

QUEST APARTMENT HOTELS FRANCHISE APPLICATION

| , | Applicant's name | |
|---|------------------|--|
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NB: It is advisable that all applicants periodically save this form to avoid losing any information.

FRANCHISE APPLICATION

Quest Apartment Hotels (NZ) LTD.

Confidential expression of interest

This document is not a contract and does not obligate either party in any way. You are requested to fill out this form in full so that we can better evaluate your interest. The information provided is held in confidence in accordance with the Privacy Policy referred to on the last page of this application.

Note: Please attach a resume for each person involved in the application.

SECTION 1 - PERSONAL INFORMATION

| Title Surname | | Given | name(s) | | |
|---|---------------------------|---|----------------------|---------------|---------------|
| | | | | | |
| Date of birth Email | | | | | |
| | | | | | |
| Mobile | Telephone (home) | Drivers | license number | | |
| | | | | | |
| | | [| | | |
| Current residential address Street number and name | | Town/suburb | | City | Postcode |
| Street number and name | | IOWII/SUBUID | | | rostcode |
| | | | | | |
| How long have you lived at this add | | property you live in? | • | | |
| | Yes No | | | | |
| Previous residential address (if | lived at current address | for less than 5 years | 5) | | |
| Street number and name | | Town/suburb | | City | Postcode |
| | | | | | |
| Family | | | | | |
| | spouse/partner | | Occupation of spouse | e/partner | |
| | | | | | |
| Number of children Ages of child | ren Number of othe | er dependants | | | |
| | | | | | |
| | | | | | |
| Employment Are you a citizen of New Zealand? | Yes No | | | | |
| | res No | | | | |
| Immigration Are you authorised by Immigration | New 7ealand to operate | vour own business | ? Yes No | | |
| If yes please provide evidence of thi | · | . , , , , , , , , , , , , , , , , , , , | | | |
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| | | | | | |
| If you are not authorised are you in | the process of applying | for such authorisati | on? Yes No | | |
| Have you ever worked for Quest Apa | artment Hotels? If yes, w | here and what role? | Please name your l | last direct m | nanager there |
| Yes No No | | | | | |



| Health | |
|---|---|
| Please rate your level of physical fitness | |
| Poor Good Excellent | |
| Do you have any condition(s) that could potentially impact upon your ability to successfully undertake the responsibilities of a franchisee? If yes, please give details | |
| Yes No No | |
| | |
| Are you physically capable of working extended working hours on a day to day basis in order to successfully operate a Quest Franchise Business? If no, please give details | |
| Yes | |
| | |
| Language skills | |
| Rate your ability to read and write in English Rate your ability to speak clearly in English | |
| Poor Good Excellent Poor Good Excellent | |
| Is English your first language? Yes No No | _ |
| If English is not your first language have you completed secondary school or tertiary education education in New Zealand? Yes 🗌 No If no ,please confirm that you have completed IELTS to level 7? Yes 🗌 No 🗌 | |
| Computer literacy | |
| Rate your ability to use computers | |
| Beginner Intermediate Advanced | |
| Describe your level of computer literacy and your typical daily interaction with a computer | |
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| SECTION 2 - QUEST FRANCHISE OPPORTUNITY | |
| SECTION 2 QUEST TRANSCENISE OF TORTONT T | |
| Where did you hear about the Quest franchise opportunity? Please tick the appropriate boxes | |
| ☐ Google ☐ SEEK commercial ☐ Quest website ☐ Franchise business | |
| Advertising FCA | |
| Referral Quest property | |
| Quest employee (if so, who?) Other (if other, please provide details) | |
| | |
| What are your preferred franchise locations? Please provide the reason for your choice | |
| 1. | |
| 2. | |
| 3. 3. | |
| 4. 4. | |
| 5. 5. | |
| Are you willing to relocate to any location within New Zealand if the opportunity presents | |
| Yes No | |



