

The background of the entire image is a repeating pattern of stylized flowers and leaves in a light orange or peach color. The flowers have multiple layers of petals, and the leaves are simple and pointed. The pattern is dense and covers the entire area.

Kadar Khan's
Sheesha

PARTNER WITH US

FRANCHISE INFORMATION OVERVIEW

“RESTAURANT & Q.S.R”

*****RESTAURANT*****

- **MINIMUM FINANCIAL REQUIREMENTS OF AN INDIVIDUAL - 0 - 5CR**
- **EXPERIENCE - 0-5 YEARS**
- **TOTAL ESTIMATED INNICIAL INVESTMENTS - 60L - 1.5CR**
- **FRANCHISE FEES - 15L - 20L**
- **DEPOSIT FEES - 2L**
- **FRANCHISE TRAINING - AS PER REQUIREMENTS**
- **ROYALTY FEES - 10% OF GROSS SALE**
- **UNIT SIZE - 2500SQFT - 4000QFT**
- **TERM OF FRANCHISE AGREEMENT -3YEARS + 3 YEARS**

*****Q.S.R*****

- **MINIMUM FINANCIAL REQUIREMENTS OF AN INDIVIDUAL - 0 - 5CR**
- **EXPERIENCE - 0-5 YEARS**
- **TOTAL ESTIMATED INNICIAL INVESTMENTS - 20L-30L (+6 MONTH OPERATING CAPITAL)**
- **FRANCHISE FEES - 10L**
- **DEPOSIT FEES - 2L**
- **FRANCHISE TRAINING - AS PER REQUIREMENTS**
- **ROYALTY FEES - 10% OF GROSS SALE**
- **UNIT SIZE - 500SQFT - 1000QFT**
- **TERM OF FRANCHISE AGREEMENT -3YEARS + 2 YEARS**

*****PER UNIT DEVELOPMENT, DOSE NOT INCLUDE REAL ESTATE, INVESTMENT COST MAY VARY*****

“APPLICATION PROCESS”

*** APPLICATION SUBMISSION ***

ALL FRANCHISE CANDIDATES MUST COMPLETE AN APPLICATION PACKET TO START APPROVAL PROCESS. IF PARTNERS ARE INVOLVED, ALL PARTNERS MUST COMPLETE THEIR OWN APPLICATION.

*** NON DISCLOSURE & LETTER OF INTENT (PRE-QUALIFICATION REVIEW) ***

CANDIDATES FRANCHISEES ARE REQUIRED TO SIGN, AND PAY FEES OF DEPOSIT (REFUNDABLE OR PARTIALLY REFUNDABLE IN DIFFERENT CASES) TO PROCESS THE APPLICATION.

*** FINANCIAL APPROVAL ***

KADAR KHAN HOSPITALITY PVT.LTD EVALUATES EACH APPLICATION TO ASCERTAIN A CANDIDATE'S ABILITY TO SUCCESSFULLY CAPITALIZE A KADAR KHAN'S SHEESHA RESTAURANT.

*** 3 DAY PQR (PRE - QUALIFICATION REVIEW) ***

CANDIDATES PARTICIPATE IN A S.O.P BREEFE FOR 1-3 DAYS TO BEGIN TO GAIN AN UNDERSTANDING OF WHAT IS INVOLVED IN OPERATING A KADAR KHAN'S SHEESHA RESTAURANT.

*** FINAL AGREEMENT SIGNED & FEES PAID ***

ONCE ALL THE REQUIREMENTS ARE MET IN THE APPLICATION PROCESS AND A TERRITORY HAS BEEN AGREED UPON. FRANCHISE ADMINISTRATION WILL PREPARE FINAL AGREEMENTS OF SIGNATURE AND PAID ALL FEES.

*** TRAINING ***

2 WEEKS INTENSIVE FRANCHISEE, SENIOUR MANAGEMENT, CHEF/COOK AND SERVICE STAFF, TRAINING PROGRAM AT A DESIGNATED PLACE BY THE COMPANY.

