

LOIFS FORM

(LETTER OF INTEREST FOR FRANCHISE SETUP)



Date

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PERSONAL INFORMATION

Applicant Name		Mobile	+880
Company Name		Email	
NID No			
Occupation	<input type="checkbox"/> Private Service <input type="checkbox"/> Govt. Service <input type="checkbox"/> Business <input type="checkbox"/> Others		
Address			

CURRENT BUSINESS INFORMATION (If any)

Business Name			
Business Type	<input type="checkbox"/> Electronics <input type="checkbox"/> IT <input type="checkbox"/> Others (.....)		
Location			
Business Tenure	Year	Month	

PROPOSED PLACE FOR FRANCHISE SHOWROOM SETUP

Address					
Space	(in sft.)	Location	<input type="checkbox"/> Ground Floor	Ownership	<input type="checkbox"/> Own <input type="checkbox"/> Rent
Road Facing	<input type="checkbox"/> Yes <input type="checkbox"/> No	(If yes)	Front side: <input type="checkbox"/> 30 ft and above <input type="checkbox"/> 40 ft and above		
Readiness of space	<input type="checkbox"/> Immediately <input type="checkbox"/> After 1 Month <input type="checkbox"/> After 3 Months				
Dimension	Width:	(ft)	Length:	(ft)	

INVESTMENT PLANNING

Investment Capacity	(Amount in BDT)
No of person	<input type="checkbox"/> Individual <input type="checkbox"/> Partnership <input type="checkbox"/> Organization

ESSENTIALS:

- 1) The franchise space must be located on the ground floor and beside the main road.
- 2) Showroom's road facing length must be at least 30 feet.

Write in brief about your interests, plans, your financial or local capabilities and business strengths that will help us to decide to select you as a Franchise Partner.

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Profit-sharing and other partnership policy will not be discussed over the telephone to ensure the confidentiality.

The decision to set up Sony-Smart franchise will be taken by mutual consent is subject to business policy discussion through direct meeting after receiving this LOIFS form.