| What is your ideal timeframe to own a Quest franchise? Please tick one box |
|---|
| ☐ Immediate ☐ 12 months ☐ 3 months ☐ 1 year plus |
| 3 months 1 year plus 6 months |
| |
| What are your reasons for pursuing a Quest Franchise? Please number all boxes in order of importance from 1 - 6 Personal career challenge Opportunity to work with family |
| Control and independence Desire to grow personal wealth |
| Security and stability Opportunity for flexible time management |
| What is your anticipated or expected length of time you expect to own a Quest franchise? (We understand this may change |
| over time) |
| |
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| SECTION 3 - QUALIFICATION, SKILLS AND TRAINING |
| |
| What is your highest level of qualification attained? (eg NCEA, Bursary, diploma, degree master etc) |
| |
| |
| What was the qualification obtained? |
| |
| |
| List academic/trade/other qualifications attained? |
| |
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| |
| Describe any other relevant qualification or training |
| |
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| SECTION 4 - CURRENT SELF EMPLOYMENT |
| SECTION 4 - CORRENT SEEL EMPLOTMENT |
| |
| Self employment |
| Are you currently self employed? Number of years you have owned the business? |
| Yes No If no please go to section 5 |
| |
| Type of business |
| |
| |
| Did you establish this business or purchase this business? |
| Established Purchased Purchased |
| Name of business Occupation/position |
| Name of business Occupation/position |
| |
| Current salary Benefits |
| |



| Estimated gross turnover this year NZD Estimated profit this year NZD |
|---|
| Business address Building name/business park Level, street number and name |
| Town/suburb City Postcode |
| Please go to section 6 |
| SECTION 5 - CURRENT EMPLOYMENT |
| If you are currently self employed, please go to section 6 |
| Name of current employer Occupation/position |
| Length of time with the employer |
| Current salary Benefits |
| Employer address Building name/business park Level, street number and name |
| |
| Town/suburb City Postcode |
| Please provide current contact person at place of employment? Can we contact your employer in regards to this application? Yes No |
| Current employee website |
| SECTION 6 - EMPLOYMENT/SELF EMPLOYMENT HISTORY |
| Please list your business experience over the past ten years Dates No. years Employer name and address Occupation/position Reasons for leaving |
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SECTION 7 - BUSINESS SKILLS/EXPERIENCE, APPROACH AND MOTIVATION

| Are you prepared to follow the Quest | Business Format System? | |
|---------------------------------------|---------------------------------------|---------------------------------------|
| Yes No No | | |
| What is your reason for wanting to g | o into business? Please explain why y | ou have chosen a Quest Franchise? |
| | | |
| | | |
| | | |
| Please rate your business experience | in the following areas? | Years of experience in this area |
| Business to business sales | Poor Good Excellent | |
| Financial management | Poor Good Excellent | |
| People management | Poor Good Excellent | |
| Networking | Poor Good Excellent | |
| Customer service | Poor Good Excellent | |
| Are there any areas in which you feel | may require assistance or training? | |
| | | |
| What do you believe to be your streng | gths that you would bring to the Que | st network and business? |
| | | |
| | | |
| What do you believe to be your weak | nesses in running a Quest business? | |
| | | |
| | | |
| What are you 3 key achievements in y | your career/business? | |
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| | | |
| Are you prepared to be personally cor | mmitted to this business, to work har | d to achieve your business goals? |
| | | , , , , , , , , , , , , , , , , , , , |
| | | |
| Do you have any business interests th | hat would conflict with being an own | er of a Quest franchise business? |
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| What motivates you for success in your career/business? |
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| What do you consider to be the most important characteristics of a good business owner or manager? |
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| What do you consider the key factors for excellent customer service? |
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| |
| To what extent have you been involved in sales during your career/business life? |
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| Why do you believe Quest should grant you the rights to purchase a franchise? |
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| |
| What experience do you have leading teams? |
| That experience de Journale reduing ceams. |
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| Have you explored any other franchise opportunities? What is your assessment of them? |
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| Why is it important to build relationships? Provide examples of your ability to build relationships. |
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SECTION 8 - RELATIONSHIPS

