Languages:		
Other/further educations:		
Have you already been self-employed?	<input type="radio"/> yes	<input type="radio"/> no
Why have you terminated this business?		
Has been or is a bankruptcy proceeding instituted?	<input type="radio"/> yes	<input type="radio"/> no

5. Company data:

(nicht für Privatpersonen/Existenzgründer)

Company name:	
Address:	
Form of the company:	
You are in which relation with this company?	<input type="radio"/> sole owner <input type="radio"/> partner with _____ percent
How many people are employed by this company?	_____ employees

Who will be leading the LIPIZZANER Confiserie & Coffee Shop?	<input type="radio"/> personally	<input type="radio"/> managing director
Do you wish to implement a LIPIZZANER Confiserie & Coffee Shop within your company?	<input type="radio"/> yes	<input type="radio"/> no
If no, where do you plan to raise a LIPIZZANER Confiserie & Coffee Shop?	Address: <input type="radio"/> not certain until now	
Short description of the place of the planned shop: (frequency, traffic-free zone, surrounding, etc.)		
How many locations do you plan?	<input type="radio"/> one <input type="radio"/> more: _____ locations	

Please describe your reference to Austria or resp. to the LIPIZZANER Confiserie & Coffee Shop:

Date: _____

Signature: _____