*** SECURE TERRITORY ***

ALL FRANCHISEES SECURE ARE REQUIRED TO SIGN A FRANCHISE AGREEMENT AND PAY FEES ASSOCIATED, TO SECURE THEIR TERRITORY.

*** SUBMIT REAL ESTATE PACKAGES ***

A PRELIMINARY SITE APPLICATION SPECIFYING THE INTENDED SITE FOR DEVELOPMENT MUST BE SUBMITTED ALONG WITH REAL ESTATE PACKAGES FOR EVALUATION.

*** FRANCHISE AGREEMENT ***

THE FRANCHISE AGREEMENT MUST BE SIGNED AND FRANCHISE FEES MUST BE PAID PRIOR TO START OF CONSTRUCTION.

*** DEVELOP SITE ***

ONCE THE PLAN IS APPROVED CONSTRUCTION BEGINS AND EQUIPMENT ORDERED.

*** TRAIN CREW ***

ALL CREW MUST BE TRAINED BEFORE OPENING, SUMMIT RESTAURANT AND KIOSK ROSTER FOR REVISE.

*** CHECK LIST ***

ALL WORK SHOULD BE FINISHED AND VERIFIED BY INDIVIDUAL DEPARTMENTS AND MAKE SURE ALL WORK IS DONE AND HANDED OVER PROPERLY.

*** OPENING APPROVAL ***

RESTAURANT IS APPROVED TO OPEN.

PERSONAL DATA HISTORY

NAME : _____ MIDDLE NAME _____ SURNAME _____

DATE OF BIRTH : __ / __ / ____

MARITAL STATUS : SINGLE / MARRIED

NUMBER OF DEPENDENTS : _____

PAN : _____

HOME ADDRESS : _____

CITY : _____

STATE : _____

POSTAL CODE : _____

HOW LONG? _____

PREVIOUS ADDRESS : _____

COUNTY : _____

HOW LONG? _____

BUSINESS PHONE : _____

MOBILE PHONE : _____

EMAIL ADDRESS : _____

SPOUSE'S NAME : _____

CHILDREN'S :

NAME : _____

NAME : _____

AGE : ____

AGE : ____

NAME : _____

NAME : _____

AGE : ____

AGE : ____

- UNDER WHICH OF THE FOLLOWING WOULD YOU OPERATE YOUR UNIT FRANCHISE?

GENERAL PARTNERSHIP _____ PVT. LTD. COMPANY _____ SOLE PROPRIETORSHIP _____

OTHER _____

PUBLIC LTD. COMPANY _____

- WOULD YOU EXPECT TO DEVOTE YOUR FULL TIME TO THIS BUSINESS? YES / NO

- NECESSARY CASH FUNDS TO INVEST IN THE BUSINESS? YES / NO

EXPLAIN: _____

- EXPERIENCE IN F&B? YES / NO

EXPLAIN: _____

- CITY / AREA / STATE OF INTEREST? _____

- BUDGET: _____

- FORMAT OF INTEREST: RESTAURANT / Q.S.R / FMCG

- REFF NAME: _____

***** FINAL ATTENTION *****

I UNDERSTAND THAT THIS APPLICATION IS FOR INFORMATIONAL PURPOSES ONLY, AND IT IS NOT BINDING UPON THE COMPANY OR ME. I HAVE GIVEN OR PROVIDED THE INFORMATION FREE OF MY WILL, AND TO THE BEST OF MY KNOWLEDGE, THE INFORMATION I HAVE PROVIDED IS ACCURATE. I UNDERSTAND THAT THE COMPANY WILL RELY ON THE INFORMATION I HAVE PROVIDED TO ASSESS MY QUALIFICATIONS TO BECOME STATE / CITY / OUTLET FRANCHISE OWNER. I ALSO AUTHORIZE COMPANY TO CONDUCT A COMPLETE INVESTIGATION OF MY BUSINESS AND PERSONAL BACKGROUND, FINANCIAL HISTORY INCLUDING A CRIMINAL CHECK AT ANY TIME AND FOR WHATEVER PURPOSE.

DATE: / /

SIGNATURE / STAMP