| Do you anti Yes 🔲 N | icipate your spouse/p | partner being involv | ed in the bus | iness? | | | |
|------------------------|---|--|---|---------------------------------|--------------------|---------------------------|--------------|
| companies, | of your knowledge, a , subsidiaries or advis | re you related to an sors? If yes, please p | ly director or o | employee of Q ontact details | luest Apartment H | lotels or any of its as | sociated |
| Yes N | lo 🗌 | | | | | | |
| Title | Surname | | | Given | name(s) | | |
| | | | | | | | |
| Telephone | | Email | | | | | |
| | | | | | | | |
| SECTIO | N 9 - REFEREES | 5 | | | | | |
| Please list 2 | referees (eg employe | er, client, colleague, | supplier etc) | | | | |
| Referee 1 | | | | | | | |
| Name | | | Relationship | | | | |
| | | | | | | | |
| Telephone | | Email | | | | | |
| Current re | esidential address | · <u></u> | | | | | |
| | ber and name | | Tow | n/suburb | | City | Postcode |
| | | | | | | | |
| Referee 2 | | | | | | | |
| Name | | | Relationship | | | | |
| | | | | | | | |
| Telephone | | Email | | | | | |
| | | | | | | | |
| | | | | | | | |
| | esidential address ber and name | | Town | /abrb | | City | Dostoodo |
| Street num | ber and name | | IUvv | n/suburb | | City | Postcode |
| | | | | | | | |
| SECTIO | N 10 - ADVISO | RS | | | | | |
| Please list a | iny persons you will b | e relying on for adv | vice about the | Quest franch | ise (eg accountant | ;, solicitor, financial a | advisor etc) |
| Advisors | | | | | | | |
| Legal Adv | visor: | | | Name: | | | |
| Phone: | | | | Email: | | | |
| Financial | Advisor: | | | Name: | | | |
| Phone: | | | | Email: | | | |
| Accounta | nt: | | | Name: | | | |
| Phone: | | | | Fmail: | | | |



SECTION 11 - FINANCIAL POSITION

Please indicate your current financial position (Note: if you progress through the Quest franchise selection process you will be required to show proof of your income, assets and liabilities)

| Assets (at current market value) | Liabilities |
|----------------------------------|-----------------------|
| Current bank balance | Bank overdraft |
| Value of house if owned | House mortgage/es |
| Other property owned | Other loans |
| Investment shares | Hire purchase |
| Business assets | Other creditors |
| OTHER ASSETS | CREDIT CARDS |
| Description: | Credit card type: |
| Total Assets (A) | Total Liabilities (B) |
| Total Equity | Balance (A minus B) |

Please provide details of your current assets.

| Asset name | Type of valuation (market, bank, or personal) | Asset value | Debt amount against asset | Equity amount in asset | If there is a loan against asset, what are the current monthly repayments? | What is the monthly income generated by the asset? | Do you intend to sell this asset to buy your franchise? |
|------------|---|-------------|------------------------------|------------------------------|--|--|---|
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| If you have assets held in trusts please clar | ify. | |
|---|------|--|
| | | |

IMPORTANT: Where any of the assets listed above are owned by a trust, the trust will be required to provide a guarantee of the franchisee's obligations under the Franchise Agreement and General Security Agreement.



| Have you given any personal guarantees for loans or other credit facilities? If so, provide details |
|--|
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| |
| |
| |
| Do you plan to have a financial partner? If yes, will he/she be active? |
| Yes |
| If yes, how will they contribute? |
| |
| |
| Please explain how you propose to fund the purchase of the business? (example own equity, Bank or private financing etc) |
| |
| |
| If you will be seeking financing, from whom and how much will you be seeking? |
| n you wan be seeming mananem, more and man mayou be seeming. |
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| SECTION 11 - BUSINESS DETAILS |
| |
| Will you apply on behalf of a company, trust or partnership? |
| Yes No If no, please go to section 12 |
| If yes, please select an option |
| Company Trust Partnership |
| |
| Business name |
| |
| Registered office address |
| Building name/business park Level, street number and name |
| |
| Trum (a hards |
| Town/suburb City Postcode |
| |
| Director(s) |
| |
| Secretary(s) |
| 566.64.7(5) |
| |
| Shareholder(s) |



| Trust details | |
|--|---|
| Trust type | Trust name |
| | |
| If business is a trust, please provide beneficia | ries. |
| | |
| | |
| | |
| | |
| SECTION 12 - LEGAL POSITION | |
| Are you a declared or undeclared bankrupt? | |
| Yes No If yes, please provide date. | |
| Is any legal action current, pending or historic | cal against you or any company associated with you? If yes, please provide reasons. |
| Yes No No | |

SECTION 13 - DECLARATION OF UNDERSTANDING AND DISCLOSURE

I/We understand that in signing this form I am/we are not legally obligated to purchase a Quest Franchise, and that all information supplied by me/us is confidential for the purpose of assessing our desirability and qualifications as Applicant(s).

I/We further understand that this Application Form collects personal information about me and that the intended recipients of this information are Quest Apartment Hotels (NZ) Ltd and its agents and representing.

I/We certify that all of the information given in this application and questionnaire is true, correct and complete.

In order for Quest Apartment Hotels (NZ) Limited ("Quest") to determine my/our suitability and eligibility to become a Quest Franchisee. I/We authorise and direct:

- 1. Any personal referees I/we have referred to in my/our application or any other person (including current and previous employers and any professional body) Quest considers appropriate to provide Quest with any information it requires; and
- 2. Any credit/debit agency to provide Quest with any information it reasonably regards necessary about my/our credit history from any credit/debit collection agency and or from any other person Quest considers appropriate.

I/We understand that if Quest is not able to access the information referred to above that it may not be able to determine my/our suitability and eligibility for purchasing a Quest Franchise and accordingly this may affect Quest's decision whether or not to enter into a Quest Franchise Agreement with me/us.

I/We also understand that I/we have certain rights or access and correction of my/our personal information under the Privacy Act 1993.

I/We understand that referees and previous employers may be contacted. Quest will not contact your current employer without my/our specific prior approval. If I/we do not become a Quest Franchisee this information is to be destroyed or returned to me/us at my/our request.

Any personal information collected about you will be held at the Quest Corporate Office New Zealand, Level 4, Como Street, Takapuna, Auckland.

If you would like a copy of our Privacy Policy relating to Franchisees please write to the Quest Apartment Hotels (NZ) Ltd, PO Box 33-138 Takapuna, Auckland, New Zealand 0740



SECTION 13 - DECLARATION OF UNDERSTANDING AND DISCLOSURE CONT.

| Applicant/Director | | | Date | |
|--|--|--|------|--|
| Applicant/Director | | | Date | |
| Applicant/Director | | | Date | |
| Signed for and on behalf of the Applicant Company: | | | | |
| Director: | | | | |
| Witness signature: | | | | |
| Witness occupation: | | | | |
| Witness address: | | | | |



SECTION 14 - CONFIDENTIALITY AND NON-DISCLOSURE AGREEMENT

| This AGREEMENT is made on the | day of | 20 | |
|--------------------------------|--------|----|--|
| BY AND BETWEEN | | | |
| (Hereinafter called Recipient) | | | |
| of (Address) of the first part | | | |

AND IN FAVOUR OF:

Quest Apartment Hotels (NZ) Ltd and its associated entities (hereinafter called QAHNZ).

WHEREAS:

- A. In return for QAHNZ providing to Recipient Confidential Information (hereinafter described), Recipient agrees to enter into this Deed and be subject to its terms and conditions.
- B. Recipient has or may hereafter have possession of and/or access to Confidential Information, disclosure and/or misuse of which may cause substantial direct and consequential loss and damage to QAHNZ.
- C. QAHNZ wishes to maintain the confidentiality and integrity of all and any Confidential Information.

NOW THIS AGREEMENT WITNESSETH and the parties hereto agree as follows:

QAHNZ will make available to Recipient confidential and proprietary information of QAHNZ, known only to QAHNZ which is necessary for the purpose stated herein; and information which will become known to the Recipient as a consequence of the conduct of business discussions with or the establishment of a business arrangement with QAHNZ; on the basis that such Confidential Information is made available subject to the following terms and conditions:

- "Confidential Information" means any information, oral or written, made available by QAHNZ which relates
 to QAHNZ business activities as well as information that comes into being or becomes known as a consequence of
 QAHNZ undertaking consultations or negotiations with the Recipient.
- 2. Recipient will receive and maintain all Confidential Information in strict confidence and shall not use Confidential Information for its own benefit or misuse or disclose it in whole or part to any third party, except such information which (a) is already known to the receiving party or is publicly available at the time of disclosure; (b) is disclosed to the Recipient by a third party who is not in breach of an obligation of confidentiality; or (c) becomes publicly available after disclosure through no act of the Recipient or (d) to its professional advisors strictly for the purpose of seeking advice in relation to Quest franchise opportunity.
- 3. All Confidential Information shall remain the property of QAHNZ except where such Confidential Information is already the property of a third party. Upon QAHNZ 's written request, Recipient shall, at QAHNZ's option, either return to QAHNZ or destroy all such Confidential Information together with any summaries of, or extracts from, such information and all copies thereof which Recipient may have in its possession or control, including removal of any such information from electronic storage. Recipient shall ensure that all parties to whom it has disclosed such information will comply with QAHNZ 's request. Recipient shall give QAHNZ a written notice stating that it has returned or destroyed all Confidential Information.
- 4. Recipient will use the Confidential Information only for the purpose of establishing a business relationship with QAHNZ and for no other purpose.
- 5. Recipient shall not disclose in whole or in part the Confidential Information to any third party except as it may be authorised in writing by QAHNZ.
- 6. Recipient obligation under this Deed shall survive the termination of its association with QAHNZ regardless of the manner of such termination and shall be binding upon Recipient's successors and assigns.
- 7. No failure to exercise, or delay in exercising, on the part of either party, any right, power or privilege hereunder shall preclude the further exercise of the same right or the exercise of any other right hereunder.
- 8. This Deed shall be governed by and construed in accordance with the laws of New Zealand.
- 9. Recipient agrees to identify QAHNZ for all costs (including all legal costs), expenses and damages incurred by QAHNZ as a result of Recipients breach of this agreement.

SECTION 14 - CONFIDENTIALITY AND NON-DISCLOSURE AGREEMENT CONT.

IN WITNESS WHEREOF the parties have hereunto set their hands on the date first hereinbefore written

| For and on Behalf of Recipient |
|--------------------------------|
| Signature: |
| Date: |
| (Name Printed) |
| |
| Witness: |
| (Signature of Witness) |
| |
| (Name Printed) |
| |
| |

Quest Apartment Hotels (NZ) Ltd PO Box 33-138, Takapuna, Auckland 0740



SECTION 15 - APPLICANT CERTIFICATION

| I understand that the purpose of this application is for Quest Apartment Hotels to obtain (only) information about the applicant. |
|---|
| It is in no way binding upon either Quest Apartment Hotels or the applicant. I certify that the information provided in this |
| application is true or correct. |

| Applicant signature | Date |
|---------------------|------|
| | |
| | |

Further information regarding your application

Further information regarding your application

- 1. Please return this completed form along with a copy of your resume to:

 Aaron Carpenter acarpenter@questapartments.co.nz or courier to: Quest Apartment

 Hotels (NZ) Ltd , Level 4 / 19 Como Street Takapuna, Auckland , New Zealand,0622
- 2. Should you have any queries in relation to your Franchise Application, please contact Aaron Carpenter + 64 9 973 4853 or email: acarpenter@questapartments.co.nz

SECTION 16 - APPLICANT CHECKLIST

| | Franchise Application Form |
|--------|--|
| | Employrite data base and credit check form |
| | New Zealand Ministry of Justice Forms |
| | Copy of New Zealand or overseas Passport and or New Zealand Driver's License |
| | Quest Apartment Hotels Self Assessment |
| | Payment of Application fee |
| Please | email through to acarpenter@questapartments.co.nz |

Quest Apartment Hotels (NZ) Ltd Level 4, 19 Como Street, Takapuna

Auckland 0622



Or courier to: